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tag-team the Birth Center

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Sister Act

Bailey Malecha and Brittany Severson are sisters. Their babies were born three days apart. One family lives in Lonsdale; the other, in Lakeville. For both, Northfield Hospital felt like home.

READ MORE!



Brittany Severson didn't expect it to go like this



Brittany and her husband Aldon thought they'd have a few more weeks before their baby came.

But at Brittany's 37-week prenatal appointment, her blood pressure was high. "It wasn't a red flag earlier in my pregnancy, but I could tell by the look on their faces that it was high," she says.

Midwife Janelle Dahl, CNM wanted to do more tests. Brittany and Aldon were sent to the Birth Center triage room to wait for results: "We were laughing that it would be funny if we had to stay."

Then, fetal monitoring showed contractions were coming 2-7 minutes apart. "Janelle said, 'You're not leaving here without a baby,'" Brittany recalls. "My husband called his boss and said, 'I'll be out for 12 weeks.'"

Labor progressed slowly. After several hours, "they were

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Bailey Malecha thought she knew how this would go

Bailey is an experienced labor & delivery nurse.

After all, the birth of her first child, Summer, was "smooth and quick" with less than 7 hours of labor.

But every pregnancy is different. At first, Bailey wasn't sure if labor had started. It seemed like her water broke, but she wasn't feeling contractions. Bailey called the Birth Center; charge nurse Frankie Stocker, RN suggested moving around to see if contractions picked up. "We decided to go in and if we got sent home, that would be that and we'd be good with it," Bailey says.

When they arrived, contractions were 10 minutes apart. Bailey labored in the Water Birth tub; progress was slow, and her back hurt. "We wondered if the baby was positioned wonky," Bailey recalls. Certified nurse midwife Brittany Cordes, CNM discovered the baby was positioned face up,

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Severson: “Plans change”

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struggling to keep the baby’s heart rate on the monitor,” Brittany says. “She was distressed for some reason, but they couldn’t tell why.” It was time to consider a cesarean section.

“We had a birth plan, but being in the hospital at 37 weeks wasn’t part of it. So the plan was already out the window,” she says. A c-section in the Birth Center’s dedicated operating suite became the new plan. Brittany’s sister Bailey – a nurse at NH+C, and expecting her own baby within days – stayed with Aldon while Brittany was prepped for surgery.

Midwives had cared for Brittany throughout her pregnancy; OB/GYN specialist Ngoc Vu, MD stepped in to perform the c-section. “I trusted her completely,” Brittany says. “I was confident in shifting my care to someone we had never met because I trusted the professionals around us. I knew my baby would be okay, and if she wasn’t, there were people there to help her.”

When Charlie was born, “she was purple and limp. She needed to be resuscitated,” Brittany says. The team worked fast: They helped Charlie breathe before she took her first breath, then x-rayed her lungs to check for fluid. “It was about 10 minutes until we heard her cry,” Brittany says. “That was when I knew she was okay.”

“I hadn’t realized until she started crying that she hadn’t been crying,” she adds. **“It was a relief to know there was such a good team taking care of her.”**

Charlie recovered well. She had low blood sugar, so the team monitored that (and her temperature) for 24 hours. Then the new family went home.

“Trust the team to make sure everything goes OK, even if it’s not your original plan.”

Brittany Severson, Lakeville

“When we left, it was the most emotional thing ever,” Brittany recalls. “Our nurses made us feel so cared for – almost like you had your aunt in the room with you.”

Pediatrician Amy Kraushaar, DO cared for Charlie from the beginning. “She did such a great job explaining everything to us,” Brittany says.

Charlie was diagnosed with congenital cytomegalovirus (CMV), a virus that can cause hearing loss or other health problems. (Most babies with congenital CMV never develop any health problems.) Minnesota is one of the first states to include CMV testing as part of newborn screening.

“Dr. Kraushaar dove in, calling the Minnesota Department of Health and other resources to make sure we get our questions answered,” Brittany says. Charlie has passed all her hearing tests, and “she’s doing great.”

Brittany and Aldon live in Lakeville. “When we were choosing where to deliver, I felt that we had to go to Northfield,” she says. “It just felt like home. It’s so special to have familiar people caring for you. It feels like having someone in your corner.”

Her advice for handling an unexpected twist during pregnancy: “Plan not to stick to your plan. Trust the team to make sure everything goes OK, even if it’s not your original plan.”

Malecha: “Trust your gut”

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with his head pressing against Bailey’s spine instead of her cervix, causing back pain and stalling dilation – a double whammy.

After 10 hours of back labor, Bailey decided to get an epidural. “I was suffering, and I didn’t want that to be my birth experience, looking back on it later,” she says.

Four hours later, Beckham was born. But he wasn’t breathing.

Pediatrician Amy Kraushaar, DO and the care team used positive pressure ventilation to help Beckham breathe before he took his first breath on his own. Then Bailey held him close, skin-to-skin. Beckham went home the next day.

But he struggled with breathing, and eating. Beckham needed

intensive care. At Fairview Ridges’ NICU, Beckham was diagnosed with pneumonia and laryngeal malacia, with weak muscles around larynx that cause noisy breathing and also affect swallowing. It’s a common condition that babies usually outgrow by 12-18 months. Within weeks, Beckham had already “gotten much better,” Bailey says.

Beckham is thriving now, and big sister Summer “wants to hold and kiss him all the time,” Bailey smiles.

As a labor & delivery nurse herself, “it’s fantastic to understand what’s going on when things are going great,” Bailey says. “But in scary situations like Beckham not breathing, it’s even scarier because you know what could go wrong.” Her husband Conner doesn’t work

in healthcare, so Bailey asked the Birth Center team “to treat us like regular patients so Conner felt confident and comfortable with the decisions we were making too. **Everyone was super accommodating, comforting and calming.**”

Bailey’s advice if you’re not sure whether you’re in labor: “Trust your gut. If you go in and end up being sent home because you’re not in labor, there’s nothing wrong with that. And trust the care team. The Birth Center providers and staff know what they’re doing; you and your baby are their priority, and they want to give you all the information you need to make decisions for yourself and your baby.”

Whatever happens.

PREECLAMPSIA: HEALTH RISKS TO MOM AND BABY

Preeclampsia is a serious medical problem that can happen during and after pregnancy. It usually occurs after 20 weeks of pregnancy, but it can also occur after childbirth.

Preeclampsia causes high blood pressure and can affect the kidneys, liver, lungs, blood, brain. Some people with preeclampsia have symptoms, but most do not.

Preeclampsia can affect how the fetus grows and develops. Depending on the severity, people with preeclampsia may have a preterm birth.

Some people have an increased risk of preeclampsia.

Risk factors include having preeclampsia in the past, being older than age 35, having certain medical conditions, obesity, and being pregnant with more than one baby.

Treatment for preeclampsia is delivery of the baby. In some cases, delivery can be delayed to allow the fetus to continue to grow. In other cases, delivery must occur right away.

Source: Society for Maternal-Fetal Medicine



Eat healthy to prevent (or manage) Type 2 diabetes

by Courtney Eby, RDN, LD

About 35 million Americans have Type 2 diabetes . . . and 1 in 3 Americans have pre-diabetes.

Type 2 diabetes most often develops in people 45 or older, but more children, teens and young adults are also developing it, reports the CDC.

The good news: Lifestyle changes can cut your risk of developing Type 2 diabetes in half. Nutrition is key. It also helps manage Type 2 diabetes if you already have it.

Eating well can help your body:

- Keep blood sugar (glucose) levels steady
- Maintain a healthy weight

- Prevent or delay complications of diabetes like heart disease, nerve and kidney damage

You don't have to follow a strict diet, or give up certain foods. Instead, focus on what, when, and how much to eat.

Choose foods rich in vitamins, minerals, fiber and other nutrients.

Eat three meals throughout the day. This gives you steady energy, helps even out blood sugar levels, and keeps you from getting so hungry you overeat at the next meal.

Set portions to get the appropriate amounts of different foods – a balance of lean protein, fiber-rich carbohydrates, and healthy fats and oils.

Eat as long as you're hungry. Stop eating when you're satisfied (that's different from being "full").

Part of a balanced lifestyle

Some risk factors for diabetes can't be controlled, like age, family history, and ethnicity. Two risk factors that can be controlled are weight and physical activity. It's another reason that nutrition and exercise are cornerstones to maintaining your best health. Also:

Stay active to help your body use insulin more efficiently. Exercise 30 minutes most days.

Check your blood sugar regularly. (Is it high after a meal? Take a walk to help bring it down.)

Manage stress. Skip comfort food, the couch, social media – they make stress worse. Instead, take a walk, breathe deeply, listen to music, find a reason to laugh.

Your provider can refer you to a registered dietitian nutritionist to provide one-on-one education and support with diet, physical activity and blood sugar monitoring to manage your blood sugar, weight, and overall health as part of your diabetes care.

You can ask your provider for a referral. Our dietitian nutritionists will call you to talk through your goals, then set an appointment schedule – every 2-4 weeks works well to begin.

Courtney Eby, RDN, LD works with clinic patients through an individualized approach. Each patient has a unique lifestyle, and Courtney helps them change habits according to their level of readiness.

NH+C NUTRITION EXPERTS

Our registered dietitian nutritionists work with your provider to manage your nutrition for your health.

Kristi Von Ruden, RDN, LD

"I strive to meet people where they are at, with the goal of doable, lasting, lifestyle changes."



Courtney Eby, RDN, LD

"I believe healthy eating should be enjoyable, nourishing and full of variety to promote increased energy and improved health."



Nicole Robinson, MS, RDN, LD

"Becoming a healthier version of yourself should be enjoyable and simple with small, yet impactful changes that can easily be maintained."



RIGHT FOODS. RIGHT AMOUNTS.

An easy way to eat the right foods, at the right amount. Start with a 9-inch plate:

1. Fill 1/2 of the plate with colorful, non-starchy vegetables (about 1 cup raw or 1/2 cup cooked) – salad greens, broccoli, asparagus, tomatoes, cucumbers, peppers
2. Fill 1/4 of the plate with whole grains like brown rice or quinoa, starchy vegetables, or beans and lentils. (Beans and lentils have starch and protein, plus fiber.)
3. Fill 1/4 of the plate with protein (about 3 oz., same size as a deck of cards) – lean meat, fish, eggs, cheese, beans.
4. On the side, add 1/2-1 cup fruit and some calcium: 1 cup low-fat milk or 1/2 cup low-fat yogurt.



- ✓ Choose water, low-fat milk and sugar-free beverages to drink.
- ✓ Cook with healthy fats – olive, canola, safflower, sunflower, peanut oils.
- ✓ Avoid added sugar and processed foods.

Source: American Diabetes Association



Comer sano con la diabetes

Por Courtney Eby, RDN, LD

Alrededor de 35 millones de estadounidenses tienen diabetes tipo 2...y 1 de cada 3 estadounidenses tiene prediabetes.

La diabetes tipo 2 se desarrolla con mayor frecuencia en personas de 45 años o más, pero cada vez más niños, adolescentes y adultos jóvenes también la están desarrollando, informan los Centros para el Control y la Prevención de Enfermedades (Centers for Disease Control and Prevention, CDC).

La buena noticia: los cambios como la nutrición en el estilo de vida pueden reducir el riesgo de desarrollar diabetes tipo 2 a la mitad. La nutrición también es una herramienta clave para controlar la diabetes tipo 2 si ya la padece.

Comer bien puede ayudar al organismo a:

- Mantener estables los niveles de azúcar (glucosa) en sangre
- Mantener un peso saludable
- Prevenir o retrasar las complicaciones de la diabetes, como las enfermedades del corazón y las lesiones nerviosas y renales

No es necesario seguir una dieta estricta ni renunciar a determinados alimentos. En su lugar, concéntrese en qué, cuándo y cuánto comer.

Elija alimentos ricos en vitaminas, minerales, fibra y otros nutrientes.

Coma tres comidas durante el día. Esto le proporciona energía constante, ayuda a equilibrar los niveles de azúcar en sangre y evita que tenga tanta

hambre que coma en exceso en la siguiente comida.

Establezca raciones para obtener las cantidades adecuadas de los distintos alimentos – un equilibrio entre proteínas magras, carbohidratos ricos en fibra y grasas y aceites saludables.

Coma mientras tenga hambre. Deje de comer cuando esté satisfecho (que no es lo mismo que estar “lleno”).

Parte de un estilo de vida equilibrado

Algunos factores de riesgo de la diabetes no pueden controlarse, como la edad, los antecedentes familiares y el origen étnico. Dos factores de riesgo que sí pueden controlarse son el peso y la actividad física. Es otra razones por la que la nutrición y el ejercicio son piedras angulares para mantener una mejor salud. También:

Manteniéndos activo para ayudar al organismo a utilizar la insulina de forma más eficaz. Intente realizar 30 minutos de actividad física casi todos los días de la semana.

Midiendo su nivel de azúcar en sangre regularmente. Un consejo: si es alto después de una comida, caminar puede ayudar a bajarlo.

Controlando el estrés. No comidas reconfortantes, acurrucarse en el sofá, ver las redes sociales – en realidad lo empeoran. En su lugar, intente dar un paseo, respirar hondo, escuchar música y encontrar oportunidades para reír y divertirse..

Su proveedor de atención médica puede remitirlo a un nutricionista dietista registrado para que le ofrezca formación personalizada y lo ayude con la dieta, la actividad física y el monitoreo de la glucemia para controlar el azúcar en la sangre, el peso y la salud en general como parte del tratamiento de la diabetes.

Puede pedir a su proveedor médico que lo remita a un especialista. Nuestros nutricionistas dietistas

lo llamarán para hablar de sus metas y luego establecerán un calendario de citas: cada 2 a 4 semanas funciona bien para empezar.

Courtney Eby, RDN, LD trabaja con los pacientes de la clínica a través de un enfoque individualizado. Cada paciente tiene un estilo de vida único, y Courtney los ayuda a cambiar los hábitos de acuerdo con su nivel de preparación.

NH+C EXPERTOS EN NUTRICIÓN

Nuestros nutricionistas dietistas registrados trabajan con su proveedor médico para mejorar su nutrición y su salud.

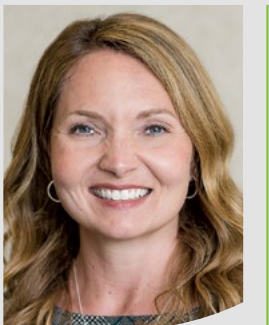
Kristi Von Ruden, RDN, LD

“Me esfuerzo por conocer a las personas donde se encuentran, con el objetivo de lograr cambios factibles y duraderos en su estilo de vida”.



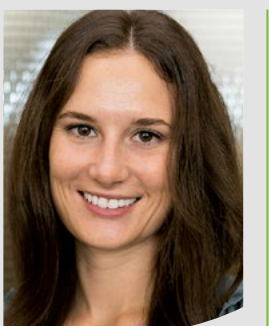
Courtney Eby, RDN, LD

“Creo que la alimentación saludable debe ser agradable, nutritiva y llena de variedad para promover el aumento de la energía y mejora la salud”.



Nicole Robinson, MS, RDN, LD

“Convertirse en una versión más saludable de uno mismo debería ser agradable y sencillo, con cambios pequeños pero impactantes que se puedan mantener fácilmente”.



PLATO PARA DIABÉTICOS

Una forma fácil de comer los alimentos adecuados, en la cantidad adecuada. Comience con un plato de 9 pulgadas:

1. Llene la mitad del plato con una variedad de verduras sin almidón (aproximadamente 1 taza cruda o ½ taza cocida): ensaladas verdes, brócoli, espárragos, tomates, pepinos, pimientos.
2. Llene un 1/4 del plato con cereales integrales como arroz integral o quinoa, verduras con almidón o frijoles y lentejas (los frijoles y las lentejas tienen almidón y proteínas, además de fibra).
3. Llene 1/4 del plato con proteínas (unas 3 onzas, del mismo tamaño que una baraja de cartas): carne magra, pescado, huevos, queso, frijoles.
4. Al lado, añada de ½ a 1 taza de fruta y algo de calcio: 1 taza de leche descremada o ½ taza de yogur descremado.



Fuente: Asociación Estadounidense de Diabetes

- ✓ Para beber, elija agua, leche descremada y bebidas sin azúcar.
- ✓ Cocine con grasas saludables: aceites de oliva, canola, cártamo, girasol y cacahuete.
- ✓ Evite el azúcar añadido y los alimentos procesados.



Kenny Stuckmayer needed a tune up

Kenny is a classic car buff. While working on his '71 Corvette, Kenny injured his shoulder.

He went to the Emergency Department, where Kenny was referred to orthopedic surgeon Greg Erickson, MD for further evaluation and treatment.

An MRI of Kenny's shoulder confirmed it: His rotator cuff was torn. Dr. Erickson recommended surgery.

"No one wants to have surgery, but I wouldn't get back to normal on my own" without it, Kenny says. At least he could have surgery close to home: "It's right here in my backyard, so I didn't have to travel anywhere."

Dr. Erickson performed arthroscopic surgery to repair Kenny's torn rotator cuff tendon. Kenny's shoulder also had bone spurs and bursitis, a painful inflammation of the fluid-filled sacs that reduce friction between tissues. Dr. Erickson tended to those too during Kenny's surgery.

"It felt like it went quick," recalls Kenny, who went home the same day. Wrapping his shoulder in a cryocuff ice pack sling for several days helped reduce swelling and pain. At his follow-up appointment a week later, "they were happy with how everything was healing, and how I looked and felt. **They said I could get back to 100%, and that was my goal.**"

Dr. Erickson "has a good bedside manner," Kenny says. "He explained to me how things work, and he's happy with where I'm at."

Kenny had physical therapy with Patrick Morrissey, DPT at NH+C's Rehabilitation Services in Northfield. "He was excellent," Kenny says. "He explained why we needed to do all of the exercises, and I did them every day. He knew I was busting my butt to get better."

Kenny did PT for five months . . . and continued on his own for another two months.

It worked. "I'm 99.9% mobile again," Kenny says. "I'm pretty much back in the game. I've got my range of motion back, and I'm working on rebuilding strength."

That car? Kenny got back to working on it about three months after surgery.

"I feel fortunate," Kenny says. "I was laid up for at least two months. That was hard on me. I'm a pretty active guy, and all the sudden I'm sitting around doing nothing for two months. That took a toll.

"At my age, if you can't get back to normal, you'd be going downhill really fast," he adds. "You've got to get back into it."

His advice for others who get injured? "Patience is key. Patience and diligence. I set up a regimen and followed it, and it all worked out the way it's supposed to."

Now he's back in gear.



Greg Erickson, MD

 **Learn more:** northfieldhospital.org/orthopedics

"I'm pretty much back in the game. I've got my range of motion back, and I'm working on rebuilding strength."

Kenny Stuckmayer, Northfield





Foundation gifts begin...thanks to donors

It started with digital thermometers and a snack cart.

Northfield Hospital Foundation has given its first-ever gifts to extend care and comfort for hospital patients. The Foundation is funded through generous donations from community members.

Care items improve patients' experience in the Cancer Care & Infusion Center, Birth Center, and Medical/Surgical floor – where people feel most vulnerable, where even small gestures have a big impact.

Over the past year, the Foundation has provided:

- **Digital thermometers** for cancer patients to take home to check for signs of an infection.
- **Concierge cart** filled with snacks and games for hospital patients and their families to be more

comfortable while recovering from surgery or illness.

- **Blood pressure monitors** for expectant and new moms to monitor their blood pressure at home, on alert for signs of high blood pressure or preeclampsia. BP monitors typically aren't covered by insurance. Cuffs come in different sizes to fit well, and patients are taught how to take their blood pressure accurately.
- **An Emergency Fund** that helps patients in crisis with transportation, food and clothing. Situations range from ED patients who need new clothes and shoes after a car accident, to cancer patients who need transportation so they don't miss chemotherapy appointments.

The Foundation also helped fund **advanced oncology nurses' training** to bring the latest cancer treatments to NH+C patients.

These simple gifts fill in the gaps, extend patient care, and provide comfort. Without Foundation funding, they wouldn't happen.

Patients, families, providers and staff are grateful. "The training I received at the Oncology Nursing Society National Congress will help ensure the continued quality of care we provide for our patients," says Cancer Care Navigator Juliana Sayner, MA, BSN, OCN.

"It's wonderful to have the concierge cart up and running again!" says Community Engagement Coordinator Anne Schumann. "It's such a wonderful

way for volunteers to interact with patients and families while also offering them some much-needed comforts."

While healthcare is mostly funded through insurance and other sources, some needs aren't covered. The Foundation helps Northfield Hospital go beyond, providing exceptional care for those touched by emergencies, illness, childbirth, and end of life.

As an independent organization, Northfield Hospital counts on the Foundation's financial support to enhance the personalized care it provides. NH+C is city-owned, but it is not city-funded: All Northfield Hospital funds come from the services that NH+C provides.

"Giving to the Hospital Foundation gives each of us a way to support the jewel that we have in our own backyard," says Robert Morrison, Foundation board member.

The Foundation will keep turning gifts from donors into gifts that touch patients and their families.

What will your donation become?

DONATE TODAY

100% of your tax-deductible gift goes directly to help patients and their families.



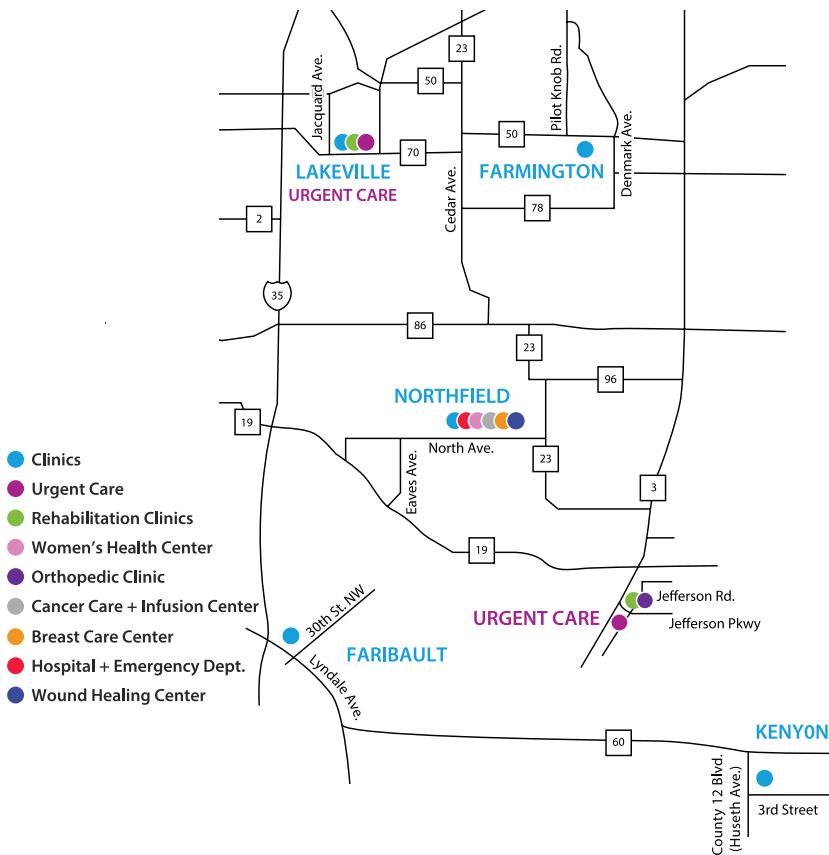
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2000 North Ave., Northfield MN 55057



2000 North Avenue
Northfield, MN 55057

Clinics, Hospital + Specialty Care close to you



Hospital + Emergency

Northfield Hospital + Emergency

2000 North Avenue, Tel: 507-646-1000

Clinics + Urgent Care

Faribault Clinic

1980 30th St. NW (at Lyndale Ave.), Tel: 507-334-1601

Farmington Clinic

4645 Knutsen Drive, Tel: 651-460-2300

Kenyon Clinic

225 Huseth Street, Tel: 507-623-0123

Lakeville Clinic + URGENT CARE

9974 214th Street W., Tel: 952-469-0500

Northfield Clinic

2000 North Avenue, Tel: 507-646-1494

URGENT CARE Northfield

2014 Jefferson Road (Hwy 3), Tel: 507-646-6700

Specialty care available at multiple clinic locations

Schedule appointments online!

Family Medicine, Internal Medicine, Pediatrics

- Start at northfieldhospital.org or scan this QR code:
- Choose a time that fits your schedule
- Receive instant confirmation and reminders
- Your information is secure and private



Specialty Care

Breast Care Center – Northfield
2000 North Avenue, Tel: 507-646-1143

Cancer Care & Infusion Center – Northfield
2000 North Avenue, Tel: 507-646-6979

Endoscopy – Northfield
2000 North Avenue, Tel: 507-646-1201

Orthopedics Clinic – Northfield
1381 Jefferson Road, Tel: 507-646-8900

Rehabilitation Clinics
Northfield: 1381 Jefferson Road
Tel: 507-646-8800
Lakeville: 9913 – 214th Street West
Tel: 952-985-2020

Sleep Center – Northfield
2000 North Avenue, Tel: 507-646-1099

Women's Health Center – Northfield
2000 North Avenue, Tel: 507-646-1478

Wound Healing Center – Northfield
2000 North Avenue, Tel: 507-646-6900



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