

HealthTalk

DECEMBER 2021

TRINITYHEALTH.ORG

KEEPING OUR NEIGHBORS INFORMED

COVID-19: Trinity Health continues to keep our staff, patients, families, and community safe. Please visit trinityhealth.org/coronavirus for vaccine, testing, treatment, and other current information.

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Trinity Health Offering Pediatric COVID-19 Vaccine

Trinity Health is offering appointments to families seeking pediatric doses of Pfizer's COVID-19 vaccine. The Centers for Disease Control and Prevention (CDC) issued a recommendation allowing for distribution of a smaller dose of the Pfizer vaccine for kids ages 5 to 11.



Anthony Udekwe, MD

Parents who would like to have their children aged 5 years and older vaccinated may call Trinity Health's Pediatric Department for an appointment at 701-857-5413. The pediatric center is on the 3rd floor of Health Center – Medical Arts. Masks are required in all Trinity Health facilities.

Pediatric appointments are also available for seasonal flu vaccine for children aged 6 months and older. Families may call the same pediatric appointment line at 701-857-5413. In addition, adult vaccines for COVID-19 and influenza can be scheduled by calling 701-857-2515.

Trinity Health pediatrician Anthony Udekwe, MD, urged families to get their young ones vaccinated.

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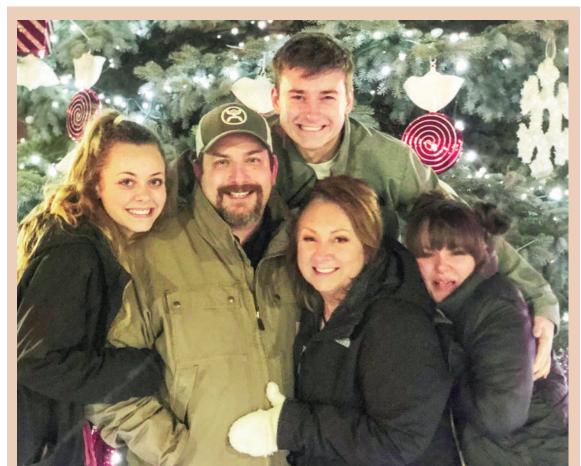


photo courtesy of Amy Tersteeg

COVID-19: Up Close & Personal

This is a health story about a virus. But this story is about much more than germs. It's not about political agendas, government mandates, or pharmaceutical profits. It's an intimate look at a family's respect for individual choice, their personal battle, and how decisions – even logical ones – sometimes have irrational outcomes.

Amy Gruber met Rob Tersteeg in 2011 through a colleague at work. She was employed at a construction company in Burnsville, MN, and the company attorney happened to be his sister. They were introduced, and over time, Rob started showing up more often. He worked as a safety manager for an oil company in ND, but their relationship blossomed over long telephone conversations and frequent visits. In 2013, they were engaged, so Amy relocated to ND, and they married a year later.

Amy started at Trinity Health in 2013 and has served as the assistant director of Operations/Physician Services for five years, which could also be tagged as "Outpatient Planning Chief." Her job is to support the planning and logistics of various programs at Minot's clinics, as well as several rural clinics affiliated with Trinity. For instance, Amy and her team are responsible for arranging COVID testing and vaccine clinics for the general public. "Setting up vaccination clinics is the most rewarding part of my career thus far," she said. "It is a lifeline that offers some hope of things getting back to normal."

When COVID vaccines first became available, the expectation was that staff would get vaccinated, and Amy didn't hesitate. Her position at Trinity influenced feelings of responsibility to public health in the face of this new pandemic, and that it was the right thing to do. Rob wasn't as quick to sign on, and like many, wanted more information about safety and outcomes. It wasn't an immediate priority. "In our family, healthcare decisions are a personal choice," she said. "I respected Rob's choice (not to get vaccinated) and knew he'd get around to it sooner or later." That decision would come to haunt them.

According to the North Dakota Department of Health, 46.8% of the population in Ward County has completed the primary COVID-19 series – slightly less than half. The Tersteegs divided decision of whether to vaccinate falls in line with many in our community.

In early May, they travelled to northern Minnesota for a family funeral. "It was a celebration of life, where we enjoyed time with family. Most were vaccinated, some wore masks; we maintained social distancing," she said.

The next week at home, Rob developed a persistent cough and had difficulty breathing. "I remember saying 'Geez, I hope it's not COVID,'" Amy said. He decided to get tested for COVID at the walk-in clinic, to prove to his boss he could return to work. The follow-up phone call came quickly delivering news that indeed, Rob had tested positive for COVID-19. He was advised to self-isolate, rest, and treat his symptoms. The weekend promised sunny skies, and the family was anxious to put the boat in the water at their cabin, so Rob, Amy and their kids decided the lake would be the perfect venue for rest and relaxation.

Rob stayed home from work the following week. He and Amy had created a group text with friends and family to keep everyone updated on his progress. By Thursday afternoon, Amy noticed Rob was no longer responding to texts, which raised red flags. She tried calling, with no answer, so she went home and found him awake, but out of breath. Using a pulse oximeter attached to his finger, Amy took more than one reading to measure the oxygen level of his blood. An oxygen saturation level of 95 percent is considered typical

COVID-19 continued from page 1

for most healthy people. A level of 92 percent or lower can indicate potential hypoxemia, which is a seriously low level of oxygen in the blood. Amy's results measured his blood oxygen anywhere from 64-67 percent. She was certain she must be doing something wrong, so she took him to the ER, "just to make sure" things were okay. Oximeter tests in the ER measured Rob's oxygen levels at 74 percent; X-rays and a CT scan confirmed he had pneumonia.

On May 20, Rob was admitted to the ICU and given a gamut of medicines, as well as supplemental oxygen. His blood oxygen levels were not responding as hoped, so doctors later implemented high flow oxygen, which increased oxygen saturation levels to 88 percent for a short while. A week later, Rob was moved to a BiPAP machine, which is a form of noninvasive ventilation therapy. He hated the BiPAP but couldn't breathe without it. Rob's oxygen level hovered around 84 percent.

The highly contagious nature of COVID-19 generally does not allow patients to have visitors, so Amy sat vigil by a window outside his room. Someone provided dry erase boards, which allowed them to communicate by writing messages to one another through the glass. "Rob was tired. He was angry. He didn't know why he wasn't improving," Amy wrote in her journal. "COVID is not merciful, but prayer is powerful."

Despite the efforts of the critical care team, Rob's blood levels were not responding to the supplemental oxygen, so a week later, the decision was made to prone him to allow the lungs more room to breathe and release secretions. Using a menagerie of pillows, cushions, and protective pads, the respiratory therapist helped turn his head, while a team of ICU nurses — three on each side — turned Rob onto his front side. He was sedated and left prone for 12 hours. This new therapy helped maintain Rob's oxygen levels, but his continual respirating — as though he were running a marathon had doctors concerned. If this continued, the next step would be intubation with a ventilator.

May 29 was Amy's birthday. Rob had arranged with his nurse, Zoe, to have flowers, chocolate and a gift waiting for Amy when she came to visit. "Nurse Zoe had helped Rob make my birthday special," she said. "Her touch was all over it, but his thought was behind it. It was

The doctors' concerns about Rob's low oxygen levels continued, which led to increased preparations and conversation about the possibility of intubation. For the most serious COVID-19 cases in which patients are not getting enough oxygen, doctors may use ventilators to help a person breathe. Patients are sedated, and a tube inserted into their trachea is then connected to a machine that pumps oxygen into their lungs. Although ventilators save lives, a sobering reality has emerged during the COVID-19 pandemic: many intubated patients do not survive. Studies conducted during the first wave of COVID-19 pandemic showed 43% in-hospital mortality among patients who underwent endotracheal intubation.

That night shortly after arriving home, Amy got a call from the night nurse. "It's time to intubate," she said, "but Rob won't do it unless you're here." Amy returned to the ICU, called for a chaplain and prayed with her husband.

Exhausted and afraid, Rob took his white board and wrote to Amy, "I am logical, I know it needs to be done. I need to make peace with it."

"I would never let them do something that would take you away from me," she wrote back.

It would be their last conversation.

On May 30, Rob was put on life support and airlifted to the University of Minnesota Hospital. He suffered intercranial bleeding and was pronounced dead June 3, less than one month after his diagnosis.

Nowadays, Amy has a lot of time to think. She thinks about him not being vaccinated, and not being here. She wonders if her last words to him sounded shallow or true. She regrets their last conversation took place on an erasable white board. But mostly, she is sad that one small decision forever changed their lives. She carries an emotional burden of "what ifs."

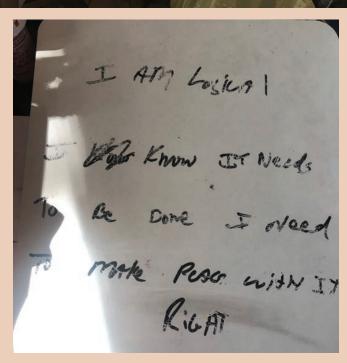
However, she is certain that telling Rob's story is necessary. "When we were in the ICU, Rob said to the doctor 'I want to share my story when this is over. There is no way people understand what this really feels like."

"Rob was so full of life. He was so helpful and could be counted on for everything. He made a point to be at the kids' games, concerts, even fundraising events. He was a great dad, always in the stands, always there to help," she said. "We never discussed what was the right thing to do, but his decision created a huge change in our lives. He was invincible, until he wasn't."

Amy knows she is different than before. She is not the same mom, friend, or worker that she was six months ago. Now, the vaccine clinics Amy facilitates have taken on new, personal meaning, with greater urgency and measurable outcomes. "Rob's illness could have been avoided," she said. "I now wonder why wait to get sick and need treatment? Why not avoid COVID in the first place?"

"Rob was so afraid and alone; he would've wanted me to tell this story. If sharing our story saves a father, brother, uncle, nephew, or son for one other family, then this is worth it. COVID is a lonely way to die."





Stay healthy with handwashing!

Germs are everywhere! They can get onto your hands and items you touch throughout the day. Washing hands at key times with soap and water is one of the most important steps you can take to avoid spreading germs to those around you.

When should you wash your hands?

- Before, during, and after preparing food
- Before eating food
- Before and after caring for someone who is sick • Before and after treating a cut or wound
- After using the bathroom, changing diapers, or cleaning up a child who has used the bathroom
- After blowing your nose, coughing, or sneezing
- After touching an animal, animal food or treats,
- animal cages or animal feces After touching garbage
- If your hands are visibly dirty or greasy



To learn more visit: cdc.gov/handwashing

Pediatric Vaccine

continued from page 1

He said his own teenaged children got their shots once they were approved for their age group, and his youngest will receive hers soon.

"This is a health battle we must win," he said. "Thank God we have vaccines available to help build herd immunity. Along with other safety measures such as social distancing and good hygiene, vaccination is our best shot. The vaccine is safe; the science is simple, and the evidence is apparent. I hope people will get their shot and bring the little ones in for theirs. It's all for us, our community, and humanity in general."

According to Pfizer, its pediatric vaccine is 91% effective in protecting kids 5 to 11 from symptomatic infections of SARS-CoV-2. The pediatric version is comprised of a smaller dose of COVID-19 vaccine — 0.2 milliliters compared with 0.3 for adults.

For more information visit: trinityhealth.org/stopthespread



HealthTalk

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Visit our website: trinityhealth.org Join us on Facebook: facebook.com/TrinityHealth.ND

Vaccine Superior to Natural Immunity

In late October, the Centers for Disease Control and Prevention published a study that indicates COVID-19 vaccination provides more reliable protection against the coronavirus, than a past infection does.

Unvaccinated people who had recovered from a coronavirus infection were fives times as likely to get COVID as people who had received both shots of the Pfizer-BioNTech or Moderna vaccines, the CDC said.

The question of whether people who have had COVID really need a shot has lingered in public opinion for some time. Healthcare providers have continually urged COVID survivors to get vaccinated, noting that the strength of natural immunity depends on people's age and health, and the severity of the infection. Results suggest two doses of an mRNA vaccine reliably produce more antibodies than a coronavirus infection does.

Casmiar Nwaigwe, MD, infectious disease specialist at Trinity Health, argues that all unvaccinated individuals are at risk, regardless of past COVID-19 infection or not. "People say they are waiting for herd immunity. The fastest way to create herd immunity is to get vaccinated," he said. "COVID is a preventable disease; most deaths from COVID are preventable deaths."

The COVID vaccination crusade is the largest in world history, resulting in over seven billion doses having been administered across 184 countries, according to Bloomberg data. This is enough to fully vaccinate 46% of the global population.

In the US, 422 million doses have been given, which translates into 65.8% of the population being covered. Closer to home, the North Dakota Department of Health reports there have been 840,997 doses administered, with 56.1% of recipients 18 and older having completed the two-shot series. (78.2% of North Dakotans age 65 and older have completed two shots.) Infectious disease experts say that vaccinating 70% to 85% of the US population would enable a return to normal life.

It is argued that vaccinated people can still get COVID, which is true. However, in mid-October, Sanford Health reported that across 22 Sanford-owned hospitals, there were 211 COVID patients in the hospital, 48 in the ICU, and 30 on ventilators. 91-97% of these patients were unvaccinated.

COVID related illnesses also tax healthcare resources for patients requiring hospitalization for other ailments. At Trinity Hospital, Jeffrey Sather, MD, chief of medical staff, noted that in October, 20% of the hospital population, and 30% of ICU admissions were due to COVID. In the six large hospitals in ND, as many as 71 patients were held in the ER, due to a shortage of beds. This does not include as many as 40 patients held in small hospitals awaiting transfer. "Patients from our region have been transferred as far as Seattle and LA to find an open ICU bed," he said in a recent discussion.

Protect yourself and your loved ones Currently, the best defense is a good offense. Vaccination offers strong protection against

Vaccination offers strong protection against COVID-19 and reduces the risk of infection, hospitalization and death.

Trinity Health offers the Pfizer BioNTech vaccine five days a week. Adult patients can get the COVID-19 and influenza vaccine simultaneously if they wish. COVID-19 shots are covered by insurance; influenza vaccinations are also covered by insurance but may have an out of pocket expense if they are self-pay. Appointments can be made by calling 701-857-2515.

The FDA has authorized the use of the Pfizer COVID-19 vaccine for children 5-11 years old, which is a smaller dose than for people 12 years and older. Influenza vaccination for pediatric patients ages 6 months and up can also be scheduled. Pediatric appointments can be made at 701-857-5413.

Side effects from the COVID-19 vaccine tend to be mild and short lived. Symptoms including pain at injection site, mild fever, chills, fatigue, and body aches can be managed with acetaminophen and rest. Relative to potential long-term complications and possible death, mild side effects could be the very argument used to encourage vaccination. Which is worse: discomfort and a slight fever as you lie in the comfort of your home, or endotracheal tubes that serve as your airway, as you lie prone for 16 hours, connected to a ventilator?

Frankly, that is no argument at all.



photo courtesy of Amy Tersteeg

Proning Proves Useful for COVID-19 Patients

Intensive care units often serve as the epicenter for advanced COVID cases, and Trinity Health is no exception. In the last 18 months, processes and protocols for caring for patients with COVID-19 continue to evolve as healthcare workers search for effective life saving measures.

Most of us are familiar with common symptoms of COVID-19 that include headache, loss of taste or smell, body aches, sore throat or a runny nose. However, emergency symptoms that require immediate attention include trouble breathing, confusion and extreme tiredness, rapid heart rate, and blue skin tone, lips or fingernails. Having these symptoms may indicate acute respiratory distress syndrome (ARDS).

ARDS occurs when fluid builds up in the elastic air sacs in your lungs. The fluid keeps your lungs from filling with enough air, which means less oxygen reaches your bloodstream and deprives your organs of the oxygen they need to function.

Prone positioning, or proning, is a strategy that was first described 40 years ago. It is the process of turning a patient with precise, safe motions from their back onto their stomach, so the patient is lying face down. It has proven beneficial in compromised COVID-19 patients because it allows for better expansion of the back-lung regions and enhances secretion removal, which may lead to better breathing. Because of this, proning has become part of care planning during the COVID-19 pandemic.

Turning a patient from back to front is not as easy as it sounds. A proning team typically consists of four to six members who may include registered nurses, respiratory therapists, physical therapists, occupational therapists, and patient care technicians. The team can require more hands, depending on the size and needs of the patient.

The process is a series of manual turns that are done in careful, coordinated moves that must manage movement of the arms, legs, intravenous access, tubes, lines, and drains attached to the patient. Think of tai chi, where students practice deliberate mindfulness and breathing, as they flow seamlessly from one posture to the next.

Patients are moved sideways, followed by turning the patient on their side and then onto their abdomen. Each position requires the patient's heart rate, blood pressure and pulse oximetry (oxygenation level) to remain stable during each move. Patients are placed in the prone position for 18 hours, and then returned to a face up position for six hours, if oxygen levels tolerate it.

A critical care physician or pulmonologist evaluates patients to determine if they are an appropriate candidate and would benefit from proning. Patients might not be qualified if they have spinal instability, unstable fractures, open wounds, tracheal surgery, burns, or are over 24 weeks pregnant.

Although proning has shown to be helpful with breathing, there are risks involved that may include airway obstruction, pressure related skin injuries, low blood pressure, irregular heartbeat, and facial and airway swelling. ICU staff may use pillows and other support to help minimize injuries, but constant monitoring remains a priority.

Trinity Health Earns 10th 'Most Wired' Recognition

The College of Healthcare Information Management Executives has again named Trinity Health among the nation's most wired health systems. It is the 10th time Trinity Health has received the honor.

Most wired recognition is based on an annual survey, which identifies healthcare organizations that are most effective in applying advanced technologies to their clinical and business operations to improve healthcare in their communities. Participants are certified at a level ranging from 1 to 10, based on their achievements. Trinity Health achieved Digital Health Certified Acute LEVEL 7, which places it in the "Special Recognition" category.

"We are proud that Trinity Health has again been recognized as most wired," said Trinity Health President and CEO John M. Kutch. "Years ago, we made a strategic decision to leverage information systems and technology to improve performance in the areas of clinical quality and safety, infrastructure, and business management. We continue to enhance our system to support

performance in the areas of clinical quality and safety, infrastructure, and business management. We continue to enhance our system to support excellence in the delivery of care for our patients."

A total of 30,135 organizations were represented in the 2021 Digital Health Most Wired program. Each organization received a customized benchmarking report, an overall score, and scores for individual levels in eight segments. Participants

are encouraged to use the report and scores to identify strengths and

opportunities for improvement.



Turkey Drive to Benefit KHRT Horn of Plenty

Trinity Health Foundation has launched its 10th Annual Turkey Drive to put turkeys and holiday food items on the tables of less fortunate families this holiday season. Ten years ago, the idea was initiated by the Trinity Auxiliary and the Trinity Health Foundation to give Trinity employees an opportunity to help our friends and neighbors in need at this special time of year.

"The staff continues to lend their full support to this effort by increasing donations year after year," says Foundation Director Dusty Zimmerman. This year the Foundation hopes to raise \$15,000 to support the KHRT Horn of Plenty.

Horn of Plenty puts turkeys, toys, and other provisions in the homes of area families just before Christmas. "With the ongoing impact of COVID-19 we are continuing to see a significant number of individuals and families in the area who are in need," Zimmerman said. "People who choose to contribute this year can be confident that whatever amount they donate will have an even greater impact on the lives of people in our region."

More than 1,000 families have benefitted from the Turkey Drive and Horn of Plenty over the past three years, according to Zimmerman. That includes over 550 children who were helped by last year's drive alone.

In addition to donating funds, people can nominate a family or individual if the nominee meets certain criteria and lives within a 100-mile radius of Minot. "The Horn of Plenty doesn't just provide the family with one meal, it provides vouchers for a week's worth of groceries at a critical time during the year," Zimmerman added.

A donation of \$15 sponsors a turkey; \$45 will sponsor an entire food box. Donations of any amount are accepted.

People can support the Turkey Drive by visiting the Foundation's website at https://www.trinityhealth.org/foundation/donate-to-the-foundation/ turkey-drive/, or by mailing a contribution to Trinity Health Foundation Turkey Drive, PO Box 5020, Minot, ND 58702-5020. For more information, call the Trinity Health Foundation at 701-857-5432.



Community Ambulance Seeks Funds for Fleet Addition

Trinity Health Community Ambulance Service, Inc. (CAS) is the area's only fully staffed Advanced Life Support (ALS) team of health professionals. ALS provides urgent and critical treatment for various life threatening events including cardiac arrest and other cardiac conditions, and stroke, among other circumstances. The team provides advanced ALS ambulance service 24-hours a day, seven days a week to residents in the city of Minot and nearly 2,000 square miles of the surrounding service area. To provide perspective, CAS currently responds to calls as far north as Glenburn, south to Douglas, east to Granville and west to Carpio.

As you can imagine, this team of staff and response vehicles has been exceptionally busy. Community Ambulance Service, Inc. completes approximately 11,000 responses per year which equates to 30 every single day. CAS also serves as a critical support system for the numerous communities they serve and provides direct support to the Minot Fire and Police Departments, as well as the Ward County Sheriff's Department and additional first responder groups. CAS provides ALS intercept services to many of the ambulance services in northwestern North Dakota.

CAS' fleet includes four primary response vehicles, a 4 x 4 used for inclement weather, and an older ambulance used only for standby events. The current fleet size of service vehicles is inadequate and makes it extremely difficult to meet the growing demands placed on emergency services in the region.

As the demand for services and the region's population continue to grow, an additional ambulance has become necessary in order to provide essential care with up-to-date medical technology for our communities. A fully equipped 2021 Crestline Type III Ambulance will cost \$138,341. The Type III Crestline offers state-of-the-art vehicle and emergency technology to ensure patients receive the necessary acute care within a safe environment while being transported to Trinity

Health. The Trinity Health Foundation is hopeful that we will be awarded a \$25,000 grant toward the new vehicle. We still have over \$100,000 to raise in order to complete the purchase. If you are interested in contributing to this much needed

residents, loved ones, family and neighbors throughout the region, donate online

emergency response vehicle to ensure continued and advanced care for

at https://foundation.trinityhealth.org.



Dr. Frank and Pamela J. Shipley CancerCare and **Critical Care Fund**

Trinity Health Foundation is pleased to announce the creation of a new endowment, the Dr. Frank and Pamela J. Shipley CancerCare and Critical Care

Frank and Pam Shipley were Trinity Health staff members for 40 years. Frank Shipley, MD, served as a board certified general, vascular, and thoracic surgeon and Pam was a ward secretary before she became a surgical technician.

Pam spent many months of the last three years of her life receiving care in Trinity Health's facilities and appreciated the care she received, especially from nursing, radiology, the Intensive Care Unit, and CancerCare Center. Because of the quality of care they received, the Shipleys wanted to give back to Trinity Health. Their fund will primarily be utilized to provide an enduring and consistent source of funding for CancerCare and critical care needs within the Trinity Health system.

The Shipley endowment will be given equally to support Trinity Health's CancerCare and critical care programs. It will assist CancerCare patients with transportation costs and provide funding for the continuing education of CancerCare nursing staff. The fund also will assist with the acquisition of critical care equipment for Trinity Hospital and NorthStar Criticair.

Trinity Health Foundation would like to express its appreciation and gratitude to Dr. Frank and Pamela J. Shipley for their generosity and commitment to establishing this endowment that will help impact and change lives. If you are interested in contributing to the endowment, please contact the foundation office at 701-857-2430.

FirstCare Walk-In Clinic

Monday-Friday 8:00 a.m.-8:00 p.m.

Weekends & Holidays 9:00 a.m.-5:00 p.m.

No Appointments Necessary 400 Burdick Expy E Minot

Safety depends on everyone wearing a face covering. Please remember to bring yours.



Trinity Hospital Gift Shop Support friends and family with flowers or gifts

701-857-5205

trinityhealth.org



2020-2021 Trinity Health Foundation Nursing Scholarship Recipients

Nursing Scholarship **Applications** move to Second Round

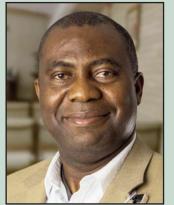
The application period for the 2021-2022 Trinity Health Foundation Nursing Scholarship has ended. The Foundation received a very vibrant and robust pool of applicants this year. We received 68 completed applications - a record that tops last year's pool by 20 applicants. Over the next few weeks, the scholarship committee will diligently review each applicant to select a group of finalists. The recipients will be determined after a round of interviews. This year, the Foundation has \$50,000 available to award to the recipients – the most we have ever awarded.

There is \$100,000 available in matching funds for the Nursing Scholarship Endowment, thanks to the generosity of a donor. This means that every contribution to the Nursing Scholarship Fund will go twice as far, since all gifts will be doubled until we reach the \$100,000 limit. \$4,000 remains available to be matched. This tremendous gift will enable Trinity Health Foundation to provide scholarships to even more students in the future. Please consider doubling your donation to benefit future nurses. The Nursing Scholarship Endowment is a qualified North Dakota endowment and is eligible for the North Dakota **Endowment Tax Credit.**

Trinity Health Names Pastoral **Care Director**

Father Sylvester Onyeachonam, a chaplain with more than 20 years of pastoral experience both in the US and abroad, has joined Trinity Health as director of Pastoral Care.

Fr. Onyeachonam will be responsible for managing Trinity's chaplaincy mission, which offers



Father Sylvester Onyeachonam

spiritual support to patients and families, provides a pastoral presence in moments of crisis, and assists patients with healthcare directives for end-of-life decisions. Chaplains also play an important role in providing support to staff members as they deal with challenges in their personal or work lives.

"My approach to pastoral care is to do service onto God and service to humanity," he said, "It is to serve the pastoral needs of patients, staff, and families, and to support one another."

Fr. Onyeachonam earned his Master of Divinity from Seat of Wisdom Seminary in Owerri, Nigeria, and later received a master's degree in pastoral counseling from Methodist Theological Seminary, Delaware, OH. He pastored churches in Ohio and Nigeria, and at one point served as chaplain to African immigrants in Dublin, Ireland, in association with the Archdiocese of Dublin. He received his Clinical Pastoral Education training at Nationwide Children's Hospital, Columbus, OH, where he served as a chaplain for eight years.

Fr. Onyeachonam is certified by the National Association of Catholic Chaplains. He enjoys tennis, swimming, movies, and reading.

Trinity Health Foundation Board of Directors Welcomes Boppre and Sem

Trinity Health and Trinity Health Foundation recently appointed two new members to the Foundation's Board of Directors. Brian Boppre and Claude Sem were both appointed to fill three-year terms on the board.

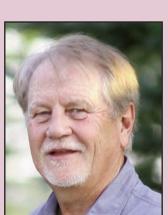
Brian Boppre is a licensed attorney and the founder/owner of the Boppre Law Firm in Minot. Claude Sem is a retired banking executive from the Minot area, most recently serving as the CEO of Farm Credit Services of North Dakota. Both new members have a wealth of experience serving on numerous community and regional boards throughout their careers. The knowledge they bring from within the finance and estate planning industries will be a critical asset to the board.

"I am thrilled that Brian and Claude have joined the board of directors of the Trinity Health Foundation. The next few years will be transformative for the foundation as we support the efforts to open the new Trinity Health campus. The expertise that these men bring to our organization will be instrumental in our success as they help to guide the organization into the next 100 years," said Dusty Zimmerman, director of Trinity Health Foundation.

Trinity Health Foundation was established in 1922 to Claude Sem assist in the establishment of the Trinity Hospital. Over the last 100 years, the foundation has been supported through the financial stewardship of individuals, families, foundations, corporations, civic clubs, and other organizations, with the purpose of significantly impacting healthcare and the quality of life in the region. Through generous donations, we are able to fulfill our mission of creating a system of care that provides the most significant impact on health and wellness throughout



Brian Boppre



Trinity Health Speaker's Bureau

northwest North Dakota.

Call Community Education at 701-857-5099 for available dates and topics.





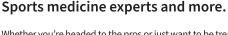
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Call 701-857-5500 to connect with an orthopedic specialist or visit trinityhealth.org/ortho.



MAKING MORE POSSIBLE





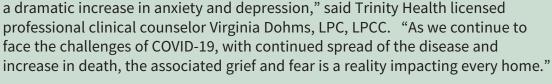
Virginia Dohms, LPC, LPCC

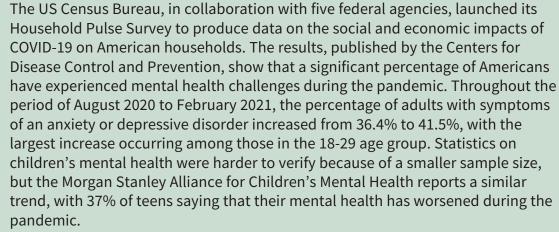
Christmas Amid COVID, a Recipe for Healing

It won't be a "lockdown Christmas" like last year, but this year's holiday season continues to bear the scars of COVID-19.

Mental health professionals know that the last 20 months have been difficult times for people dealing with loss and grief. The holiday season can normally be difficult for people dealing with mental health issues. Add the pandemic into the mix and the holidays can become a major struggle.

"The unexpected changes, life-changing losses, social restrictions, constant barrage of news, and uncertainty about when the pandemic will end have contributed to





With that backdrop comes the holidays – a time that can heighten feelings of loneliness and despair, with each person reacting differently.

"Along with increase in the mental health challenges, comes the rise in alcohol and substance use, forms of abuse, tech addictions, lack of motivation for daily activities of life, and suicidal ideations," Dohms said. "Children struggle with additional behavioral challenges such as acting out, isolation, gaming addictions, and physical ailments. The 1800-plus deaths in North Dakota alone have touched every home and community. If you or a family member is experiencing symptoms - you are not alone."

Dohms notes that people generally can and do recover, thanks in part to resilience. "More than ever it is important to remember that resilience is not just about 'bouncing back,' it can also be about incredible personal growth and development," she emphasizes. "Austrian neurologist, psychiatrist, philosopher, author, and Holocaust survivor Viktor Frankl observed that a sense of meaning and purpose is the greatest predictor of survival. Mourning the loss of a loved one takes time, but it can be a catalyst for a renewed sense of meaning and purpose to life."

Dohms offers these suggestions for someone struggling with grief:

- 1. Healing is best done in relationships. Resist the urge to isolate. This is the time to reconnect with friends and family. Talk about your loved one to recall what happened and remember that person.
- 2. Identify and accept your feelings. It is normal to experience a wide range of emotions including sadness, anger, numbness, confusion, anxiety, and exhaustion. Avoid alcohol and substance use during this time, as self-medicating interrupts and delays the healing process.
- 3. Take care of yourself and your family by intentionally returning to healthy eating, exercise, and sleep patterns. Check in with other family members to see how they are doing.
- 4. Remember and celebrate the lives of your loved ones. Find ways to mark their memory through rituals of remembrance such as preparing a meal of their favorite food, setting the table with an empty chair to honor them, journaling, or telling some favorite stories. What you choose is up to you, providing it honors the special person and feels right to you.

Other reflections from Dohms: the personal experience of grieving is processed in the context of multiple secondary losses that may include loss of part of self, change in family structure, loss of a desired lifestyle, a fading of one's hopes and dreams, and even social changes. Additionally, beliefs from the past can keep us stuck in unhealthy thinking styles. Well-meaning phrases that keep people stuck include "time heals all wounds," "pull yourself up by the bootstraps," "boys don't cry," "go to your room if you are sad," "food will make you feel better," "stay busy and don't think about it." When an individual is grieving, automatic thoughts contributing to prolonged distress can be difficult to identify and change.

At what point should people reach out for support and perhaps seek professional counseling? "There is no shame in reaching out for help if a person feels stuck in

feelings of depression hopelessness, helplessness, bitterness, or anger," Dohms

states. "Individuals with severe or complicated grief can benefit from talking to a

professional counselor trained in grief therapy. There is hope for a meaningful

and even joyful life ahead."

Holiday Gatherings Back to Normal, Sort Of

In true Grinch fashion, the COVID-19 pandemic put a damper on last year's holiday season, with the Centers for Disease Control and Prevention (CDC) and top health officials discouraging travel and gatherings of multiple households. This year, with case counts dropping nationwide and more than 58 percent of the country fully vaccinated, the CDC is saying it is once again safe to gather with family and friends for the holidays - under a few conditions.

Get vaccinated

As is true all year round, the best way to protect yourself and others from COVID-19 is to get fully vaccinated. Although vaccinated people are still capable of transmitting the virus to others, they are also thought to be less contagious.

"Because many generations tend to gather to celebrate holidays, the best way to minimize COVID-19 risk and keep your family and friends safer is to get vaccinated if you're eligible," said the CDC in a recent update.

Wear a mask

If you are not fully vaccinated, or if you are vaccinated but in a community with substantial to high transmission, you should wear a mask in public indoor settings. The mask should be well-fitting, covering your nose and mouth.

Consider wearing a mask regardless of vaccination status or level of transmission if you or a member of your household has a weakened immune system or is at increased risk for severe disease.

Get tested before gathering

If you are celebrating with a group of people from multiple households, or with people from different parts of the country, get tested for COVID-19 as close to your gathering as possible. Rapid tests are cheap, quick, and effective.

Get tested if you have symptoms of COVID-19 or are a close contact with someone who has COVID-19. If you're sick or showing symptoms, don't host or attend a gathering.

If immunocompromised or unvaccinated, take extra precautions

Immunocompromised individuals may not be completely protected from COVID-19, even if they are fully vaccinated and have received an additional dose. They should continue to follow the precautions recommended for unvaccinated people, including wearing a mask, keeping a distance from others, and avoiding large indoor gatherings.

The bottom line: The best way to stay safe from COVID-19 this holiday season is to be fully vaccinated. If you aren't vaccinated, schedule your appointment today. If your loved ones aren't vaccinated, encourage them to make an appointment, too.

Trinity Health is open to anyone age 5 and up who would like to receive a COVID-19 vaccine. Visit www.trinityhealth.org/stopthespread for vaccine information.

COVID Data Tracker Weekly Review. (2021, November 5). In Centers for Disease Control and Prevention. Retrieved from https://www.cdc.gov/coronavirus/2019-ncov/covid-data/covidview/



Let our staff help you select a healthcare provider right for you.

Please feel free to leave a message after hours and your call will be returned the next regular business day, or email us anytime at DR4U@trinityhealth.org

Low Sodium Recipes for the Holidays



Spice it up!

Angela Phillips, RDN, LRD

Who doesn't love potato chips? The crunchy combination of oil and salt guarantees that good intentions to eat only a few, quickly morph into polishing off the entire bag.

Food and Drug Administration (FDA) dietary Guidelines for Americans recommend that adults limit sodium intake to less than 2,300 mg per day, which is the equivalent of about 1 teaspoon of table salt. However, Americans eat on average about 3,400 mg of sodium per day. Sodium is a mineral, which the body needs for normal body functions; it helps to maintain a balance of body fluids and assists with nerve and muscle function. Although sodium is vital to body functions, it is only needed in a small amount.

Excess sodium can contribute to high blood pressure, which puts one at risk for stroke, heart conditions, and can harm the kidneys. Eating excess sodium also can contribute to fluid retention; excess fluid requires your organs work harder. Surprisingly, minimal sodium intake comes from salting food at the table or while cooking. The FDA estimates that over 70% of the sodium consumed comes from packaged and prepared foods. Many packaged and processed foods contain additional sodium as salt is commonly added to extend shelf life of preserved foods.

Most restaurant foods are high in sodium as well. If you plan to eat out for a meal, prepare in advance by looking at the nutrition facts on the restaurant's website. Many restaurants have nutrition facts available. Simple ways one may modify their meal to reduce sodium intake at a restaurant is by asking for dressing or sauces on the side, choosing a smaller portion, taking home part of your meal, or splitting entrées with someone.

The best way to limit sodium intake is to read the Nutrition Facts label, avoid high sodium foods, and to prepare foods at home from scratch. Planning meals ahead will help to avoid convenience foods or dining out. By preparing foods from scratch, one can control their sodium intake. When reading a Nutrition Facts label, pay attention to the serving size, as typically there are multiple servings per package. Choose foods that have less than 120mg of sodium per serving, as these are lower in sodium. Other terms to look for on a food label when shopping are no salt added, reduced sodium, salt/sodium-free, very low sodium, and low sodium.

Other tips to reduce sodium intake are to rinse any canned items to cut the salt, consume fresh items whenever possible, including a variety of fruits and vegetables in your diet, and opt for low-sodium or salt-free condiments. Experiment with salt-free seasonings such as Mrs. Dash, or add flavor with lemon or lime juice, spices, onion, peppers, garlic, and fresh herbs. This is a great way to add flavor without adding sodium.

Try some of these low sodium and salt-free recipes for your next meal.

Salt-Free Taco Seasoning

Ingredients: 2 T. chili powder 2 tsp. paprika 2 tsp. cumin

2 tsp. oregano 1/2 tsp. onion powder 1/2 tsp. garlic powder

1/2 tsp. cayenne pepper

Directions:

Combine all ingredients. Mix with about 1/4 cup water and add to 1 pound of browned turkey or beef. Cook together a few minutes to blend the flavors.

Homemade Mrs. Dash (Original)

Ingredients:

1 T. garlic powder 1 1/2 tsp. dried basil

1 1/2 tsp. dried parsley

1 1/2 tsp. ground thyme

1 tsp. onion powder

1 tsp. dried sage

1 tsp. black pepper

1/4 tsp. cayenne

pepper

Directions: Combine all ingredients and mix well. Store in

a cool, dry area.

an airtight container in

Dress it up!

These recipes can be used for salads or as a low sodium dip for veggie trays.

Homemade Ranch Dressing Prep Time: 5 Minutes Yield: 1 Cup

Ingredients:

- ¾ cup plain Greek yogurt
- 1/4 cup sour cream
- 1 ½ tsp. apple cider vinegar
- 1 ¼ tsp. dried dill
- 1 tsp. dried parsley
- 1 tsp. dried chives

- ½ tsp. garlic powder • ½ tsp. onion powder
- 1/4 tsp. black pepper
 - fresh chives and/or parsley for sprinkling
 - optional: milk or buttermilk for thinner consistency

Instructions:

- In a bowl, combine all ingredients and mix until well combined.
- Chill for 30 minutes before serving.
- Optional step: for thinner consistency, add 1 tablespoon at time of milk or buttermilk until desired consistency is achieved.
- To serve, garnish with fresh parsley or fresh chives.
- Store in the fridge in an airtight container for 1 week.

Buttermilk Substitute:

- ½ cup 2% milk
- ½ tbsp. white vinegar or lemon juice



Homemade Dressings Prep Time: 5 Minutes Yield: 1 Cup

For Chili-Lime Salad Dressing:

- Zest and juice of 2 limes (about 4 tablespoons juice and 3 teaspoons zest)
- 1/4 cup red wine vinegar
- 1 T. soy sauce
- 1 T. honey
- 1/3 cup extra virgin olive oil
- 1 clove garlic, finely minced OR 1 tsp. garlic powder
- 1/2 tsp. red pepper flakes
- 1 tsp. ground cumin

For Italian Salad Dressing:

- 2/3 cup extra virgin olive oil
- 1/4 cup red wine vinegar
- 3 T. finely grated parmesan
- 1 T. fresh minced parsley OR 2 tsp. dried parsley
- 1/4 medium onion, diced (about 2 T.) OR 2 tsp. onion powder
- Juice of 1/2 lemon (about 2 T.)
- 1 T. fresh minced basil OR 2 tsp. dried basil
- 1 T. fresh minced oregano OR 2 tsp. dried oregano
- 1 clove garlic, finely minced OR 1 tsp. garlic powder
- 1 tsp. honey
- 1/4 tsp. black pepper

For Greek Yogurt Blue Cheese Dressing:

- 1/2 cup plain Greek yogurt
- 2 T. buttermilk
- Juice of 1/2 lemon (about 2 tablespoons)
- 1 tsp. Worcestershire sauce
- 1/2 cup finely crumbled blue cheese
- 1/4 tsp. black pepper
- 1 clove garlic, finely minced OR 1 tsp. garlic powder

For Lemon Vinaigrette Salad Dressing:

- 1/4 cup red wine vinegar
- 2 T. Dijon mustard
- 1/2 cup extra virgin olive oil
- Zest and juice of 1 lemon (about 4 tablespoons juice and 3 teaspoons zest)
- 1 clove garlic, finely minced OR 1 tsp. garlic powder • 1 T. honey
- 1/4 tsp. black pepper
- 1 T. fresh minced oregano OR 2 tsp. dried oregano

For Sesame Ginger Salad Dressing:

- 1/3 cup extra virgin olive oil
- 2 T. toasted sesame oil
- 1/4 cup seasoned rice vinegar
- 1 clove garlic, finely minced OR 1 tsp. garlic powder • 2 T. soy sauce
- 1 T. honey
- 2 T. peel and grated fresh ginger OR 2 tsp. ground ginger

For Balsamic Vinaigrette Salad Dressing: • 1/2 cup extra virgin olive oil

- 1/2 cup balsamic vinegar
- 2 tsp. Dijon mustard
- 1 clove garlic, finely minced OR 1 tsp. garlic powder
- 1 T. honey • 1/4 tsp. black pepper

Instructions:

before serving.

- 1. Combine all ingredients in a jar with a tight-fitting lid, shake until well combined. Alternatively, for thicker dressings like the ranch or Italian, you can combine all ingredients in a food processor or blender and pulse until
- well combined and smooth. 2. Refrigerate and let flavors blend for at least 30 minutes, preferably 2 hours,



Stay Safe During Winter Travel

Subzero temperatures, inches upon inches of snow, harrowing driving conditions – there's no doubt about it, winter can be brutal in North Dakota. Although it sounds nice, staying put in our warm houses during those frigid four to five months really isn't an option, so we bundle up, throw on our snow boots and head out to live

Make sure you're safe the next time you hit the wintry roads by reviewing these car care tips and safe driving practices from the North Dakota Department of Transportation.

Car Care Tips

- Have your exhaust, muffler, tailpipe, and belts and hoses inspected for cracks and visible defects.
- Check your tires to see if they have at least 1/8 inch of tread and to make sure they are properly inflated.
- Inspect wiper blades for wear and tear.
- Turn on the heater to ensure it's in proper working order.
- Change the air filter, if dirty, for more effective fuel and engine performance.
- Change oil and check the level according to the manufacturer's suggestions.
- Flush and replace antifreeze in the radiator.
- Replenish washer reservoir with the appropriate ratio of water to windshield antifreeze.

Safe Driving Practices

Winter Survival Kit Checklist

• Check road conditions before you travel. Call 511 or check the North Dakota Travel Information Map: https://travel.dot.nd.gov/

- Always carry a cell phone and let someone know when you depart, your route and expected travel time.
- Never leave without a full tank of fuel.
- Turn on your lights to increase visibility to other motorists and snowplow operators. Clear snow and ice from your entire vehicle, including your headlights, taillights and hazard lights.
- Do not use cruise control on wet or icy roadways.
- slowly and adjust your speed to how much traction you have. Double your distance for following other drivers.

• Get the feel of the roadway by testing your brakes while driving

- Snow fog from passing vehicles greatly reduces visibility. Look ahead for curves in the road, look behind for vehicles following and slow down.
- To stop on ice, you should pump the brakes when driving vehicles equipped with drum-type brakes on all four wheels. Vehicles equipped with disc brakes require a slow, intermittent braking action - fully on and then fully off - long enough to let the disc brakes release so that all wheels are rolling again. If you slam on your brakes, your wheels will lock and your tires will skid.
- Keep firm and continuous pressure on anti-lock brakes.
- If your vehicle becomes stuck in a snowstorm, stay with the vehicle. Most deaths occur when people leave their vehicles and get lost. Open your windows slightly and run the vehicle and heater for only short periods of time to avoid carbon monoxide poisoning.

☐ Small shovel ☐ Sand or cat litter for traction ☐ Flashlight and extra batteries

- ☐ Flares or reflective triangles,
- something red or orange and a whistle to signal help ☐ Cell phone

☐ Jumper cables

- ☐ First aid kit
- ☐ Coffee can furnace (the candle generates heat) - and matches to light the candle
- ☐ Carpet strips (for traction under drive wheels)
- ☐ Boots
- ☐ Ice scraper and brush
- ☐ Newspapers (great insulation when placed between skin and clothing)
- ☐ Tools
- ☐ Food and blanket
- ☐ Tire chains (for use on secondary roads only)



Christmas Ornaments

This Christmas, remember or honor someone you love with an ornament from the Trinity Health Auxiliary, Displayed on a tree near the Trinity Hospital Gift Shop, the ornament is tagged with a feather, the symbol of protection and love from guardian angels.

Ornaments can be purchased for \$5 from the Trinity Hospital Gift Shop or by calling 701-857-5205. Proceeds benefit Trinity Health Auxiliary.

CALENDAR

For the latest updates, check online at trinityhealth.org

Events may be postponed or canceled due to reasons outside our control. Please watch our calendar at trinityhealth.org/events for up-to-date calendar changes.

Mobile Mammography

December 1 Trinity Community Clinic – Kenmare, 385-4296 December 2Trinity Community Clinic – Mohall, 756-6841 December 8Tioga Clinic, 664-3368 December 21Trinity Community Clinic – Velva, 338-2066

Events

at Health Center—Riverside Education Center, 1900 8th Ave SE, Minot. All stroke survivors and caregivers are invited to attend. For more information, call Jerilyn at 701-857-2449.

December 15—The Stroke Support Group will meet at 7:00 p.m.

December 21—The Breast is Best Support Group will meet at 12:00 p.m. in Magic Bean Brewing Co. in The Foundry, 1407 S. Broadway, Minot. This is an interactive and supportive group

guided by moms and facilitated by Trinity Health's International Board Certified Lactation Consultant and Certified Lactation Counselors. All mothers are welcome. **December 21**—Trinity Health's Community Ambulance Service and EMS Education will participate in MarketPlace for Kids at Minot State University. They will talk about working on an

ambulance, how to become a member of the crew and

demonstrate a couple of EMT and paramedic skills.

Prepared Childbirth Classes

December 11, 2021, January 15, 2022, and February 5, 2022 Learn about signs of labor, what to expect in labor, comfort measures, postpartum cares, newborn care and routines, and much more! Enrollment is limited. Registration is required. Meets from 9:00 a.m. to 4:00 p.m., Trinity Health Riverside Education Center, 1900 8th Ave SE, Minot.

Breastfeeding Basics

December 9, 2021, January 13, 2022, and February 10, 2022 Learn about all things breastfeeding: positions, latch, skin-to-skin contact, how to know baby is getting enough, and more. Enrollment is limited. Registration is required. Meet from 6:00 to 8:00 p.m., Trinity Health Riverside Education Center, 1900 8th Ave SE, Minot.

Basics of Baby Care

trinityhealth.org/familybirth_registration.

January 10, 2022, February 7, 2022, and March 7, 2022 Welcoming a new baby is a special and exciting time! This class will cover the basics of newborn care such as feeding, bathing, diapering, soothing, and sleep. This class does NOT include infant CPR. Available to expectant or parents of newborns. Meet from 6:00 to 8:00 p.m.,

Trinity Health Riverside Education Center, 1900 8th Ave SE, Minot. These classes are offered free-of-charge as part of Trinity Health's community benefit mission. If you have questions, please call 701-857-2352. Sign up for classes at: