Wake Up to Snoring

Do you snore? Maybe. Does someone you love snore? You can answer that more easily. The answer can affect your health in surprising ways. Loud snoring is a classic symptom of sleep apnea, a common disorder with one or more pauses in breathing or shallow breaths while you sleep. Breathing stops for a few seconds or even minutes, and can occur 30 times or more per hour.

“Sleep apnea is a big deal,” says Dr. Gerard O’Halloran, a Mayo-trained ENT specialist at Northfield Hospital & Clinics. “Sleep apnea can aggravate high blood pressure and lead to heart attack or stroke. In fact, people with untreated sleep apnea have three to five times as many heart attacks and strokes as the general population.”

Sleep apnea can also contribute to depression, anxiety, Alzheimer’s and even car accidents caused by sleepy drivers, Dr. O’Halloran says.

About half of adults with sleep apnea don’t know they have it. “They’re not really aware that they’re as tired as they are,” Dr. O’Halloran says. “They just push through it.”

Signs of sleep apnea include:

**Loud snoring.** If you snore loudly, there’s about an 80% chance you have sleep apnea, Dr. O’Halloran says. “You can have sleep apnea without snoring, and snore without having apnea,” he adds.

**Neck size.** A study that simply measured men’s necks found that among men with a neck size of 17 inches and up, 80% had sleep apnea. Women with a neck size that’s 16 inches or bigger are at greater risk of sleep apnea, too.

**Underbite.** This causes your tongue to ride further back in your throat, blocking the airway at rest.

**Big tonsils.** They can block your airway when your throat relaxes during sleep.

**Daytime sleepiness.** If you fall asleep quickly at night, or want to nap after lunch, sleep apnea may prevent you from being well-rested.

Treatment options include CPAP (continuous positive airway pressure), which uses mild air pressure (through a nasal tube or face mask) to keep the airways open. It’s reliable, but 25% to 30% of patients can’t tolerate it. CPAP machines require a prescription.

Dental appliance therapy uses a custom-made device that fits like a sports mouth guard to hold the jaw in a forward position to help keep the airways open. Dr. John Noack works with the Sleep Center at Northfield Hospital to provide dental appliance therapy; he has been a member of the American Academy of Dental Sleep Medicine since 2006.

Surgery may help people with mild sleep apnea if it’s caused by big tonsils, excessive tissue in the palate, or a nose that needs straightening, Dr. O’Halloran says.

If you suspect you have sleep apnea, contact your primary doctor or ENT to see if a sleep study may be appropriate for you.

To make an appointment with Dr. Gerard O’Halloran, call the Northfield Clinic at (507) 646-1494.

To make an appointment with Dr. John Noack at Professional Drive Dental in Northfield, please call (507) 645-5264.
Patients at Northfield Hospital are benefitting from a refined approach to in-patient care: Dedicated hospitalists who lead care during a patient's hospital stay.

NH&C and Allina worked together to establish a core team of specialists who focus on in-patient care. That enables Northfield Hospital to treat sicker patients who might otherwise be transferred to another hospital.

That means more patients can receive hospital care close to home. Hospitalists are doctors who treat patients during a hospital stay. They pay special attention to conditions that can complicate recovery, such as diabetes or high blood pressure. These doctors remain in close contact while on duty, and can respond quickly when needed. Hospitalists coordinate with your primary doctor to give you the best care in and out of the hospital.

“Having specialists devoted to hospital medicine is good for patient care,” says Dr. Jeff Meland, Chief Medical Officer of Northfield Hospital & Clinics. “It increases the quality, continuity, and expertise for patients being cared for in the hospital.”

Hospitalists are very familiar with the hospital environment, Dr. Meland explains. “They have excellent referral networks for follow-up care, and for help with specific problems. They are skilled with the electronic health record, a crucial resource for continuity of care.”

There’s a widespread trend in healthcare to minimize hospital stays. That means the threshold for in-patient care is higher, so community hospitals are seeing sicker patients than in the past.

“Patients requiring hospitalization have greater needs,” says Jerry Ehn, Chief Operating Officer of Northfield Hospital & Clinics. “With dedicated hospitalists, we can care for patients with more serious conditions closer to home, and provide greater continuity of care.”

At the same time, specialty hospitals want to focus on the sickest patients, “so they’re working with community hospitals like ours to provide excellent care for a wider range of patients, including those with higher needs,” Ehn adds.

Northfields hospitalists can consult with specialists at Mayo Clinic, Abbott Northwestern, U of M, HCMC and other partner organizations.

If a patient does need to go to a more specialized hospital or needs a higher level of care, a hospitalist handles the transfer.

NH&C’s hospitalist team includes dedicated hospitalists Dr. Salwa Bakkali-Derksen, Dr. Thomas Holt and Dr. Marie Gebler; Dr. Katie Helgen, Dr. Randolph Reister and Dr. Greg Randall, who also continue to see their patients in the Northfield and Lonsdale clinics; Dr. Berit Amundson, Dr. Kyle Hoffert, Dr. Jessica Storlie and Dr. Heather Stortz, who also continue to see their patients at Allina Clinic.

NH&C’s hospitalist team (l. to r.): Dr. Heather Stortz, Dr. Salwa Bakkali-Derksen, Dr. Kyle Hoffert, Dr. Katie Helgen, Dr. Greg Randall and Dr. Jessica Storlie. Not pictured: Dr. Thomas Holt, Dr. Marie Gebler, Dr. Randolph Reister and Dr. Berit Amundson.
When Julia Larson took a tumble, her team sprang into action.

The budding gymnast was trying an aerial cartwheel off the balance beam and fell, landing hard on her hand and breaking both bones in her forearm, the radius and ulna. Julia’s mom Wendy was at work, an hour away; grandma LeAnne Larson was close enough to get Julia to the Farmington Clinic within minutes, where Julia’s own doctor, Dr. Nick Krawczyk, saw her right away (giving up his lunch hour to care for her).

Julia had seen Dr. Nick just the week before for a well-child checkup. Quick care from her favorite doctor put Julia at ease during a painful, panicky time.

“It’s rare to see your family doctor when you’re injured – someone you trust and know when you’re scared and hurt, who can help you navigate what you need,” Dr. Krawczyk says. “I was glad that I could do that.”

“She loves Dr. Nick,” Wendy says. “They have a good relationship, and she’s always happy to see him.”

Julia’s arm was x-rayed and splinted; the fracture was so severe that Dr. Krawczyk reviewed the x-rays online with an orthopaedic specialist in the nearby Lakeville Clinic, and Julia was in to see orthopaedic surgeon Dr. Erik Stroemer within 90 minutes.

Julia didn’t need surgery or pins to mend the break, but she did need special care to straighten and align her bones before casting, a procedure that’s better under anesthesia. Dr. Stroemer set her up with his colleague, orthopaedic surgeon Dr. Hans Bengtson, for the next morning at the Surgery Center at Northfield Hospital.

It was Julia’s first time in a hospital. “I was freaked out about going under,” she says. “Then all the doctors talked with me and told me what they were going to do. I felt calm and thought, ‘Oh yeah, I can do this.’”

“YOU DON’T HAVE TO BE SCARED. THEY WILL TAKE REALLY GOOD CARE OF YOU.”

– JULIA LARSON ON WHAT TO EXPECT FROM A TRIP TO THE HOSPITAL

The staff at the Surgery Center was great,” Julia’s mom recalls. “By the time she walked away from me to go in, she was all smiles.”

Julia was on her way home with her new cast…just 24 hours after her injury. Now she’s bouncing back.

“Coordinated care for urgent concerns:
- Primary care clinics
- Diagnostics in-clinic
- Orthopaedic specialists
- Surgery Center
- Urgent Care - Lakeville (7 days a week)

‘YOU DON’T HAVE TO BE SCARED. THEY WILL TAKE REALLY GOOD CARE OF YOU.’

– JULIA LARSON ON WHAT TO EXPECT FROM A TRIP TO THE HOSPITAL

Julia’s advice for kids going to the hospital? “You don’t have to be scared. They will take really good care of you.”

Wendy’s advice for parents of budding gymnasts: “Make sure they have a spotter.”

And a well-coordinated team.
Mary Closner likes having the BIG PICTURE

At 50, Mary Closner faced her first colonoscopy, plus her annual mammogram. Routine screenings are an important part of every adult’s health care, but sometimes they’re intimidating.

“My doctor kept talking to me about a colonoscopy, but I put it off for two years because I was nervous. I’m a big chicken, just like everybody else,” she laughs. “Finally I just scheduled it.”

Mary wanted to get her screenings done before ankle surgery would have her off her feet for weeks.

Colonoscopy was first. “I was more afraid about the preparation,” she recalls. “I had built it up in my mind as this terrible, uncomfortable thing.”

Turns out it wasn’t so bad. General surgeon Christopher Nielsen, MD performed the procedure at Northfield Hospital’s Surgery Center. The at-home preparation was simpler than Mary expected, and the surgical team’s calm demeanor – and humor – put Mary at ease.

“It was completely painless,” she says. “Afterwards, I was sluggish and took a nap the rest of the day. I don’t know what I was so terrified about. It wasn’t that big a deal. Now I say to everybody I see, ‘Have you had this done? You need to have this done.’”

Dr. Nielsen encouraged Mary to find out her family history, a risk factor that can prompt more frequent screening (every five years). At the next family event, Mary asked her five siblings about their health. “It’s stuff you just wouldn’t normally talk about, but I purposely asked who has had a colonoscopy, or polyps,” she says. “It turned out to be an interesting conversation.”

Mary was less nervous about her mammogram, because she finds the Breast Cancer Center at Northfield Hospital & Clinics to be calm and welcoming. “Everything about it is soothing; it feels like you’re at a home,” she tells friends. “They’re the kindest people on the planet, and they have state of the art equipment, with these wonderful little foam pads they put on the machine so it’s not cold and daunting.”

Early stages of colorectal cancer often have no symptoms. You should see your doctor if you have bright red or very dark stools; a change in the diameter of your stool; persistent stomach ache, abdominal pain or cramping; unexplained weight loss; or anemia.
HEALTH SCREENING

An alternative to colonoscopy?

Everyone should start being screened for colon cancer at age 50. The most accurate screening test is colonoscopy.

If you’re over 50 and still haven’t worked up the courage for your first colonoscopy, you might want to start with Cologuard instead.

“Colonoscopy is fairly definitive, but for people who find it intimidating, Cologuard is a good starting point,” says Dr. Randolph Reister, an endoscopist and a board-certified Internal Medicine physician.

“After all, the best test is the test that gets done.”

One in 20 adults will get colorectal cancer, according to the American Cancer Society. About 50,000 people die from it every year. But only about 50% percent of adults who should have a colonoscopy get one. And more than 60% percent of Americans 50 or older haven’t had any screening for colorectal cancer.

If that’s you, here’s an alternative to get you started.

Cologuard is a kit that you use at home to collect a stool sample, then mail to the lab for testing using DNA technology to screen for cancer and precancer.

Every day the lining of the colon naturally sheds cells. If there is cancer or precancer in the colon, abnormal cells shed into the colon – along with normal cells – where they are picked up by stool as it passes through. Cologuard tests for elevated levels of altered DNA and/or hemoglobin in these abnormal cells, which could be associated with cancer or precancer.

“Cologuard is not as sensitive as colonoscopy,” Dr. Reister says. “And if the test is positive, you need to have a follow up colonoscopy.”

The advantage of colonoscopy is that polyps or lesions can be removed right away, and colonoscopy can help diagnose other problems.

In a clinical study of 10,000 patients, Cologuard found 92% of colon cancers. (The study was published in the New England Journal of Medicine in 2014, the year Cologuard debuted.) It also found 69% of high-risk precancers, cell abnormalities that are most likely to develop into cancer. However, the study showed a false-positive rate of 13%, which is high – so you may have to get a colonoscopy anyway as a follow up.

NH&C offers both Cologuard (through our Clinics) and colonoscopy (in our Surgery Center).

Cologuard is for adults 50 years or older who are at average risk for colon cancer. It’s not recommended for high-risk individuals with a personal history of colon cancer, polyps or related cancers; a family history of cancer; a positive result for another screening method in the last six months; or medical conditions that increase the risk of colon cancer.

Cologuard doesn’t require bowel preparation or time off for testing. It is only available by prescription, and must be ordered by your doctor. You can ask your primary care provider about it.

To make an appointment with our providers, call the NH&C Clinic nearest to you: Northfield – (507) 646-1494; Lonsdale – (507) 744-3245; Lakeville – (952) 469-0500; Farmington – (651) 460-2300.

Mary was surprised how many of her friends have avoided mammograms out of worry that the test will be physically and emotionally uncomfortable. “It’s so easy, and the technology is so modern. Breast cancer is such a common concern nowadays; this is a quick test that takes some worry off your mind,” she says.

Cost is another concern, as insurance deductibles rise. As a small business owner, Mary buys her own insurance, and watches costs without cutting corners. “I look at the screening tests as an investment in my health. Keeping up with my health helps maintain my quality of life. I don’t want to wait until there’s a problem,” Mary says. “You’re making an investment in your health. It’s a must.”

For many people, anxiety of the unknown makes screening tests seem scary. Once you know what to expect, it’s easier to keep the screening schedule that your doctor recommends. (For adults 50 and older, that’s typically an annual mammogram, and colonoscopy every 10 years. Talk to your provider about your own history and risk factors.)

Mary’s advice? Just do it, already. Also, advocate for yourself; tell your care provider what puts you at ease – music, chatting during the exam, a step-by-step explanation of the procedure.

What helps? Conversation. Mary talks with her two older sisters about their experiences. She encourages friends to get their own screenings, too. “There’s a lot of strength in having support from someone in your same situation and same age group,” Mary says. “Which means that I’ve been talking about my colon to people who don’t even want to hear about it anymore,” she laughs.

“There are plenty of things to worry about in the world . . . but you don’t need to worry about this.”
Want to help people feel better?

There’s one thing that every volunteer at Northfield Hospital & Clinics has in common: They help people feel better.

Beyond that, every experience is different.

There are so many ways to volunteer at Northfield Hospital that adults of all ages and interests find a role that suits their talents (and schedule).

How about you?

• Retired? The hospital is a great place to be part of the community.
• Snowbird? We’re always looking for help in the summer, when college-age volunteers are away.
• Like being with people? Lead an activity for Long Term Care residents; work in the gift shop; greet patients and visitors in the Surgery Center.
• Rather work alone? Knit baby caps for newborns; help administrative staff with office tasks.
• Tight schedule? How about evenings or weekends – we’re always open.
• Like variety? Choose as many departments as you like.
• Prefer a routine? Choose one department; you’ll work closely with a staff coordinator there.

Aren’t you feeling better already?

To learn more – or to get started – please contact Volunteer Coordinator Anne Schumann at (507) 646-1036 or schumannan@northfieldhospital.org.

Health benefits of volunteering

Helping others feels good – and it’s good for you. A national survey of 3,351 adult volunteers (with a wide range of ages and health conditions) found that:

76% say volunteering makes them feel healthier.

78% say volunteering lowers their stress levels.

94% say volunteering improves their mood.

80% feel they have control over their health.

Most say that one reason they volunteer is the belief that doing volunteer work would be good for their health. Plus, volunteers are more likely to say their health has improved over the past 12 months. They’re more likely to seek out health information; discuss their health with their doctor more frequently; and bring up information they have found in their research with their doctor. Older individuals and those who suffer from multiple chronic conditions who take on volunteering…say they feel better as a result.

SOURCE: United HealthGroup; survey conducted by Harris Interactive

Hospital introduces a new way to honor veterans

Military veterans now get special recognition at Northfield Hospital. When patients arrive in the Emergency Department, during their initial RN interview the nurse asks about their military status. Veterans and active military members get a special “Thank You” magnet posted on the white board in their room (with their permission). That gives providers and staff an opportunity to thank individuals for their service. As an additional show of respect, veterans are asked how they’d like to be addressed – by name or rank. Patients are welcome to take the magnet home.

Two veterans are behind the new program: Debra Maestri, Director of Emergency Department and Outpatient Clinics, and Emergency Department Medical Director Jennifer Fischer, MD. They were in Washington, DC for a conference, and while walking together through Arlington Cemetery, “we thought, ‘What more can we do to care for our veterans and active military?’” Dr. Fischer recalls. “We’ve always taken extra time with our veterans. This is just extra recognition.

“It doesn’t matter if you’re voluntary or drafted, an officer or enlisted – once you’re in the military, it changes you forever,” Dr. Fischer says.

“It’s a very special connection, and it lasts your whole life,” Maestri adds.
Northfield Hospice invites musicians to share

Music doesn’t have to be loud to be powerful. Just ask Richard Collman. A retired pastor and active Celtic harpist, Collman volunteers with Northfield Hospice to play music for patients as part of their end-of-life care.

He remembers getting a call on behalf of a man who was in the active stages of dying. “His family wanted music within the next 12 hours, as soon as possible,” Collman says. “So I went up and played in his bedroom, and he died shortly after that. His whole family was there; I sort of rushed in and played for 10 minutes,” a short, quiet performance that was just right to bring comfort to the patient and his family.

Music is a potent tool for those at the end of life. Music can help to ease pain, comfort caregivers, and serve as a tool for life review.

One of the most common requests from Northfield Hospice patients is someone to share music with them. Northfield Hospice typically has 15 to 25 individuals receiving care; about one quarter of them request music.

“More and more people are finding out how helpful music can be, so we’re seeing an increase in requests as people see the benefit,” says Sara Lippert, LGSW, social worker and volunteer coordinator for Northfield Hospice.

Northfield Hospice is seeking more volunteer musicians to meet that increase in requests.

Three musicians currently volunteer. Their instruments range from Collman’s Celtic harp to an accordion, a dulcimer… and a CD player.

“Some volunteers bring recorded music that they know the patient really likes – like Czech polka music, for example,” Lippert says. “You’d be surprised that people want to hear polka music. It just brings up these memories, these good times. It’s really a good tool for life review.”

If you make music, or simply like to listen, you’re invited to volunteer.

“We look for someone who has a heart for being with people at the end of life,” Lippert says. “You don’t have to be a professional; you just have to enjoy music.”

Volunteers commit to one hour per week or more. Most volunteers see one patient per week, spending 30-60 minutes in the patient’s home. Northfield Hospice offers a complete orientation process and monthly meetings for continued volunteer education and support.

And like a song sung in rounds, the benefits come back to those who volunteer.

“When I’m 92 or 95 or 105, I’d like somebody like me to come in and play harp,” Collman says. “I covet the experience for myself, that someone might do this for me.”

For more information or to schedule an interview, contact Sara Lippert at Northfield Hospice at (507) 646-1457 or lipperts@northfieldhospital.org.

“I COVET THE EXPERIENCE FOR MYSELF, THAT SOMEONE MIGHT DO THIS FOR ME.”
- RICHARD COLLMAN
Northfield, Farmington Clinics honored for diabetes and vascular disease care

NH&C’s Northfield and Farmington Clinics are being honored statewide for providing enhanced care for patients with diabetes and vascular disease.

The two clinics earned a 2016 Minnesota Bridges to Excellence Award, which recognizes improvements in patient care in clinics across the state. The program, run by the Minnesota Health Action Group, honors 276 clinics this year.

NH&C’s Northfield and Farmington clinics have spent several months revising and standardizing internal processes in order to improve patient care, especially in diabetes and vascular disease, which often occur together for a patient. Care navigator Kim Corbett works closely with the providers and staff to ensure that patients’ lab tests are kept up to date and they stay on schedule with office visits.

“These are the simple things that may otherwise be missed,” says Stacie Rice, Quality Improvement Specialist for Northfield Hospital & Clinics. “Together as a team, we recognize that it is critically important to improve these outcomes to improve our patients’ quality of life.”

Established by the Minnesota Health Action Group in 2006, the Minnesota Bridges to Excellence program uses publicly reported outcomes data to identify clinics that meet or exceed optimal care standards for a specified percentage of patients with diabetes and vascular disease.

“Clinics that receive rewards are doing an exceptional job in caring for their patients, and we applaud them for their commitment and results,” said Carolyn Pare, president and CEO of the Minnesota Health Action Group.

To make an appointment at the Northfield Clinic, call 507-646-1494. To make an appointment at the Farmington Clinic, call 651-460-2300.

Diabetes has a connection to depression

People with diabetes are more than twice as likely as others to have depression.

A study published by the National Institutes of Health found a variety of factors, including the physical impact of diabetes on immunology and endocrine pathways to the brain, plus the psychological and psychosocial impact of managing this chronic disease.

It’s an important connection to watch, because depression is associated with poor disease control, poor health, and diminished quality of life.

Depression can lead to poor lifestyle decisions, such as unhealthy eating, less exercise, smoking and weight gain – all of which are risk factors for diabetes, reports the Mayo Clinic. Depression also affects your ability to perform tasks, communicate and think clearly, which can interfere with your ability to successfully manage diabetes.

If you have diabetes, watch for signs of depression such as loss of interest in normal activities, feelings of sadness or hopelessness, and unexplained physical problems like back pain or headaches. If you think you might be depressed, seek help right away. Your doctor or diabetes educator can refer you to a mental health professional.

Diabetes? You’re not alone

The Diabetes Support Group meets on the third Tuesday of each month at 7:00 to 8:00 pm at Northfield Hospital. This free support group brings people with diabetes together to share their experiences, learn how others manage their health, and encourage each other. To learn more, contact group leaders Julie Stulz at 651-245-1705 or Kelly Gueldner at 651-214-7714.
Support Groups
Meet and share with others who understand your perspective and receive educational, social and emotional support.

Breast Cancer Support Group
Third Tuesday of each month, 5 pm: Carol Andersen, 507-646-1455

Can’t Eat Wheat Support Group for Celiac Disease and Gluten Intolerance
First Monday of every even month, 7 pm: Jody Friedow, 507-663-6071

Diabetes Support Group
Third Tuesday of each month, 7 pm: Julie Stulz, 651-245-1705; Kelly Gueldner, 651-214-7714

Grief and Loss Support Group
Katie Jacobi, 507-646-1349

New Moms’ Network
Elaine Nesbit, 507-645-5687

Parkinson’s Disease Support Group
Fourth Wednesday of each month, 2 pm: Kathy Lathrop, 507-646-1195

Traumatic Brain Injury Support Group
First Thursday of each month, 7 pm: Shelley Klevos, 612-812-1311

www.northfieldhospital.org/support-groups
Shake the Salt

Dietary guidelines recommend that adults consume no more than 2,300 mg of sodium per day – about 1 teaspoon of salt. But if you’re older than 50, or African-American, or have high blood pressure, diabetes or chronic kidney disease, you should limit sodium to 1500 mg per day – about a half teaspoon of salt.

A low-sodium (salt) diet may help prevent build up of extra water in your body. This is helpful for high blood pressure, heart failure, kidney disease or other conditions in which swelling or fluid retention can occur. Even if you take a pill for blood pressure or a water pill (diuretic) to remove fluid, it’s still important to have less salt in your diet. Here’s how:

**SEASON** your food with pepper, spices and herbs.

**EAT** fewer processed foods. Cut back on canned soup, gravy mixes, frozen dinners, salty snacks, boxed pasta (including ramen), instant-cook versions of potatoes and cereal and rice, deli meats, smoked meats, canned meat, and cheese.

**CHOOSE** fresh. Eat fresh meats like chicken, beef or turkey; eat fresh or frozen vegetables instead of canned.

**COUNT** condiments. Watch your intake of mustard, ketchup, salad dressings, sauces, meat tenderizer, pickles, olives, and any seasoning with “salt” in its name. (Choose “powder” instead – think garlic and onion.)

A lesson in healthy flavoring is part of ReShape U!, a 10-week weight loss series led by registered and licensed dietitian nutritionists at Northfield Hospital & Clinics. Classes meet in Northfield and Farmington.

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**BEANS**
- Basil
- Bay Leaf
- Caraway
- Curry
- Dill
- Dry Mustard
- Garlic
- Grape Jelly
- Green Pepper
- Mace

**CHICKEN**
- Basil
- Cloves
- Cranberries
- Mace
- Mushrooms (fresh)
- Nutmeg
- Oregano
- Paprika
- Parsley
- Pineapple
- Sage
- Saffron
- Tarragon
- Thyme
- Turmeric
- Tarragon
- Tomato

**EGGS**
- Chervil
- Curry
- Dill
- Dry Mustard
- Garlic or Garlic Powder
- Green Pepper
- Jelly
- Mushrooms (fresh)
- Nutmeg
- Onion Powder
- Paprika
- Parsley
- Rosemary
- Tarragon
- Tomato

**VEGETABLES**
- Basil
- Dill
- Garlic or Garlic Powder
- Onion Powder
- Tarragon
- Tomato
- Sugar or Sugar Substitute
- Salt-free Salad Dressing
- Vinegar

**LAMB**
- Cloves
- Curry
- Dill
- Garlic or Garlic Powder
- Mace
- Mint
- Mint Jelly

**PORK**
- Applesauce
- Basil
- Caraway
- Chives
- Cloves
- Garlic or Garlic Powder
- Onion or Onion Powder
- Rosemary
- Thyme

**FISH**
- Basil
- Bay Leaf
- Chervil
- Curry
- Dill
- Dry Mustard
- Green Pepper
- Lemon Juice
- Mace
- Marjoram
- Nutmeg

**DESSERTS**
- Allspice
- Anise
- Cinnamon
- Cloves
- Ginger
- Mace
- Nutmeg
- Vanilla Extract
- Other Extracts

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When cooking, try these options for flavoring instead of salt or seasonings that contain sodium.

Remember: A little bit of spice goes a long way! Be careful not to over-season.
Northfield Hospital recognized for excellence in patient safety

Northfield Hospital has been recognized by the Minnesota Hospital Association (MHA) for superior performance in patient safety – one of just 16 hospitals statewide lauded by MHA for excellence in preventing hospital-acquired conditions.

The recognition stems from MHA’s “Hospital Engagement Network 2.0” initiative to reduce hospital-acquired conditions and readmissions.

Northfield Hospital has excellent performance on several key prevention priorities:
- Adverse drug events
- Catheter-associated urinary tract infections
- Central-line-associated blood stream infections
- Injuries from falls and immobility
- Obstetrical adverse events (including early elective deliveries)
- Pressure ulcers
- Preventable readmissions
- Surgical site infections

Over 18 months*, hospitalized patients at Northfield Hospital have had zero pressure ulcers or falls with injuries, and zero infections in:
- Catheter-associated urinary tract infections
- Central-line associated blood stream infections
- Surgical site infections (colon surgeries)
- Surgical site infections (abdominal hysterectomy surgeries)

* (January 2015 through June 2016)

“We’re proud to have an outstanding track record on patient safety,” says Steve Underdahl, CEO of Northfield Hospital & Clinics. “Prevention is an important part of great hospital care, though it tends to be invisible to patients. We’re gratified to be recognized by MHA for this critical aspect of providing excellent care for our hospital patients.”

“The credit goes to the direct care givers who are passionate about the care they provide to our patients,” says Tammy Hayes, Chief Nurse Executive for Northfield Hospital. “These care givers make changes in their practice to improve the safety of patients, and come up with creative ideas to ensure that the care we provide is safe.” For example, a nurse in the Birth Center caring for a mom and newborn noticed that their IV lines looked so similar that it would be easy to confuse them, and give medication to the wrong patient. Now, all IV lines are marked to clearly distinguish individual patients. “That attention to detail helps us put in new processes that benefit patients every day.”

“Northfield Hospital is helping to further strengthen patient safety in Minnesota and contributing to the state’s well-deserved reputation for high-quality health care,” says Lawrence Massa, MHA president and CEO.

CEO Steve Underdahl and members of NH&C’s Patient Safety Committee unveiled MHA’s banner of recognition.

10-Week Weight Loss Series
Two opportunities beginning in January!
Sessions held in Northfield and Farmington.

Weight Loss Support Group
Meets Wednesdays at Northfield Hospital
Noon-1 p.m. or 5:30-6:30 p.m.

Nutrition Coaching
Individual 30-minute sessions.

All programs are led by a nutritionist. For information or to register, please call 507-646-1410.
Randall named “Top Doctor”

Congratulations to Dr. Greg Randall of the Lonsdale Clinic, named a “Top Doctor” by Mpls/St. Paul Magazine in its annual listing of the best doctors across Minnesota. This is a big honor – and well-deserved! To make an appointment at the Lonsdale Clinic, call 507-744-3245.

Flu shots available at all clinics

It’s a good time to prepare for flu season. Those most at risk of getting very sick from flu are people 65 and older; young children, especially under 2 years old; pregnant women; and people with chronic health conditions such as asthma, diabetes, and heart disease. All four of our clinics make it convenient and quick for you to protect yourself and those around you.

Tobacco-free, campus-wide

NH&C is completely tobacco-free as of August 1. Tobacco is no longer allowed in cars. All buildings, grounds and parking lots continue to be tobacco-free at all times. This provides a healthier environment for patients, visitors, employees and volunteers. If you’re going to be hospitalized, talk to your doctor about quitting tobacco and other alternatives.