FOUND Catyon News for friends of the Fairchild Medical Center Foundation

Fall 2003

Fairchild Medical Center Foundation

444 Bruce Street Yreka, CA 96097 (530) 841-6239 www.fairchildfoundation.org



MISSION STATEMENT

The mission of the Fairchild Medical Center Foundation is: to support Fairchild Medical Center by securing funding to provide exceptional health care to all in need

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Fairchild Medical Center
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for all community members,
our employees, medical staff
and friends of the
Fairchild Medical Center.
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Sleep Lab Making Good Progress

With grant money from the Fairchild Medical Center Foundation (see article about the golf tournament), the construction for the Fairchild Medical Center Sleep Lab is progressing on schedule. The request for bids went out approximately six weeks ago and a decision will be made soon on what construction firm is handling the project. The start date is set for after the New Year.

When complete the Sleep Lab will start screenings two nights a week with an operational projection of six nights per week. The facility will have two screening rooms in which to screen a patient.

Patients will be referred to the Sleep Lab by their regular physician. They will arrive in the lab in late evening to be screened and will go home in the morning after a restful nights sleep. During the test the heart rate, breathing rate and pattern and blood oxygen levels will be monitored. After the patient goes home and all data is brought together, the exam will be interpreted by a licensed physician who specializes in sleep disorders. The report will be sent to the physician who

ordered the exam and a decision for treatment will be made based on the specialist's interpretation of the test.

This is a wonderful expansion of the procedures that are available to Siskiyou County residents. Our Medical Center continually looks for new ways to bring state of the art medicine to our community.

Susan Ikenberry from FMC Foundation Fund Development is available to speak to service or other groups interested in information about the FMC Sleep Lab program. Interested persons may contact FMC Foundation Fund Development office 841-6239.



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of Giving Society								

Pinnacles of Giving Society

__\$5,000 Mt. Shasta President

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contribution of

\$ Payable to:

Fairchild Medical Center Foundation

Your tax-deductible gift will help maintain the highest quality health care for those we serve today and for future generations.

Think you may have OSA?

- Do you snore?
- Does your partner tell you that you stop breathing during sleep?
- Do you feel tired when you wake up?
- Do you wake up with headaches?
- Do you feel sleepy during the day?
- Do you have memory lapses?
- Do you experience diminished sex drive?
- Do you have high blood pressure?
- Do you have congestive heart failure?
- Have you had a TIA or a stroke?

If you answered yes to any of these questions, you should tell your physician about your symptoms and ask whether they may be related to sleep-disordered breathing.

Take a moment, now, to answer the questions on the Epworth Sleepiness Scale below.

How did you rate?

If your total score is 10 or less, you have an average amount of sleepiness.

If your total score is over 10, you may be excessively sleepy and should seek medical attention.

This test is not a substitute for professional medical diagnosis and treatment management - if you have any concerns regarding your health, do seek professional medical advice

The Epworth Sleepiness Scale

How likely are you to doze off or fall asleep in the following situations, in contrast to feeling just tired? This refers to your usual way of life in recent times.

Even if you haven't done some of these things recently, try to work out how they would have affected you. Use the following scale to choose the most appropriate number for each situation:

the following scale to choose the most approximate number for each situation:	ropriate
0 = would never doze 1 = slight chance of dozing 2 = moderate chance of dozing 3 = high chance of dozing	
Situation Chance o	
• Sitting and reading	core 0 - 3
Watching TV	
• Sitting, inactive in a public place (e.g. a theatre or meeting)	
 As a passenger in a car for an hour without a break 	
 Lying down to rest in the afternoon when circumstances permit 	
• Siting and talking to someone	
 Sitting quietly after a lunch without alcohol 	
 In a car, while stopping for a few minutes in the traffic 	
Total	
The higher the score, the greater the chance of a diagnosis of OSA	

"Obstructive Sleep Apmea" What Is It? by Betsey Shuteroff

"Obstructive Sleep Apnea" (OSA) or "sleep apnea," is a sleep disorder first diagnosed in 1985. It is becoming increasingly recognized as an underlying factor in a wide range of serious medical problems.

OSA is when a person stops breathing repeatedly during sleep and it is a potentially life-altering and life-threatening breathing disorder. Basically, the cause is the upper airway repeatedly collapses and airflow is blocked, causing cessation of breathing (apnea) or inadequate breathing (hypopnea) and sleep fragmentation.

Some of the reasons for the collapse of the airway can be the decrease in the tone of the muscles holding the airway open, the tongue falling back and closing off the airway, enlarged tonsils or other crowded oropharyngeal structures, obesity, large neck girth, or a congenital or malformed airway.

OSA is implicated as the underlying cause or at least aggravating factor for a large list of very serious medical problems such as hypertension (high blood pressure), heart attacks, stroke, heart arrhythmias, and

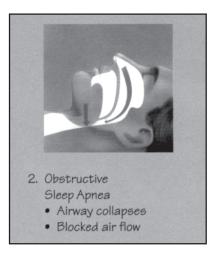
heart attacks, stroke, heart arrhythmias, and

fatigue-related motor vehicle and work related accidents.

Additionally, persons with OSA may experience any of the following signs and symptoms: gasping or choking during sleep, snoring, interrupted by pauses, (apnea), excessive daytime sleepiness, restless sleep, intellectual deterioration, poor judgment/concentration, memory loss,

irritability, depression, morning headaches, sexual dysfunction, nocturia, (frequent night time urination).

Clearly, these are significant medical issues, and it is becoming increasingly apparent that OSA is quite prevalent. Statistics vary, but it is thought that about 9% of the male population and 4% of the female population have diagnosed sleep apnea (an estimated 18 million people) and an even greater number of people have some degree of apnea/hypopnea during sleep. The majority of OSA sufferers go undiagnosed and untreated.



Normal Breathing

Airway is open

· Air flows freely to lungs

The good news is that this serious and potentially life-threatening condition is easily identified and can be effectively treated. As a starting point, take the quiz on this page.

OSA and other types of sleep disorders can be diagnosed by evaluation by a doctor specializing in sleep disorders. Sleep studies in a sleep lab will provide information about how a patient sleeps and breathes. The data collected will enable the physician to determine the type and severity of sleep apnea and determine treatment options. Also, information about the physiologic consequences of the abnormal breathing events is obtained.

The most common primary treatment of choice is a device worn at night known as CPAP ("see-PAP"), which delivers continuous positive airway pressure. Less common treatments include surgery, body position modification, and oral appliances, which may be effective in certain individuals.

Any intervention should include lifestyle changes such as weight loss (if needed), and avoidance of alcohol, sedatives, and hypnotics.

Congratulations to the Baby of the Month 'Footprints to the Future' Winners June Baby: Andrea Mae Wostenberg Mother: Laura Wostenberg Birthdate: June 17, 2003

July Baby: Damian Lars Carpelan

Mother: Stephanie Carpel

August Baby:

Mother: Stephanie Carpelan Birthdate: July 24, 2003

Isaiah Mark Greenman

Mother: Melanie Greenman Birthdate: August 19, 2003

For footprint information call the Foundation Office at (530) 841-6239

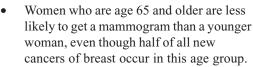


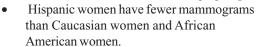
October is Breast Cancer Awareness Month

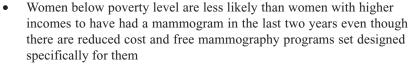
In 1993 President Clinton set aside the third Friday in October as National Mammography Day. This year the date is October 17th. For the past 19 years National Breast Cancer Awareness Month (NBCAM) has designated the month of October as a time where breast health, cancer screening and early detection are promoted throughout the United States. Since the program began in 1985, mammography rates have doubled for women age 50 and older and breast cancer deaths have declined by 1.6 percent.

This is exciting progress in the battle against breast cancer, however there are still women who do not take advantage of early detection at all. There are others

who do not do breast self exam (BSE), have a clinical breast exam (CBE), or get a screening mammogram. Increases in physician referrals for mammography would have a notable impact for these women as would the referral to clinical trials. A few statistics that women need to think about are:







NATIONAL BREAST CANCER

AWARENESS MONTH

- Mammogram use increased in all populations except for American Indians and Alaskan Natives. This is troublesome because these two populations have experienced an annual increase of 1.4% in the number of breast cancer related deaths.
- Few cancer patients participate in clinical trials. If participation in these
 research studies increased, more patients would receive state-of-the –art
 care and researchers would be able to more quickly find ways to improve
 cancer prevention, diagnosis and treatment.

During 2003 an estimated 211,300 new cases of breast cancer are expected to occur among women in the United States and there will be 39,800 deaths from this disease. Breast cancer is the second leading cause of cancer death in women.

If all women age 40 and over took advantage of early detection methods-mammography plus clinical breast exam, breast cancer death rates would drop by 30%. The key to mammography screening is that it be done routinely. Once is not enough.

In 2003 the American Cancer Society and the American College of Radiology presented new guidelines. These guidelines for examinations of the breast are:

- Yearly mammograms are recommended starting at age 40 and continuing for as long as a woman is in good health.
- Clinical Breast Exam should be a part of a periodic health exam, about every three years for women in their 20s and 30s, and every year for women 40 and older.
- Women should know how their breasts normally feel and report any
 breast change promptly to their health care provider. Breast Self Exam
 (BSE) is an option for women starting in their 20s. It is acceptable for
 women to choose not to do BSE or to do it only occasionally as long as
 they follow the other guidelines.
- Women at increased risk (such as family history, genetic tendency, past breast cancer) should talk with their physician about the benefits and limitations of starting mammography screening earlier, having additional tests (such as breast ultrasound, MRI, and Mira Luma nuclear scans), or more frequent exams.

Always remember "THE BEST PROTECTION IS EARLY DETECTION."

The "Share the Magic" Children's Christmas Festival committee is hard at work.

Mark your calendars for this fun event.

December 13, 2003



Classes

Diabetic Classes are offered free of charge. Call 842-0817 to see when the next class starts

CPR classes are given on the 3rd Tuesday of every month. Learn how to perform CPR and the Heimlich Maneuver on adults and children in this one-session 4 hour class.

Call the Nursing Office at 841-6285 to reserve a space.

Health Fair

More than 800 people attended this year's Health Fair at the Siskiyou Golden Fairgrounds. The annual event is sponsored by Fairchild Medical Center and provides visitors with information from over 70 exhibitors on health issues dealing with high cholesterol, diabetes education and screening, cancer awareness, AIDS prevention, Chinese medicine, sleep apnea, vision and hearing screening and women's health

issues. Visitors also learned about the many live-in facilities and in-home health care providers available to the senior population of Siskiyou County.

APOND WEIGHT CHITER

COLLEGE

AND SHOULD SHO

A new feature this year was Legs for Life screening to detect peripheral vascular disease in the legs and AAA screening (abdominal aortic aneurysm).

Keeping the focus on a healthy diet and lifestyle, visitors

dined on garden burgers prepared on an outdoor grill, topped off with homemade ice cream served by the Fairchild Medical Center Guild.



Golf Tournament A Success

The Golf Tournament committee presented a check to John Pomeroy, FMC Founcation chair, for \$19,000. Proceeds from the golf tournament will be used to purchase equipment for the Sleep Lab.





Jackie Roy was presented a resolution by John Pomeroy, chair FMC Foundation. FMC Foundation thanked Jackie for her 9 years of hard work as chair of the golf tournament committee

Buttery Apple Crumble (Makes 9 servings)



Fall is in the air and that means that apples are in abundance. The variety is splendid. Gala, Lady and Red Delicious are great eaten fresh. Cortland, McIntosh and Rhome make smooth sauces and purees. Braeburn and Jonathon are excellent for cobblers, pies and crisps.

This recipe with its whole wheat flour and oatmeal topping sounded too good to pass

- 1/4 cup whole wheat flour
- $1^{\frac{4}{1}}$ cups regular oats
- 1/2 cup packed brown sugar
- teaspoon ground cinnamon
- 1/2 teaspoon salt
- 1/2 cup butter, melted
- teaspoons vanilla extract divided

10 cups sliced peeled baking apples

- 1/2 cup apple cider
- 1/4 cup granulated sugar
- 1¹/₂ teaspoons cornstarch Dash of salt
- Cooking spray
- Preheat oven to 375°
 Lightly spoon flour into a dry measuring cup, and level with a knofe, Combine flour, oats, brown sugar, cinnamon, and
- 1/2 teaspoon salt in a small bowl. Add butter and 1 teaspoon vanilla, stir with a fork until moist and crumbly.
- 3. Combine 1 teaspoon vanilla, cider granulated sugar, cornstarch, and dash of salt in a large bowl; stir with a whisk until sugar dissolves and mixture is smooth. Add apples, tossing to coat. Spoon aple misture into a 13 x 9-inch baking dish coated with cooking spary. Sprinkle with oat mixture. Cover with foil, bake at 375° for 30 minutes or until browned and bubbly.

CALORIES 356 (31% from fat) FAT 12.2 g (sat 6.6 g, momo 3.4 g, poly 1.1 g) PROTIEN 5.3g CARB 53.6 g FIBER 6 g CHOL 27 mg IRON 1.5 mg SODIUM 257 mg CALC 36 mg

FMC Foundation 9th Annual Go Tournament

by Jackie Roy. Tournament Chair

The 9th Annual Faichild Medical Center Golf tournament was recently held at Lake Shastina generosity of our sponsors and players we raised \$19,000.00 towards the Golf Resort. Sheryl Davis, Edward Jones and Lake Shastina Golf Resort were the co-hosts of this annual event. Because of the support and purchase of equipment for the new Sleep Apnea Lab.

We ended up with a beautiful day (no rain) and lots of happy workers and players. The golf course was in tip top shape and the food served by Whispering Winds was excellent.

Duchi, Tournament winners included 1st Place Low Gross Team Fred. Michele Duchi, Caren Gleave, John Gleave.

Caren Gleave, Fred Duchi, Michele

1st Place Low Net Team Ralph Wentworth, Eugene Rossini, William Lawrence, Pat Healy.

Men's / Ladies Long Drive Blair Hart / Caren Gleave

Closest to Pin Men's/Ladies Jason Truttman/Doris Nolan



making a contribution and being closest to the pin. This year the hole was won Every year the 8th hole is a memorial honoring past foundation members Carol have the opportunity to win half of the bank by ttee that started the tournament. Their families Parsons. These wonderful people were all by Donna Cox for a prize of \$600.00. Crebbin, Bill Zuehlke and Paul members of the original commi seed the bank hole and players

that this tournament is a success each year. FMC Golf Tournament committee The committee starts meeting in January and works nine months to make sure

this year was Jackie Roy, Sheryl Davis, Ann Kaster, Pete Nixon, Susan Cervelli, Gene Fink, Marcia Allen, Susan Ikenberry and Fred Duchi.

Blangstead, Scott Frick and Betsy & Dave Shuteroff, Katrina Blumer, Lael, It takes lots of workers for this event and we thank you (many of you have Churchill, Sandy Hedin, Shirley Fisher, Kathy Shelvock, Esther Gebbelein, worked all nine years). Our generous workers include: Marcia & Jerry Troy & Cleo Wheeler, Mike Crebbin, John Pomeroy, Doug & Tina Carolyn & Darrel Collins.

Contributions have been made to Fairchild

Medical Center Foundation to honor following:

On the Occasion of the Wedding of **Joy Pomeroy & Chad Danielson** Dave & Betsey Shuteroff

In Memory of "Chuck" Summers Honorable Robert & Ann Kaster

In Memory of Marley Pratt Michael Crebbin

In Memory of Harvey L. Wallace Pat Foster

In Memory of Norman Fiock Michael Crebbin Ken & Jadine Love

In Memory of Babe Ashton Jerry & Marcia Churchill

In Memory of Mary James

Jerry & Marcia Churchill

In Memory of Margaret Ninteman Jerry & Marcia Churchill

In Memory of George Davis Jerry & Marcia Churchill

In Memory of Pearl Hudson Jerry & Marcia Churchill

> Jackie Roy at (530) 842-5874. Mark your calendars for next years event September 12th, lease call If you have suggestions or want to be a part of this committee, pl

Fairchild Medical Center Foundation Yreka, CA 96097 444 Bruce Street

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