EMILY’S STORY: Why we’re so glad we chose Mercy page 2

Take a hike for your body and mind page 5

Pictured: The Maiers family at Dubuque Arboretum and Botanical Gardens
I started my career working as a nurse in the operating rooms about 30 years ago. I was quickly drawn into this intriguing clinical environment, invigorated by the skills of talented surgeons; the teamwork and dedication of the staff; the complex technology in the OR suites; and the special advocacy and care for the patient, who is fully dependent on us during the surgical procedure.

Of course, time flies, and the changes that have occurred in surgery since I was an OR nurse are quite remarkable. Many of the techniques that were the standard in 1985 have been replaced by evidence-based improvements that are frequently less invasive and significantly higher tech. Laparoscopic and robotic surgeries are performed when possible to shorten recovery times and reduce risks. Surgical equipment is more sophisticated, and patient safety is enhanced by steps like those learned from the aviation industry, including time-outs prior to incision to make sure everyone understands the plan and is on the same page.

Mercy is constantly updating equipment and facilities to ensure our surgeons and staff have the best tools so that our patients have the best outcomes. While you may not see the construction from outside the building, rest assured there is a lot going on inside. In fact, for the past three years, we have been renovating each of our OR suites so they are fully state-of-the-art and second-to-none. The remodeling of our 10 operating rooms (including one specifically set up for cardiac surgery) and two endoscopic procedure suites, designed with extensive input from our physicians and colleagues, will be fully completed in the summer of 2017 at a projected total cost of approximately $13 million.

Technology is also pervasive outside of the OR, and we are excited that patients at Mercy will now benefit from a new patient interactive system called the GetWell Network, the first of its kind in Dubuque and in the region. Where the awesome technology you experience in the OR is not always visible to you, you will personally interface with the GetWell Network on the television in your room throughout your hospital stay. It includes a large library of programming to support your educational needs, available to you on-demand while a patient at Mercy, and again for reinforcement when you are feeling better at home. You can request services, such as those from housekeeping, pharmacy and spiritual care; view information to better understand your medications; and watch the latest movie releases to help you pass the time during your hospitalization. The GetWell Network will help us to help you be better informed and a more active member of your own care team.

Mercy has long been recognized as the leader in providing technologically advanced, patient-centered care. Whether it is technology you can see and interact with, such as the GetWell Network, or enhancements going on behind the scenes, like in our OR, you can be confident that you and our care team will be best equipped to receive and deliver excellent care, today and well into the future.
healthy STRONG BONES

Our bones become thinner as we age, but we can take steps to minimize bone loss.

» Eat calcium-rich foods, such as low-fat dairy, salmon, almonds, broccoli, and spinach. If you find it difficult to get enough calcium from your diet, ask your doctor about a calcium supplement. Vitamin D is also needed for strong bones. See the chart to find out how much calcium and Vitamin D you need each day.

» Include exercise in your daily routine, particularly weight-bearing exercise, such as walking, jogging, lifting weights, dancing, basketball, tennis, or climbing stairs.

» Too much caffeine can prevent the body from absorbing calcium. Keep the caffeine to two cups or less a day.

» Yet another reason to quit smoking: tobacco use is associated with loss of bone mineral density.

DID YOU KNOW?
Our bodies stop building bone around age 30.

recommended CALCIUM AND VITAMIN D INTAKES

<table>
<thead>
<tr>
<th>Life-stage group</th>
<th>Calcium mg/day</th>
<th>Vitamin D IU/day</th>
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</thead>
<tbody>
<tr>
<td>Infants 0 to 6 months</td>
<td>200</td>
<td>400</td>
</tr>
<tr>
<td>Infants 6 to 12 months</td>
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<tr>
<td>1 to 3 years old</td>
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<tr>
<td>4 to 8 years old</td>
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<tr>
<td>9 to 13 years old</td>
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<td>14 to 18 years old</td>
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<td>19 to 30 years old</td>
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<tr>
<td>31 to 50 years old</td>
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<tr>
<td>51- to 70-year-old males</td>
<td>1,000</td>
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<tr>
<td>51- to 70-year-old females</td>
<td>1,200</td>
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<td>&gt;70 years old</td>
<td>1,200</td>
<td>800</td>
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<tr>
<td>14 to 18 years old, pregnant/lactating</td>
<td>1,300</td>
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<td>19 to 50 years old, pregnant/lactating</td>
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Definitions: mg = milligrams; IU = International Units

After having a C-section with her first baby, Emily Kress was hoping for a vaginal delivery with her second in April 2015. Her obstetrician determined she was an appropriate candidate, and there wasn’t any reason not to try for a vaginal delivery. But when baby wasn’t descending during labor and began having trouble with his heart rate, Dr. Lisa Kramer, Medical Associates obstetrician, recommended that another C-section was the best option for everyone’s safety.

Emily delivered a healthy baby boy, Owen.

“They brought me into the post-op room and they were doing all the vitals there,” Emily recalls. She was enjoying her first moments with her new son and feeding him.

But the nurse noticed that Emily turned very pale, and her vital signs shifted from baseline.

“I remember my nurse asking if I felt okay.”

At that same moment, birth center nurse Melissa Weaver, who was just beginning her shift, entered Emily’s room and assessed her, as well. She saw that Emily’s pulse was very elevated.

“In this situation, the first instinct is to check the abdominal dressing for bleeding and also check the fundus. The fundal assessment was abnormal so I began to do fundal massage,” explains Melissa. Fundal massage is a gentle massage of the uterus to generate contractions, express clots, and limit postpartum hemorrhage.

“All of a sudden, tons of blood came out. It was so scary,” recalls Emily. She was experiencing a massive postpartum hemorrhage. Melissa called for help immediately.

“A postpartum hemorrhage is a major medical emergency,” explains Dr. Trupti Mehta, Medical Associates obstetrician. “If you don’t have a team there right away, you may lose mom. That can happen so fast. It has to be acted upon right away.”

The team attempted multiple interventions to stop the hemorrhage.

“I was worried for her life,” Melissa expresses. “I’ll never forget how hard Dr. Mehta and Dr. Kramer worked to get the hemorrhaging to stop.”

The interventions weren’t working. Emily continued to bleed. The last resort was to perform a hysterectomy, and Emily was rushed to the OR for surgery.

“We tried to save her uterus, but saving mom’s life was the most important thing,” explains Dr. Mehta.

Following surgery, Emily was in critical condition and transported to the intensive care unit, where a large, multidisciplinary team continued to care for her.

During that time, birth center staff arranged for Owen to visit Emily in the ICU, so that they could have skin-to-skin contact.

“We had our camera there, and I’m so thankful that the nurse stepped in and started taking pictures. I wouldn’t remember any of it if she hadn’t taken those pictures.”

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After 24 – 48 hours, Emily’s condition began improving. She spent three days in ICU before returning to the birth center. Due to the massive amount of blood she lost, Emily received 12 units of blood throughout the duration of her stay.

Her memories are understandably foggy, but she recalls all the nurses and physicians coming to check on her.

“I remember when I was in ICU, Dr. Kramer came in on her day off, ran into my room and said, ‘I’ve never been so happy to see pink in someone’s cheeks.’ It was those conversations with everyone that made me realize how severe the situation was and how fortunate I am.”

Emily returned home with her new baby, but unbelievably, experienced another hemorrhage two weeks later. She was rushed by ambulance to Mercy’s ER. Dr. Kramer was the obstetrician on call that night.

What matters is the type of care you receive and what type of care is available to you just in case you may need it. And for me, everyone was there for me and my family. We are so glad we chose Mercy.”

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They did a CT scan and found that Emily’s left uterine artery was having a pseudoaneurysm.

“I felt she would be safer undergoing an embolization procedure rather than going through another open surgery,” Dr. Kramer explains. “I was amazed by Emily’s strength and the support of her family during this very scary time.”

Emily was airlifted to Iowa City.

“I was terrified to get down there. I just kept thinking about Dr. Mehta telling me to stay positive. When I arrived, the teams of doctors came in and flooded the room, introducing themselves and telling me what they were going to do. The OB team came in and said Dr. Kramer and Dr. Mehta submitted such detailed notes that they felt like they were in the operating room with them. I was put at ease almost immediately since they knew everything that happened before.”

The team at University of Iowa Hospitals and Clinics put an embolization coil on her left uterine artery to stop the bleeding. She spent four nights in Iowa City before returning home again.

Emily’s recovery was long and challenging.

“I reflect on where I was then and where I am today. We’ve come a long way in the last year. After many follow-up visits with the Dubuque OB team and the Iowa City OB and neurology teams, Troy and I realized just how sensitive the body is, and just how dangerous pregnancy can be to a woman’s body. We realized how important it is to choose the right hospital with the right care, the right medical connections, and the right training and technology. At the end of the day it doesn’t matter how fancy the birthing suite is. What matters is the type of care you receive and what type of care is available to you just in case you may need it. And for me, everyone was there for me and my family. We are so glad we chose Mercy.”

Emily and her family often visit the doctors and nurses who cared for them.

“My days are unbelievably brightened when Emily, Troy, and the kids come to visit me,” Dr. Kramer says. “I have their picture on my desk to remind me how precious life is.”

HEMORRHAGE DRILLS

Mercy staff routinely conducts obstetric hemorrhage simulations to prepare for this high-risk OB event. Simulation participants include the OB team, respiratory therapy, ICU staff, obstetricians, and laboratory personnel. Drills are conducted to examine the readiness, recognition, and response to the hemorrhage situation so that there is a coordinated and efficient response when the event occurs.

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A VAGINAL DELIVERY AFTER C-SECTION

Having a vaginal birth after a cesarean (VBAC) is a possibility, but your obstetrician will determine if you are an appropriate candidate. At Mercy, when a VBAC is attempted, there is always an obstetrician, anesthesiologist, and surgical team in house in the event a C-section is needed.

The Right Hospital

It’s important to choose the right hospital for your care.

DID YOU KNOW:

» All Mercy labor RNs are NCC certified in electronic fetal monitoring and all are ACLS (Advanced Cardiac Lifesaving) providers.

» All Mercy NICU and labor RNs are NRP (Neonatal Resuscitation Program) providers.

» All Mercy pediatric RNs are PALS (Pediatric Advanced Life Saving) providers.
Q&A

Q: What can I do to prevent falls?

Falls are a major concern in health care and have a high prevalence among adults aged 65 and older. Many factors can contribute to falling, including weakness, poor balance, medications, vision, and environmental hazards.

Tricia Gantz, OTD, OTR/L, and Anne Kruse, DPT, are presenting a series of seven weekly sessions at Mercy called Stepping On. Participants of the program will learn and practice exercises to help improve their strength and balance while working with the physical therapist. Participants will also meet with guest experts to discuss and learn about ways to prevent falls as they relate to medications, vision, and safety in their environment.

TRICIA GANTZ, ANNE KRUSE, DPT

MERCY’S NEW FRONT LOBBY

The first phase of Mercy’s front entrance project is complete, and patients and visitors are enjoying the changes. Outside, the parking area has been reconfigured for better traffic flow and pedestrian safety. Patients and visitors are also appreciating the covered drive-up area for dropping off and picking up. Inside, natural light and rich textures create a welcoming environment.

(Below) The new media center in the lobby features an interactive screen, which visitors can use to select various options. Get directions, find the location of meetings and events, view Mercy’s recent awards, see a list of donors, and more.

(Bottom) The new heritage wall details Mercy’s rich history, beginning with Sr. Catherine McAuley in Ireland, and highlights several photos from throughout the years. To the left of the heritage wall is a donor feature that recognizes friends and colleagues who generously donated to the front entrance project.

MERCY GIFT SHOP

Shop gifts and home decor at the Mercy Gift Shop. All proceeds support programs and services for children in Mercy’s care. mercydubuque.com/gifts

Monday, Thursday, and Friday: 10 a.m. – 5 p.m.
Tuesday and Wednesday: 10 a.m. – 7 p.m.
Saturday: 10 a.m. – 3 p.m.
TAKE A hike!

Ready to enjoy some time outdoors? Grab your family or friends and explore the trails at these beautiful, local areas (some parks have fees):

- Backbone State Park — Dundee, IA
- Bailey’s Ford Park — Manchester, IA
- Bellevue State Park — Bellevue, IA
- Dubuque Arboretum and Botanical Gardens — Dubuque, IA
- Effigy Mounds — Harpers Ferry, IA
- Four Mounds — Dubuque, IA
- Galena River Trail — Galena, IL
- Governor Dodge State Park — Dodgeville, WI
- Heritage Trail — Dubuque – Dyersville, IA
- Maquoketa Caves State Park — Maquoketa, IA
- Mines of Spain Recreation Area — Dubuque, IA
- New Wine Park — New Vienna, IA
- Pikes Peak State Park — McGregor, IA
- Platte Mound “M” — Platteville, WI
- Swiss Valley Nature Preserve — Dubuque, IA
- Whitewater Canyon Wildlife Area — Bernard, IA

On the Cover

The Maiers family (left to right – Marty, Tanya, Tate, and Tanner) can be found enjoying the great outdoors at the Arboretum several times a week.

“We moved into the neighborhood next to the Arboretum two years ago. We use the grounds multiple times a week for walking, hiking, and playground time. It keeps us healthy and active and will benefit us well into our years. There are miles of walking trails behind the Arboretum gardens that we use year-round, and also walk the garden grounds themselves. The scenery and gardens are beautiful, which only adds to the enjoyment!”

— Tanya Maiers

SUMMER SUCCOTASH

MAKES 4 SERVINGS

INGREDIENTS

- 2 tablespoons extra virgin olive oil, divided
- 1 tablespoon butter
- ½ small Vidalia onion, chopped
- ½ red pepper, chopped
- ¾ cup shelled edamame (can be frozen)
- 1 small yellow squash, chopped
- 2 cups sweet corn kernels (frozen)
- 2 teaspoons garlic, minced
- 2 tablespoons white wine vinegar
- ¼ cup packed fresh basil, chopped
- Salt and pepper to taste

INSTRUCTIONS

1 - Turn heat to medium and add 1 tablespoon butter and 1 tablespoon extra virgin olive oil to the pan. Add onion and peppers, season lightly with salt and pepper, then sauté for 3 minutes.

2 - Turn heat up to medium-high then add remaining tablespoon of olive oil, yellow squash, sweet corn kernels, shelled edamame and season lightly with salt and pepper, and then sauté for another 3 minutes, or until vegetables are crisp tender.

3 - Add garlic then sauté for 1 minute.

4 - Add white wine vinegar then sauté until absorbed, 1 minute.

5 - Remove skillet from heat then stir in fresh basil.
SUMMER SUCCOTASH

The options are endless with summer succotash! Place on top of grilled chicken, fish, a bed of fresh greens, or simply enjoy it on its own. Traditional succotash recipes often call for lima beans. Instead, edamame provide a beautiful pop of green and many nutritional benefits. Edamame have much of the same nutritional benefits as other soy products such as tofu or soy milk and are high in both protein and fiber. Enjoy this versatile, simple-to-prepare, and nutritious dish at your next grill-out with family and friends!

— Stacy Barton, RD, LD

NUTRITIONAL INFORMATION:
188 calories, 2.8g saturated fat, 99mg sodium, 21g carbohydrates, 2.1g fiber, 3.4g protein