Hospitals use technology

TECHNOLOGY, from Page 11

"There is not a department in a hospital that is not affected by technology," she said. "Colby is in good shape. We have a microbiology lab that can do just about anything."

She said a magnetic resonance imaging (MRI) machine could easily cost \$1 million. Replacing a tube in a CT scanner is \$100,000. She said there are other costs involved with introducing technology.

"People have to be trained and then there is capital space to house that technology," she said. "Older facilities are more difficult to house technical equipment.

"Everything we do, we do for the patients. The patient always comes first."

Citizen's also is the repository for the central blood bank of northwest Kansas.

Cheyenne County Hospital

Les Lacy, administrator at Cheyenne County Hospital, said the facility recently completed a remodeling project. He said the hospital has a new laboratory, X-ray machine and a CT scan-

Mr. Lacy said the hospital is upgrading its computer system to allow transition to electronic medical records. He said the system will connect patients' charts to the billing department, improving accuracy. The system already interfaces with the local pharmacy.

"We're real excited about what this will bring to our patients," he said. "Patient safety is the driver behind all these improvements.'

Goodland Regional Medical Center

Goodland Regional Medical Center is fast moving toward computerization. Chief Financial Officer Jim Precht said the center already has a clinical package which records every aspect of the patient's care. Bedside terminals record vital signs and maintain an electronic medical record.

Technology already at the center's disposal includes a CT scanner, using computerized tomography, bone density screening, fluoroscopy and a mobile MRI unit.

"What I think is unique about Goodland is all systems integrated into one. that we are moving to the outpatient setting," Mr. Precht said. "That's where the demand is. partment has its own special software."

Technology focuses more and more on a shorter length of stay and doing procedures as an outpatient. For example, gall bladder surgery used to take a week in the hospital, and months before the patient could be back on the job. Now, with laproscopic surgery, it's down to a week."

Rawlins County Health Center

Some technology is not new to the medical industry, but it might be new to a rural hospital.

That's the situation at Rawlins County Health Center in Atwood. Carey Long, head of the radiology department, said in the last six months, the hospital has obtained a CT scanner. He said it is a very nice diagnostic tool, allowing medical staff to diagnose fractures, head tumors, subdural hematomas and cancerous tumors in the chest.

He is also glad to have mobile services like mammography screening, MRI, ultrasound and echocardiography provided by the Hays Medical Center.

Logan County Hospital

Like other area hospitals, Logan County Hospital in Oakley is heading toward electronic medical records.

"It's what everyone wants to go to," said Administrator Kyle Hahn. "We're looking into the new gel technology in blood banking. It speeds up the cross-matching process.

"We're also looking into a new cardiac marker machine. It measures cardiac enzymes in the blood that detect if a heart attack has occurred. The best part is we get the results in 20 minutes.'

Mr. Hahn said the hospital has a hiva-mat machine in the physical therapy department. The machine stimulates muscles, and blood flows to speed up the healing process.

Sheridan County Health Complex

"It depends on what you consider new," said Information Technology Director Karla Lucas at Sheridan County Health Complex in Hoxie.

"A piece of equipment might be new to people here, but it is not necessarily new technology.'

She said the hospital is computerized, with

"It works pretty good," she said. "Every de-

Thomas County services

THOMAS, from Page 10

and optometric services are also available.

Two physical therapy offices in Colby are Tina Harris Physical Therapy and Sports Medicine Center, 270 N. Franklin, and Northwest Kansas Physical Therapy, 990 S. Range.

Optometrists are Morrison and Wahlmeier at 180 W. Sixth, and Larry Washburn, 505 N. Franklin.

Cobly has three chiropractic offices. Wiley

Health Tip

Side Stitches: Whenever the pain hits, you should stop what you are doing and relax your a stitch, just slowing your pace down to a walk or gently massage the painful area.

and more. The other offices are Drs. Franz and Tubbs Chiropractic, and Warta Chiropractic and Fitness.

Chiropractic, 990 S. Range, offers holistic care

Wiley and Tubbs both offer services like acupuncture.

There are four dentists in Colby – Dr. Thomas Barlow, 505-H N. Franklin; Dr. Scott G. Haas, 770 S. Range; Dr. Jeffrey M. Rayl, 1690 W. Fourth St.; and Dr. Karen A. Thummel, 480 W. Fourth St.

should relax your muscles. Get your breathing back to a steady rhythm. When the pain fades, twitching muscles. If you are running and get speed up again. You can use 3 fingers to press

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Rural emergency depends on volunteers



SHE'S NOT HEAVY? Ruth Schillig, Sabrina Cooper and an unseen Brandon Anderson lifted Winter Kuehn into the ambulance. All four are members of the Norton County Emergency Medical Service, but Winter agreed to be a patient for the exercise. Photo by Veronica Monier/The Norton Telegram

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By Veronica Monier

Volunteers are the backbone of rural emergency medical services. Without them, there would be no services.

"They are vital," said Sherman County Director Bruce Gleason. "They're critical to rural Kansas health care."

Mr. Gleason said Sherman County wouldn't have an ambulance service without them. If there were no volunteers, he said, there would be no one to give health care to not only city residents, but the rural people as well. The volunteers also operate as ground crews when patients are being flown out by air ambulance, he said, and without them, that couldn't happen.

"To have volunteers in rural western Kansas is absolutely critical," he said.

The major challenge with having a volunteerbased service is finding enough people who want to take on the challenge of caring for patients, he said. There are a lot of state regulations that have to be followed, and if you're a federally certified technician, there are federal regulations as well.

"That presents a challenge," he said, as well as finding people who have time to volunteer."

Mr. Gleason said it takes 240 to 250 hours to go through a training course. That's six months that they have to find the time for classes, he said.

"Finding people who are willing to sacrifice The Norton Telegram the time can be difficult," he said. "They literally have to drop what they are doing and respond no matter if it's 2 a.m. or 2 p.m.," he said. "They could be sitting in church on a Sunday and be paged out. It doesn't matter what time of day it is or what the weather's like. They respond."

The Sherman County Emergency Medical Service has 23 volunteers and two full-time paid employees, he said. They have one first responder, 17 basic technicians, two intermediate technicians, and two registered nurses. He said he is a paramedic.

The difference between first responders and technicians, he said, is the level of certification, allowing different skills to be practiced in the field. Technicians are trained to do things that first responders can't and paramedics can do things that technicians can't.

He said the Sherman County service is the only one in northwest Kansas run by a hospital, which has some benefits and some drawbacks.

They are county-owned, he said, but most of the service's money comes from the state and federal government under the Medicare and Medicaid programs, plus reimbursements from private insurance companies.

See EMERGENCY, Page 15

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Rural emergency service depends on volunteers

EMERGENCY, from Page 14

The Norton County Emergency Medical Service has 36 volunteers and three paid employees, said Director Ruth Schillig.

There are 19 technicians and 18 first responders, she said, although seven of the first responders have taken the emergency medical technician test and are waiting for their results to come back.

The Norton County service includes people from Lenora and Almena as well as the county seat.

"Volunteers are very important," she said. "If we didn't have volunteers, we wouldn't be running. They are an essential asset."

Mrs. Schillig said working around the technicians' work schedules is the most challenging aspect of having a volunteer service.

"I can't force them to be on call," she said. "If we don't have a volunteer to fill a spot, the full-time employees have to make it up. The problem is, if the full-time employees are already scheduled to work at that time, then I have to call and beg people to come in. "Staffing is definitely the biggest challenge."

She said a benefit of the volunteer service is the wide variety of people and personalities, ages and backgrounds.

They get everything from trained nurses to people who have no medical experience and thought it would be an interesting thing to do.

"I truly enjoy all of my volunteers, and I enjoy being the director," she said.

"I've had nothing but good response from the staff when I took over, and like I said, if it wasn't for them, there wouldn't be a service."

The Norton County service is run mostly on county money with a few grants. It has two ambulances in Norton, one in Lenora and another in Almena.

In Decatur County, there are 35 volunteers and one paid employee, said Karen Eskew, a technician and the billing secretary.

The paid employee is the director, Pat Pomeroy, who is also a paramedic. Eight of the volunteers are first responders and the rest are technicians, Eskew said. "The volunteers are very important," she said. "If we didn't have volunteers, we wouldn't have a service.

"They give up their time — weekends and days — to be on call, and sometimes they don't even go anywhere."

Scheduling is the most challenging aspect of the volunteer services, Eskew said.

"Most of the volunteers have other jobs," she said. "We have to work around that. Not everyone has weekends or even the weekdays off."

The Decatur County service is run with county money, she said, and tries to get reimbursed by insurance or government programs.

"It's definitely not for everyone," said Mr. Gleason of the volunteers' job. "Some people get in and find out it is nothing like they thought it would be.

"We're a busy service. I think we ran over 700 calls last year, a lot of which were critical trauma patients.

"That's another thing that makes it hard for people to commit. They can't handle some of those situations, and that's OK. Like I said, it's not for everyone."



IT WASN'T AN EMERGENCY, but Norton County Emergency Medical Service technicians Ruth Schillig, Sabrina Cooper and Brandon Anderson administered emergency care to Winter Kuehn. Winter, the Norton service's newest worker, agreed to be the patient for this exercise. Photo by Veronica Monier/The Norton Telegram



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Decatur helps over 300 more patients

By Kimberly Davis

The Oberlin Herald

The Decatur County Hospital helped 333 more patients in 2005 than the previous year, and that added up to another profitable year for the county-owned facility.

Administrator Lynn Doeden said they admitted 638 inpatients, 130 more than in 2004, and saw 2,922 outpatients, 203 more. She said she isn't sure why the hospital had more business, but the county has an older population and the

flu that went around this year may have contributed.

Health care is important, she said, and it is vital for a town to have a hospital. When people get to 70 to 80, they can't drive to the next county for health care. It can cost the whole family more, she said, since often people's kids have to take off work to drive them.

When the health care system goes, said Mrs. Doeden, the town will be lost.

In 2002, when the out-of-town management company pulled out after more than 50 years, the county decided to keep its hospital going. A nonprofit

corporation called Decatur Health Systems was formed to run the hospital, nursing home and associated services. Although the county owns the building, she said, the corporation operates

The hospital, built by the county in 1949, was operated by the Lutheran Hospital and Home Society of Fargo, N.D., later known as Lutheran Health Systems and then Banner Health Systems. Banner decided to abandon most of its rural markets in 2002, including Oberlin.

The critical access hospital has been on its own for the last four years and has been able to



make money and add new technology.

Mrs. Doeden said, the hospital had a

\$174,600 profit in 2005. She said the number

ministrator said. The facility is becoming more computerized, she said, and like lot of hospitals is looking at ways to

stay up to date with technology.

She said they started with financial, which has meant less paperwork.

Currently, said Mrs. Doeden, they are working on computerized charting, which means when a nurse admits someone into a room, they will ask them the same questions as always, but then enter the answers into a laptop computer, which will be moved from room to room on a cart. This will save time, she said, because someone won't have to enter the information later.

The idea is that the staff will then be able

to spend more time with the patients.

This is the last step of the improvements and then they will be able to go back and see what can be improved or done differently, Mrs. Doeden said. They are talking about some ideas, like scanning insurance cards instead of taking a copy of them.

Another new program at the hospital is the fitness center, which is used for physical therapy but is also open to the public.



SONDRA FOWLER, a nurse at the Decatur County Hospital, used a computer to process information from a patient. Photo by Kimberly Davis/The Oberlin Herald





Decatur Health Systems Decatur County Hospital Cedar Living Center Cottonwood Home Care Wheat Ridge Apartments www.decaturhealthsystems.org





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A group of women approached the hospital

See DECATUR, Page 18