

partners in HEALTH

 ST. FRANCIS
Regional Medical Center

Summer 2005



Joseph Leach, M.D., medical director,
St. Francis Cancer Center, with
patient Beth Thomas of Prior Lake.


100
SOLUCIENT
TOP HOSPITALS

MORE: Good news about breast cancer • Back-to-school pop quiz
• Facing prostate issues • New Sleep Diagnostics Center open

Big successes vs. early breast cancer

THIS YEAR, NEARLY 50,000 AMERICAN WOMEN will learn they have a form of breast cancer probably only a fraction of them have heard of: ductal carcinoma in situ, or DCIS.

Rarely diagnosed before the 1980s, DCIS now accounts for roughly 20 percent of all breast cancers nationwide. And one word explains the reason for this surge in diagnosed cases: mammography.

DCIS is the earliest stage of breast cancer—a cancer with tumors so tiny that many are hardly bigger than pinpoint. It takes mammograms to pick up these very early, very small cancers, and it is only because of widespread use of mammograms that DCIS is now so readily detected.

Today DCIS is discovered with such frequency, in fact, that one out of every 1,300 mammograms leads to a diagnosis.

For more information, call the St. Francis Breast Center at (952) 403-2700

IF IT HAPPENS TO YOU

Arguably, one of the most important discoveries about breast cancer is that DCIS is often associated with microcalcifications—or tiny flecks of calcium—that are visible on mammograms. Consequently, if microcalcifications show up on one of your mammograms—especially if they are tightly clustered together in a group of five or more—your doctor may advise a biopsy to see if cancer is present.

Certainly, no woman wants to be told she has breast cancer. But should a biopsy reveal that you have DCIS, try to focus on this: In many ways, your diagnosis is actually a good one.

Consider these words from David Danforth, M.D., a senior investigator with the National Cancer Institute: “DCIS has such an excellent prognosis that it’s fair to call it curable.”

Here’s why the outlook is so encouraging: Unlike later stages of breast cancer, DCIS is considered “noninvasive,” meaning cancerous breast cells have not yet broken through the walls of the milk duct where they developed. And because these cells haven’t yet invaded surrounding healthy tissue, DCIS in itself is not life-threatening.

I Can . . .

I can **dream** of a day when my son will open the newspaper and not find any stories about someone who died of cancer.

I can **picture** a future where the term chemotherapy will be a historical oddity rather than a necessary reality.

I can **hope** for a tomorrow where people with my expertise will be out of work and in need of a career change.

Until then, I **salute** all the heroes who have allowed us to take part in their fight against cancer.

—Dr. Joseph Leach,
medical oncologist

TREATMENT IS IMPORTANT

Still, doctors take DCIS seriously because it has the potential to grow and become an invasive, possibly fatal, breast cancer.

In fact, when viewed under a microscope, individual DCIS cells look very much like cancer cells that spread quickly. Treatment, however, can keep DCIS safely contained. As a result, the five-year survival rate for DCIS is nearly 100 percent.

But precisely what that treatment is differs from woman to woman. Most women with DCIS can choose between a mastectomy by itself or a lumpectomy followed by roughly six weeks of radiation therapy; studies show that women live as long with either treatment. With both surgeries, the drug tamoxifen is sometimes added to try to further control the cancer.

Compassionate cancer care at St. Francis

Joseph Leach, M.D., is a specialist in oncology with the Park Nicollet Clinic – Shakopee and is the medical director of the St. Francis Cancer Center. He is a graduate of the University of Minnesota School of Medicine and completed his Medical Oncology Fellowship at the University of Oklahoma.

Dr. Leach writes, “There are few life events that are as feared as a cancer diagnosis. It has a profound impact not only on the patient but also their loved ones. Fortunately, there is significant

progress being made in the treatment of most cancers, improving the lives of millions of individuals in their ongoing fight against the disease. Our goal at the St. Francis Cancer Center is to offer the latest cancer treatments to patients and families close to their homes in a healing and nurturing environment. I am proud to be a part of the important work being done here.”



Joseph Leach, M.D.

Advancing the Care

St. Francis is doubling the size of the hospital to meet the tremendous growth in the area and to provide the latest technology and more specialty services. As one of the fastest growing counties in the nation, this growth promises to continue. Since 1996:

- Inpatient admissions are up 96 percent.
- Outpatient visits have increased 153 percent (from 29,003 to 73,464).
- Emergency and urgent care visits have increased by more than 199 percent, with nearly 34,000 combined visits in 2004.
- Surgical procedures have increased by 68 percent.
- The number of births has increased by 75 percent, with monthly birth records broken two times in 2004.
- Chemotherapy visits have increased 60 percent in the past two years alone.

St. Francis will continue to be the area's first choice for quality care.

2005 Community Appeal

Each year friends like you and our medical staff work together to build quality health care services. With the constantly increasing cost of patient care and technology, the hospital depends on gifts to our Annual Community Appeal. With a strong charitable commitment from the community, St. Francis will continue to be among the best community hospitals in the country.

Your gift supports patients and families through the programs and services of St. Francis. You may choose to make a general gift or direct it to the area most meaningful to you or your loved ones as follows:

- **Cancer Center**—provides local chemotherapy treatments and support to individuals and their families through their journey with cancer.
- **Family Birth Place**—purchases new equipment such as fetal heart monitors and enhances the birthing experience for women and families in private rooms.
- **Healing Culture**—provides campus artwork and benches offering comfort to patients, families and employees.
- **Technology**—purchases new equipment such as cardiac monitors to improve the care of critically ill patients.

To make a tax-deductible gift to the St. Francis Foundation, call (952) 403-2070.

ST. FRANCIS FOUNDATION notes



The winning foursome from Lenzen-Chevrolet/Buick are (from left): Dan Ramsland, Dave Chase, Toney Vogel and Bob Williams.

“Tee One For Hope” golf tournament a huge success

Thank you sponsors, players and volunteers for supporting the eighth annual St. Francis Foundation golf tournament on Friday, June 17, at Stonebrooke Golf Club in Shakopee.

The tournament was sold-out and raised a record amount, 20 percent more than last year's tournament. All proceeds benefit the St. Francis Cancer Center in supporting individuals and families through their journey with cancer.

Golfers participated in a fun, educational “teachable moments” game as part of the tournament. By matching questions and answers based on the course signage, players completed the game card for a prize drawing.

Congratulations to the following contest winners:

- Closest to the pin: Brad Kettunen and Ruth Smith.
- Longest drive: Darin May and Paula Green.
- Longest putt: Andrew Larson and Michelle Stenbeck.
- Closest to the tree: Diane Dols.
- Teachable moments: Dave Willer.
- First Place low team gross: Lenzen-Chevrolet/Buick.

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Hole-in-One: Apple Ford; Lenzen Chevrolet/Buick.

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READY

4 partners in health

FOR SCHOOL?

A back-to-school pop quiz for parents

YOU WON'T HEAR a school bell. And you don't have to worry about making the grade. But it's time for a little quiz.

Sure, it's your kids who are heading back to class, eager—or maybe not so eager—to hit the books. But there are also lots of important things for parents to learn this time of year.

See how much you know about helping your kids start the school year on the right foot by deciding if the following statements are true or false.

TRUE OR FALSE? *Since you don't hear a lot about childhood diseases such as measles any more, your children no longer need vaccinations before they start school.*

FALSE. Many illnesses that were once prevalent are now at extremely low levels in the United States—thanks, in part, to vaccines. But that's no reason to think further vaccinations are unnecessary.

“Cases of these diseases do still exist and are not that uncommon,” says Barbara L. Frankowski, M.D., chair of the committee on school health for the American Academy of Pediatrics (AAP). “If we had an outbreak, lots of unvaccinated children would be at high risk.”

Vaccines are generally extremely safe, according to the Centers for Disease Control and Prevention. But if you have questions or concerns about them, you should talk to your child's doctor.

TRUE OR FALSE? *Visiting with school personnel, even before school starts, is important if your child has special health concerns.*

TRUE. Teachers, the school nurse and other school staff should be told if your child has severe allergies, diabetes, asthma or other chronic health problems. By meeting with school personnel, you can explain your child's condition and give them any special instructions and needed medication.

TRUE OR FALSE? *A leftover slice of pizza and a glass of orange juice can be a nutritious breakfast.*

TRUE. Surprising maybe, but true. “I always tell families to be creative,” says Dr. Frankowski. Pizza isn't a bad choice because cheese provides protein and protein provides staying power.

When it comes to having other nutritious breakfast and after-school

snack foods on hand, Dr. Frankowski recommends making a trip to the grocery store part of your back-to-school shopping—and giving your child a voice in purchase decisions.

TRUE OR FALSE? *It's best to start a child's back-to-school sleep routine at least one to two weeks before school begins.*

TRUE. During school breaks, sleep schedules can get off track. But adequate sleep is key to a successful school year. If your child has turned into a night owl during the summer, you can help him or her adjust to a new sleep schedule by setting bedtime ahead by 15 to 30 minutes each night in the weeks before school starts.

The National Heart, Lung, and Blood Institute recommends that children get at least nine hours of sleep each night. Some kids might get by with less. Others may need more. You probably know whether your child is getting enough rest and what his or her bedtime should be. If you have concerns, talk to your child's doctor.

TRUE OR FALSE? *The safest route to school is always the shortest route.*

FALSE. When a child walks or bikes to school, the shortest route can sometimes be the most dangerous. Consider

How do you score? See how much you know about helping your kids start the school year on the right foot.

factors such as traffic, whether there are sidewalks, and if crosswalks exist and are well-marked. Also go over safety rules with your children and go on the route to school with them several times, demonstrating safe conduct.

“Parents need to set an example for their kids,” says Angela Mickalide, Ph.D., program director for the National SAFE KIDS Campaign. “If [children] see you crossing the street without looking both ways, they're going to do the same thing. If they see you jaywalking, they're going to imitate your behavior. Not only do we need to be walking with the kids, we also need to be modeling all of those safe behaviors.”

TRUE OR FALSE? *A loaded backpack should never weigh more than 10 percent to 20 percent of a child's body weight.*

TRUE. A heavy backpack is more likely

to cause an injury. One way to help prevent injury is to buy a backpack with wheels. The AAP also suggests getting a backpack with wide, padded shoulder straps and a padded back.

Instruct your child to wear both shoulder straps and a waist strap when available. He or she should also be told to pack lightly and put the heaviest items closest to the center of the back.

TRUE OR FALSE? *By age 10 all children can safely stay at home after school without supervision.*

FALSE. There's no set age at which a child can safely be home alone, says Dr. Frankowski. You have to make that decision, perhaps with guidance from your child's doctor. You should also be aware that there may be laws in your state governing when a child can be left alone.

When your son or daughter does stay alone, set rules. For instance, you might require your child to call you as soon as he or she gets home. Make sure your child knows what activities are allowed and not allowed. Go over things such as what to do if someone is at the door or if the smoke alarm goes off. When possible, designate a trustworthy neighbor to be a contact for your child if there's a problem.

TRUE OR FALSE? *Your child should stay home from school only if he or she has a fever.*

FALSE. Having a fever is just one reason to keep kids home from school. If a child has something contagious, has not gotten adequate sleep or doesn't feel well enough to eat breakfast in the morning, it may also be best for him or her to stay home, according to Dr. Frankowski.

HOW DID YOU DO?

If you scored 100 percent, congratulations! But if you missed a question or two, don't worry. Your son or daughter never has to know!

The important thing is that you learned something—and that you put your knowledge into action. If you and your child both put forth a little effort, it might just be the best school year ever.



Brown-bag lunch ideas for your kids

Packing a lunch for your school-going kids can be like walking a tightrope: You want the lunch to be healthful, but you also want them to eat it. Steady yourself—it's not impossible to do both, reports the American Dietetic Association (ADA).

First, be sure that the lunch you pack includes a little protein, plenty of carbohydrates and a touch of fat.

■ If you use an ice pack, you can safely consider such protein options as chicken, tuna, cheese or milk. Protein that stays safe at room temperature includes peanut butter, nuts and seeds.

■ For healthful carbohydrates, choose whole-grain breads, crackers, pita bread or pasta.

■ A brownie made with cocoa and margarine is a good dessert. Other tasty (and healthful) treats include angel food cake with fresh fruit, or graham crackers topped with peanut butter.

Next, offer fun ways to eat fruits and vegetables. The ADA suggests the following:

■ Pack fresh fruit that your child likes. Bite-size foods such as grapes or strawberries are easy to eat. Bananas and oranges can be fun to peel.

■ Include a dip of low-fat ranch dressing with raw vegetables, such as baby carrots, red-pepper strips and jicama.

Staying fit reduces risk of falling

A FALL IN A COMEDY MIGHT get a laugh. But in everyday life, it's no laughing matter.

You can be seriously injured in a fall, no matter what your age. But falls typically happen more often as people get older—and with more serious results.

Broken hips and other bones can lead to disability. Falling even once can keep you from doing things for fear of falling

Exercise can help prevent falls by improving your strength, balance and coordination.

again. Falling can even be deadly.

But there's much you can do to prevent falls and injuries.

KEEP IN SHAPE

As people age, they may have less coordination, balance or muscle strength. These and other changes, such as poor vision,

can raise the chance of falling.

That's why it's important to have your eyes examined regularly. You'll also want to see your doctor, who can gauge your strength and balance and assess your risk of falling. Your doctor can also check for possible side effects of medicines you take. Some may raise your risk of falling by making you dizzy, for example.

Exercise can help prevent falls by improving your strength, balance and coordination, according to the Centers for Disease Control and Prevention (CDC). Your doctor or a physical therapist can suggest exercises that are right for you.

Ask your doctor whether you need a bone density test to check for osteoporosis, a disease that weakens bones

and makes them more likely to break. Your doctor can recommend ways to help prevent or treat this condition.

SAFETY AT HOME

Nearly half of all falls happen at home, according to the CDC. All it might take is a slippery floor or a loose rug. Consider these tips for preventing falls from the CDC and other experts:

- Don't leave papers, shoes or other clutter near stairs and other areas where you walk.
- Make sure that stairs, hallways and other pathways are well-lit.
- Keep power, phone and extension cords out of walkways, but not under rugs.
- Arrange furniture so you have a clear path.
- Install handrails on steps.
- Store food and other items within easy reach so you don't have to stand on something to reach them.
- Use a rubber mat in the bathtub or shower.
- Install grab bars next to the toilet and in the tub.

Many falls can be prevented. If you do fall, try to land on your hands or use something nearby to break your fall. You may avoid a serious injury.



Dizzy, unsteady or afraid of falling? Help is now here

Have you ever felt dizzy, unsteady or afraid of falling? St. Francis Physical Therapy and Rehabilitative Services can now help. In early August the department extended its services to include the diagnosis and treatment of dizziness and imbalance disorders such as benign paroxysmal positional vertigo (BPPV).

"Major advancements in treatment and diagnosis have made it possible for people to no longer have to live with these conditions," said Jeff Foss, Physical Therapist. The most common causes for dizziness and balance problems are age related changes, head trauma, infections, stroke, medications and diabetes. According to the National Institute of Health, more than 40 percent of Americans experience dizziness serious enough to warrant seeing a doctor.

A physician referral is required. To schedule an appointment during regular office hours or for more information on this new service, call St. Francis Physical Therapy and Rehabilitative Services at **952-403-2001**.



St. Francis Auxiliary offers lifesaving service

WORRYING ABOUT AN ELDERLY or disabled loved one is something that most families will experience sooner or later. The possibility of that person falling and not being able to get help, or suffering a sudden illness or heart attack and not being able to reach a phone, can cause anxiety and fear in any person's mind. To help with circumstances such as these, the St. Francis Auxiliary offers a wonderful service. It is

appropriately called Lifeline.

Lifeline is a "personal emergency response system providing monitoring devices to elderly or disabled people living alone who are at risk for medical emergencies and who may be unable to call for help when those situations occur." Lifeline participants wear either a medallion around their neck, or a bracelet, which has a button they press in case of an emergency. This activates a device connected to their telephone and a call is placed to an emergency response center in Cambridge, Mass. The response center that receives this call has instant access via computer to the person's health history and personal profile. The center would then call the number of the activated unit, and if unable to get an answer, would contact that person's responders. Every person with a Lifeline device picks three responders who live no more than 15 minutes from them, and who could immediately go and check on them. These three responders would have a key to the person's home so that they would be able to get in. If those responders were not available, the center would then call the police.

For more information on Lifeline services, call the Lifeline number at (952) 403-2660.

St. Francis has been offering the Lifeline services to people since 1989 when it was brought here from Methodist Hospital by Bob and Ruth Nieters, volunteers at the hospital who saw a need for a program such as this. One unit, which now costs \$569 to purchase, was initially funded by donations from local service organizations. Today, however, the funding comes from the St. Francis Auxiliary. Anyone is eligible to receive the Lifeline services by simply filling out an application. They will then be contacted by someone at St. Francis who will send a trained volunteer to install the device. There is a monthly fee of \$25 for operating costs.

For more information on this service, call the Lifeline number at (952) 403-2660.

Volunteer Spotlight on Bob and Ruth Nieters

FOR RUTH AND BOB NIETERS, volunteering their time to St. Francis has been a lifelong commitment. Ruth, a charter member of the St. Francis Auxiliary, has lent a helping hand since 1953. Ruth did many jobs in the beginning, such as scrubbing the hospital steps, to help the founding Franciscan Sisters. Volunteers like Ruth help to keep the hospital running smoothly. She has been a member of the Auxiliary ever since; serving on the board, taking a term as president, and is still actively involved today. Her duties now include helping at the information desk and assisting in the Lifeline program along with her husband Bob.



Volunteers Ruth and Bob Nieters

in 1989. The program provides the Lifeline units to vulnerable people in their homes. Bob was one of the volunteers who actually installed the devices in people's homes, and he recruited others to help (see Lifeline story above).

Both Ruth and Bob enjoy volunteering at the hospital and know the importance of the volunteer role at St. Francis. Someday they may need the same assistance and compassion that they are offering to others.

Clearly, these two individuals have been an asset to the St. Francis Regional Medical Center, and they have also enhanced the larger community that the hospital serves.

MORE >>



For more information on volunteer opportunities at St. Francis Regional Medical Center, contact Debbie Carlberg at (952) 403-2065.

FACING PROSTATE ISSUES



HEY, GUYS, LISTEN UP: Whether you want to admit it or not, you have a prostate. And if you want to maintain good health, you'd do well to learn about possible problems you could have as you get older.

"There is a tendency among men to ignore [their] prostates," says J. Brantley Thrasher, M.D., a spokesman for the American Urological Association. "Women are much better about checking for breast cancer. But men need to take the time to get checked for prostate cancer and other problems."

WHAT IS THE PROSTATE?

Located below the bladder and in front of the rectum, this walnut-size gland makes and stores fluid that combines with sperm to form semen.

The prostate surrounds the upper part of the urethra, the tube that empties urine from the bladder.

"As you get older, your prostate begins to enlarge," says John Sattenspiel, M.D., a spokesman for the American

Academy of Family Physicians. "That can slow the flow of urine."

PROSTATITIS

The exact cause of prostatitis, the swelling or infection of the prostate, is unknown. But according to Dr. Thrasher, younger men who have multiple sexual partners are at increased risk for the condition.

"When you have prostatitis, it feels like you are sitting on a golf ball or tennis ball," says Dr. Thrasher. "You have pain when you urinate and difficulty urinating."

Chronic prostatitis, the most common form of the disease, can affect adult men of any age. Since prostatitis is not caused by bacteria, antibiotics are not effective in treating it. Your doctor may prescribe medication called an alpha-blocker to relax muscles in the prostate. Dietary changes and warm baths may help too.

Acute bacterial prostatitis, the least common but easiest to diagnose

form of prostatitis, can be treated with antibiotics.

Chronic bacterial prostatitis, also relatively uncommon, is often caused by a defect in the prostate that causes repeat infections. Your doctor may suggest surgery to correct the problem.

Asymptomatic inflammatory prostatitis, which generally does not cause discomfort, is usually found during testing for prostate cancer or the causes of infertility.

BENIGN PROSTATIC HYPERPLASIA

BPH generally affects men older than 50. Symptoms include:

- A frequent, urgent need to urinate, especially at night.
- Trouble urinating.
- A weak stream of urine.
- Feeling that you still need to go after urinating.
- Problems with leaking and dribbling.
- Small amounts of blood in your urine.

To determine if you have BPH, your doctor may perform a digital rectal exam, measure urine flow, or order a blood test or x-ray. BPH can be treated in several ways:

- Medications, such as alpha-blockers, that shrink or relax the prostate.
- Nonsurgical procedures that use microwaves to heat and destroy

excess tissue on the prostate.

- Surgery, such as a transurethral resection of the prostate (TURP), to remove enlarged tissue.

PROSTATE CANCER

Prostate cancer is by far the most serious prostate health problem; if undetected and untreated, it can be deadly.

Ageing increases the chance of getting prostate cancer. By age 75, up to three-quarters of all men have some signs of this disease, according to the National Cancer Institute. Because prostate cancer

Men need to take the time to get checked for prostate cancer and other problems.

often spreads very slowly, it may never need treatment, reports the American Cancer Society (ACS).

Symptoms can include urination problems, blood in the urine or semen, painful ejaculation and frequent pain in the lower back, hips or upper thighs. Prostate cancer in its early, more treatable stages often doesn't have symptoms.

That's why many medical organizations, such as the ACS, say that most men should be tested for prostate

cancer yearly beginning at age 50. Men at high risk for the disease, which include African Americans and those with a family history of prostate cancer, may need to begin screening at age 45. Checkups may involve a digital rectal exam or a blood test for prostate-specific antigen (PSA), a protein produced by cells in the prostate. When the gland enlarges, PSA levels tend to rise.

If found early, prostate cancer can be successfully treated using surgery or radiation therapy. Watchful waiting—in which the cancer is carefully monitored

but not necessarily treated—is an option for some men whose cancer is not causing symptoms, is expected to grow slowly, and is small and contained within one area of the prostate, according to the ACS.

“The most important thing you can do with prostate cancer is find it early,” Dr. Thrasher says.

MORE ADVICE

Ignoring a prostate problem—no matter what kind—is never a good idea. Always talk to your doctor about any symptoms or concerns you have.

MORE >>



To learn more, call the National Kidney and Urologic Diseases Information Clearinghouse at 1-800-891-5390. Or visit the American Urological Association at www.urologyhealth.org.

Diet may help you maintain a healthy prostate

The exact cause of prostate problems, including cancer, is unknown. But research continues to offer clues as to possible ways to head off some diseases and disorders.

“There’s a lot of research going on right now on prevention of prostate cancer,” says J. Brantley Thrasher, M.D., a spokesman for the American Urological Association. “There’s some evidence that a heart-healthy diet is also prostate-healthy.”

The American Cancer Society (ACS) recommends eating five or more servings of fruits and vegetables a day and limiting your intake of red meats, especially those high in fats. Instead, choose leaner forms of protein, such as fish, poultry or beans. Also include whole-grain bread, cereals, rice and pasta.

Another tip from the ACS is to make pink grapefruit, watermelon and especially tomatoes—raw, cooked or in products such as sauces and ketchup—a regular part of

your diet. These foods are rich in lycopene, a vitaminlike substance that helps prevent DNA damage and may help lower your risk for prostate cancer.

According to the ACS, some studies also suggest that a daily dose of 50 milligrams of vitamin E may lower your risk for prostate cancer. However, other studies have found vitamin E to be of no benefit to prostate health.

In addition, selenium—a mineral naturally found in grains, meat, yeast and certain vegetables and also available as a dietary supplement—has been suggested as a possible source of prostate protection.

The National Cancer Institute is currently conducting an international study of more than 32,000 men to see whether selenium or vitamin E—or both—help prevent prostate cancer.

It’s always best, of course, to talk with your doctor before taking any new vitamins or supplements.

short TAKES



St. Francis opens Sleep Diagnostics Center

Good nights lead to better tomorrows. Yet millions of people fail to get quality sleep. Treatable sleep disorders, such as snoring, sleep apnea and narcolepsy are often the cause. Diagnosing a sleep disorder is the first step to achieving a good night's sleep—which isn't just a luxury—it's necessary for good health and optimal function.

Now open, the St. Francis Sleep Diagnostics Center offers area residents the chance to get the diagnosis and treatment they need closer to home. The off-site center is located in the Voyager Bank Building (500 S. Marschall Road, Suite 220) in Shakopee.

"We've created a 'home away from home' for our patients, a place where they can feel as relaxed as possible," says Salim Kathawalla, M.D., medical director of the St. Francis Sleep Diagnostics Center. All sleep studies are conducted in a private bedroom equipped with "The Sleep Number Bed," a personal phone, cable TV and a DVD player.

Using the latest therapies and most advanced diagnostic technology, sleep specialists Dr. Salim Kathawalla and Keith Harmon, M.D., of the St. Francis Specialty Clinic, along with Rachel Fergel, clinical coordinator, offer a unique multi-disciplinary approach for the treatment of sleep disorders.

For information or to schedule an appointment, call the Sleep Diagnostics Center at (952) 403-2800.

Welcome orthopedic physicians

New medical staff members from Orthopaedic Consultants, P.A., will be taking an active role at St. Francis in the Surgical Care Department.

Drs. Patrick Ebeling (top right) and Neil Johnson (middle) are seeing patients in the Medical Office Building on Mondays and Fridays. Appointments can be scheduled at **952-892-1800**.

Dr. Stephen Olmsted (bottom) is also available to provide specialized services in hand surgery.

All three surgeons graduated from Medical School at the University of Minnesota, where they also completed their residencies. Dr. Olmsted completed his hand surgery fellowship at the University of California, Davis Medical Center. He is board certified in orthopedic surgery and surgery of the hand.



Dr. Patrick Ebeling



Dr. Neil Johnson



Dr. Stephen Olmsted

Festival Gala November 12: Save the date

Join the St. Francis Foundation at its 19th Annual Festival Gala on November 12, at the Hazeltine National Golf Club in Chaska.

The evening celebration will include a silent auction, live entertainment and specialty food items. Proceeds will benefit the St. Francis Regional Medical Center as it continues to grow and expand to advance care.

For more information, call the St. Francis Foundation at (952) 403-2070.

HOW TO REACH US

General Information . . . (952) 403-3000
'Ask St. Francis' (952) 403-2000
St. Francis Urgent Care, Shakopee (952) 403-2111
 Monday through Friday, 6 to 10 p.m.
 Weekends 1 to 10 p.m.
St. Francis Urgent Care, Chaska (952) 361-3999
 Monday through Friday, 6 to 10 p.m.
 Weekends 1 to 8 p.m.
Diagnostic Services (952) 403-2150
Family Birth Place (952) 403-2062
Capable Kids Pediatric Rehabilitation Center . . . (952) 403-3980
St. Francis Cancer Center (952) 403-2031
St. Francis Foundation . . . (952) 403-2068
St. Francis Pediatrics . . . (952) 403-3360
St. Francis Physical, Occupational and Speech Therapy
 Shakopee (952) 403-2001
 Chaska (952) 448-5077
St. Francis Specialty Care Clinic and Breast Center
 Shakopee (952) 403-2600
St. Francis Specialty Care Clinic
 Chaska (952) 361-3990
 TDD (952) 403-2257

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askstfrancis@allina.com.

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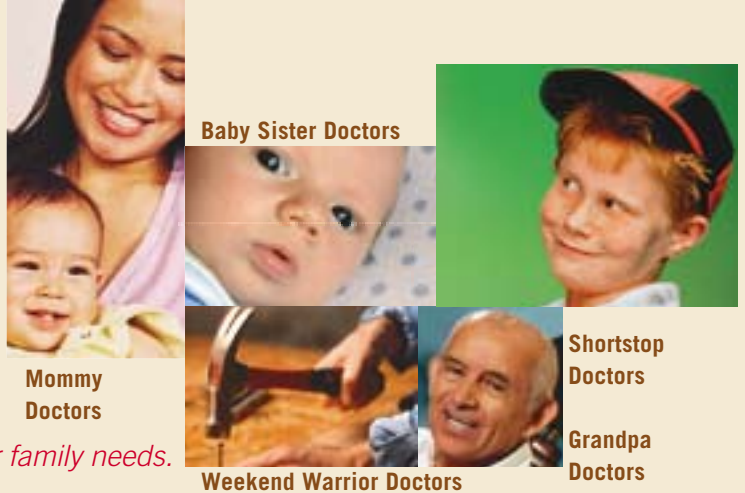
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What kind of doctors practice at St. Francis Regional Medical Center?

The kind your family needs.



Mommy Doctors

Baby Sister Doctors

Shortstop Doctors

Grandpa Doctors

Weekend Warrior Doctors

At St. Francis we value the contributions of our physician and clinic partners, not only as providers of quality health care, but as community and organizational leaders. Recognizing the need for strong medical services in this rapidly growing area, they have committed to meeting that growth with added resources and services. For more information on our physicians or clinics, call the 'Ask St. Francis' information line at **(952) 403-2000**.

Allina Medical Clinic

Shakopee (952) 403-3535
 ■ Family medicine
 ■ Internal medicine
 ■ Nephrology
 ■ Podiatric medicine and surgery

Crossroads Medical Clinic

Shakopee (952) 496-6700
 Chaska (952) 448-2050
 Prior Lake (952) 447-1700
 ■ Family medicine

Jonathan Clinic

Chaska (952) 448-3500
 ■ Family medicine

Jordan Medical Clinic

Jordan (952) 492-2225
 ■ Family medicine

Metropolitan Pediatric Specialists, P.A.

Shakopee (952) 445-6700

Minneapolis Cardiology Associates

Shakopee (952) 403-2099

Orthopaedic Surgical Consultants, P.A.

Shakopee (952) 403-3399

Park Nicollet Clinic

Shakopee (952) 993-7750
 Prior Lake (952) 993-8800

- Allergy
- Cardiology surgery
- Endocrinology
- Family medicine
- Obstetrics/gynecology
- Orthopedic surgery
- Otolaryngology
- Pediatrics
- Physical medicine
- Podiatry
- Vascular surgery

St. Francis Specialty Care Clinic

Shakopee and
 Chaska (952) 403-2600

Advanced Dermatology

(952) 915-6000

Behavioral Health Services

(952) 403-2601

Colon & Rectal Surgery Associates

(651) 312-1700

HCMC Physical Medicine and Rehabilitation

(952) 403-2600

Minneapolis Children's Heart Clinic

(612) 813-8800

Minneapolis Clinic of Neurology, Ltd.

(952) 403-2600

Minneapolis Otolaryngology

(952) 920-4595

MN Gastroenterology, P.A.

(612) 870-5412

Orthopaedic Consultants, P.A.

(952) 892-1800

Plastics and Reconstruction

(952) 925-1111

Specialty Surgical Services

(952) 224-9360

St. Francis Breast Center

(952) 403-2700

St. Francis Sleep

Diagnosics Center

(952) 403-2800

Surgical Specialties, LTD

(952) 224-9350

Urologic Physicians

(952) 920-7660

St. Francis Emergency

Department (952) 403-2200

■ Suburban Emergency Associates

St. Francis Cancer

Center (952) 403-2031

Radiation Oncology

(952) 403-2031

Valley Family Practice

Chaska (952) 448-3303

■ Family medicine

In-hospital physicians

■ Pathology

■ Radiology

■ Anesthesiology

MARK YOUR calendar

CHILDBIRTH CLASSES

Call Medformation at 1-800-877-7878 or (651) 697-3333 to register for prenatal classes or go to www.allina.com and click on **Be Healthy**. Dates and times subject to change.

New Parent Connection

Meets weekly

This class is co-sponsored by ECFE and is designed for children up to 4 months of age. It is a great way to learn more about parenting while being supported by parents going through the same things you are.

Small Talk Class

Meets twice a year

This is a sign language class for babies that hear. This class will help you and your baby/toddler to understand each other and decrease frustration.

New Brother/New Sister

Meets every other month

A one-night class designed to help children ages 2 to 8 prepare for the birth of a sibling. All participants should bring a doll or stuffed animal to class.

Breastfeeding Preparation

Meets once a month

One-night class offering helpful hints to prepare for breastfeeding.

Healthy Pregnancy

Meets every other month

One-night class providing important information about the development of babies and how to make pregnancy easier and more fulfilling.

Childbirth and Parenting Preparation

Six weekly classes

Focuses on preparation for labor, birth and early parenthood. Plan to attend classes during the last three months of pregnancy and complete about one month before due date.

Weekend Express also available.

All About Babies

Meets every other month

Two-night class designed for new parents to relieve some of the anxiety expectant parents, grandparents or adoptive parents experience.

Weekend Express also available.

Refresher Childbirth and Parenting

Offered every other month

Two-session class for parents who have taken a childbirth preparation class within the last three years.

Car Seat Safety

Meets once a month

This class helps the expectant or new parent to learn about car seat safety. Car seat not necessary for class. U-Care members covered.

Infant Massage

Two-week class meets every other month

Infant massage is a unique form of nurturing touch shown to have physical and psychological benefits for infants and parents. For infants 3 weeks to 1 year old.

Infant and Child CPR

Meets every other month

Cardiopulmonary resuscitation (CPR) is an important first aid skill for

helping an infant or young child who is choking or has stopped breathing. This course does not qualify you for CPR certification.

Vaginal Birth after Cesarean

Meets every other month

Class is designed for the women (and partners) who have had previous cesarean births and are considering a vaginal birth with this pregnancy. This class should be taken in addition to Refresher Birth and Parenting Preparation during the last two to three months of pregnancy.

Prenatal Yoga

Six weekly classes

Women who exercise their minds and bodies during pregnancy have an increased feeling of well-being and heal more readily after the baby is born.

SUPPORT GROUPS

Child Loss Support Group

Meets the second Monday of each month at 7 p.m.

This group offers hope and provides support, education and resources to those who have experienced the death of a child. Call the 'Ask St. Francis' line at (952) 403-2000 for more information.

Infant Loss Support Group

Meets the first Tuesday of every month at 7 p.m.

For more information, call (952) 403-2002.

Diabetes Support Group

Class meets the first Monday of each month at 7 p.m.

Monthly information and group support for those with diabetes. For more information, call Bonnie Epple, R.N., at (952) 403-3392.

Women's Connection

Meets the fourth Monday of each month (Note: December meets the third Monday) at 7 p.m.

Support for women with cancer. Call Marti Auringer at (952) 403-2700 for more information. The American Cancer Society's Look Good...Feel Better representatives will be on hand during each meeting. Call (952) 403-2000 to sign up for Look Good...Feel Better.

Grief Support Group

Meets the first Wednesday of each month at 7 p.m.

For more information, call (952) 403-2002.

Heart Support Group

Meets the first Tuesday of each month at 7 p.m.

For people who have been diagnosed with heart disease. For more information, call (952) 403-2080.

Stroke Support Group

Meets the third Monday of each month

Stroke survivors, family members, friends and health care providers are welcome to attend. For more information, call Marypat Parker at (952) 403-2019 or Katy Sustacek at (952) 403-2016.

Smoking Cessation

If you're ready to stop smoking, please call 1-877-354-PLAN.

Emergency Medicine Services Education/CPR

For information and to register for EMS/CPR classes, call (612) 775-9626.

For class cancellations, tune into WCCO TV Channel 4 or WCCO Radio 830 or go to www.wcco.com or www.830wccoradio.com.

HOW TO FIND US



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