

## LVHN Daily Will Launch July 9

**LVHN Daily, an everyday source for LVHN news online, is coming to LVH-Schuylkill on July 9.**

The website is currently available to colleagues who work in the Lehigh Valley and Hazleton. On July 9, we'll take an important step forward by making LVHN Daily – and the news in every region – accessible to colleagues throughout LVHN. It's another move in the process to fully integrate our health network.

LVHN Daily will contain the news and information you need and so much more. You'll be able to watch videos and see more photos of colleagues. You'll also be able to comment on stories, and submit stories, photos and videos of your own that show



why you are #LVHNProud. LVHN Daily also makes it easy to find LVHN information on our social media sites so you can share it with people in your social network. Remember to use #LVHNProud.

You will access the website by clicking the LVHN Daily icon on the intranet home page. After it launches, you will receive a new version of

LVHN Weekly via email every Friday. It will be different than the magazine-style version you receive now. The new LVHN Weekly will be completely electronic and contain headlines that link to the week's stories on LVHN Daily. LVHN Weekly will contain both network and site-specific news.

## Communication Survey Extended to July 9

Your voice matters at LVHN, and we want to hear feedback from as many colleagues as possible. That's why we have extended the LVHN Communication Survey until July 9. We want to know how you receive LVHN news and information, and how we can enhance colleague communication at LVHN. If you take the survey, you will be entered into a drawing to win an LVHN gift basket.

Please take a few moments to complete this colleague [communications survey](#). Based on your feedback, we'll explore and implement new and innovative ways to make it more convenient for you to receive important LVHN news and information.

# Getting Hip to Surgery

**Scott Krater of Port Carbon first noticed a twinge of right-hip pain in 2014 while out golfing.** As director of Schuylkill County's 911 Communications Center, a member of his borough fire company and its chief for 19 years, the 57-year-old Krater wasn't a stranger to aches and pains. But the pain didn't go away. Instead, it steadily grew worse.

By late fall 2015, Krater's hip truly began to bother him. Hitting the links the following spring, "I realized how bad it had become," Krater says. "I couldn't golf without pumping myself with Advil or Tylenol to relieve the pain."

Worse yet, severe aching had migrated to his right leg and the outside of his left foot. "I was compensating for my hip pain by walking with a noticeable limp," Krater says. "That put pressure on other parts of my lower body." During football season, as part of the "chain gang" that moved sideline markers during Pottsville Area High School games, he hobbled up and down the field with difficulty. "The 2016 season was a real struggle," Krater recalls.

## TRYING CONSERVATIVE TREATMENTS

By then, Krater had consulted with orthopedic surgeon Robert Boran, MD, with Lehigh Valley Physician Group Orthopedics—Schuylkill Manor Road, in Pottsville. "X-rays showed that Scott had moderate-to-severe degenerative arthritis," says Boran, who recently retired from surgery. "Because he was young, we decided to start by trying conservative, non-operative treatment."

Physical therapy, including pool-based aquatic therapy at LVHN Rehabilitation Center—Schuylkill, helped make the pain more tolerable but didn't halt disease progression. In December 2016, Krater had a cortisone injection into the hip joint. "That helped until about February," Krater says. "We reached the conclusion that conservative treatment had failed," Boran says. "The next step was to proceed with total joint arthroplasty" – hip replacement surgery.

## A NECESSARY SURGERY

Krater's progression was typical of people who need total hip replacement. "We consider several factors before surgery," Boran

says. One is that imaging, such as an X-ray, shows arthritis to be severe. Another is that pain significantly affects walking, quality of life or daily activities. A final consideration is that more conservative treatments have not provided relief. "Scott certainly met all those criteria," Boran says. "He had end-stage osteoarthritis where there is no cartilage visible on the X-ray and you have bone-on-bone, which usually means constant pain."

On surgery day, Krater felt comforted by familiar faces from the community where he grew up and dedicated himself to public service. "Dr. Boran had done my mother's hip replacement surgery," Krater says. "The prep nurse was a high school classmate. The operating room nurse was a neighbor in Port Carbon. We were all on a first-name basis. Whatever my reservations or anxiety, it helped a lot to look at faces I knew."

Surgery went smoothly, and Krater immediately noticed a difference. "When I woke up, I had pain from the incision but nothing like the pain I had prior to surgery," he says. "That pain was all gone."

## PHYSICAL THERAPY IS CRITICAL

Therapy was both immediate and vital. "Rehabilitation is extremely important," Boran says. "It strengthens muscles weakened not only by surgery but by previous lack of motion due to pain and arthritis." Activity also helps prevent blood clots in lower extremities. "I was walking the day after surgery," Krater says.

Krater received physical therapy at home for two weeks. About three weeks after surgery, he attended the Schuylkill Chamber of Commerce's annual golf outing. "My goal from surgery had been to at least putt at that event," Krater says. "I fulfilled that goal."

Krater continued doing physical therapy at LVHN Rehabilitation Center – including leg stretches, knee bends and stepping exercises – three days a week for two more months. "He progressed like gangbusters," Boran says. After three months, Boran gave Krater the best news of all: "I told him he could start playing golf again."

"I'm ecstatic and pleased beyond words," Krater says. "I'm basically doing everything I did before surgery – but without pain."

