Safety First

OCCUPATIONAL HEALTH SERVICES HELP
ROMARK LOGISTICS EMPLOYEES STAY HEALTHY

Romark Logistics employees work hard and smart. In 24 hours, they can handle as many as 40,000 cases plant-wide in the company's Hazle Township facility, which provides distribution and logistics for food products. Employees say they're proud to work there because of Romark's commitment to their health and safety.

“We’ve had half-a-million hours worked with less than a 1 percent incident rate, which is much better than the industry standard,” says Holly Courter, Romark’s senior human resources manager. “Lehigh Valley Health Network (LVHN) contributes to that success.”

Romark is one of nearly 500 companies in northeast Pennsylvania that utilizes LVHN’s occupational health services, which are provided at the Health & Wellness Center at Hazleton or at the worksite.

“The more we know about a job’s demands and the employee's technique and abilities, the more safely the employee can be placed at a specific job,” says John Amentler, MD, occupational health services medical director. “Companies love that we can offer most of our services at the

“In my department, we pick items and place them in boxes. Before a shift, after lunch and after a shift, everyone in my department stretches our hands, arms and shoulders. It helps tremendously. I never hear anyone saying they’re sore, and we haven’t had an injury in years.”

Ryan DeHoff
Co-pack manager, Romark
worksite,” says occupational health clinic manager Laura Jones, RN.

The industrial rehabilitation department at the Health & Wellness Center works in conjunction with the occupational health clinic. “Our program is unique in that we adapt to meet each company’s needs,” says occupational therapist and director of rehabilitation services Catherine Gallagher.

“On-the-job education to help employees perform their job more safely and efficiently

On-the-job rehabilitation to help employees return to full duty

The ultimate goal is to prevent an injury from happening. That’s why the education employees receive is vital.

—Rick Martuscelli

LVHN’S OCCUPATIONAL HEALTH SERVICES INCLUDE:

- Support from three occupational medicine physicians who provide care for work-related injuries and illnesses, pre-employment and return-to-work exams
- Drug and alcohol testing
- D.O.T. Testing (Department of Transportation)
- Wellness programs and screenings
- Travel medicine services, including immunizations
- Worksite early intervention program, which promotes safe practices to prevent injury
- Creation of job descriptions that define job demands

“On-the-job education to help employees perform their job more safely and efficiently

Job strain analysis that helps determine whether a job is safe or unsafe, with recommendations for improvements

Functional capacity testing to determine a job candidate’s abilities

Exercise programs to develop strength and endurance for job-related tasks

On-the-job rehabilitation to help employees return to full duty

The ultimate goal is to prevent an injury from happening. That’s why the education employees receive is vital.

—Rick Martuscelli

Next Step

LEARN MORE about occupational health services. Visit LVHN.org/occupationalhealth or call 570-501-6868.
I know what seasonal allergies are like – I suffer from them myself. Allergies spike in the spring and, in most areas of the country, settle down until spiking again in the fall. But in our area, allergies often keep going all summer and continue straight into autumn.

Ragweed is one of the biggest culprits. It doesn’t have to grow in your immediate vicinity to be a problem because it can travel long distances through the air. So even if local sources of pollen aren’t bothering you, a brisk wind could bring ragweed from a distance.

Allergy symptoms overlap with those of other respiratory conditions such as the common cold, but several features distinguish allergies from an infection.

These include:
- A runny nose as with a cold, but fluid is thin and clear.
- Eyes water and may be itchy, along with your nose.
- You might have a dry cough, meaning it doesn’t bring anything up.
- Dark circles may form under your eyes.
- There’s no fever with allergies.

Fortunately, you can minimize seasonal allergy symptoms in a variety of ways. Here are four general approaches that many people find helpful.

DEALING WITH THE ‘SNEEZING SEASON’

1 Avoidance – Follow daily allergy forecasts on TV or online, and try to stay indoors on days when the pollen index is high. Keep windows closed and run air conditioning (A/C). Just be sure the A/C filter is clean – it prevents outdoor allergens from entering the house. If grass is an issue, consider hiring a lawn service to reduce exposure from mowing.

2 Rinses – A saline solution sprayed into the nose helps keep nasal passages moist so they’re not as irritated when exposed to allergens. Consider using a neti pot to rinse sinuses of mucus that can trap allergens and prolong exposure.

3 Antihistamines – Non-sedating over-the-counter medications such as Claritin, Allegra and Zyrtec control symptoms without making you drowsy. They take seven days to reach full effectiveness, so don’t give up if they don’t help immediately.

4 Nasal sprays – Nasal decongestant and corticosteroid sprays (such as Afrin, Nasacort or Flonase) treat congestion that can develop in irritated nasal passages. Be sure to follow the packaging instructions or the directions from your provider when using these medications. The nasal decongestants (Afrin) should not be taken for more than three days straight, as they can cause a rebound effect that makes congestion even worse.
Underwater Healing

AQUATIC THERAPY HELPS HAZLETON MAN REGAIN STRENGTH

It’s pool season, a time when you might think about practicing your strokes or relaxing on an inflatable raft. But for people like Charles Nahas of Hazleton, the pool also is a place for healing and recovery.

That’s because Nahas, 80, suffered for three years from spondylolisthesis, a condition in which a defect in a part of the spine causes vertebra to slip to one side of the body. He also had spinal stenosis, a narrowing of the spinal column. Both conditions lead to back and leg pain.

To find relief, Nahas tried pain management and chiropractic care. They helped only for a short time, and soon Nahas couldn’t take walks or go fishing. Then he tried physical therapy. “But the pain was too great for me to continue,” he says.

THE BENEFITS OF AQUATIC THERAPY

That’s when Nahas learned about the aquatic therapy program at the Health & Wellness Center at Hazleton. “I asked my physician to write me a prescription for it, and what a difference it’s made,” Nahas says.

Sessions are held inside a pool that includes an underwater treadmill. Physical therapists work with each patient to tailor treatment, which could include using the treadmill, paddles, flotation devices or massage jets.

“With a temperature of between 94 and 96 degrees, the water warms the muscles and has a buoyancy effect, which makes it easier for patients to move than in a land-based program,” says physical therapist Gene Myers.

Aquatic therapy helps to heal musculoskeletal issues and conditions for people of all ages and abilities. Sessions can help people improve gait, muscle strength and endurance, balance, agility, function, coordination, flexibility, body mechanics and posture.

BACK ON TRACK

For Nahas, aquatic therapy helped him rebuild strength. “I worked with him a few times a week and saw a big improvement in him after just two weeks,” Myers says.

Myers led Nahas through exercise routines in shallow water. He also worked with him on the underwater treadmill. It simulates land-based walking, running or sports-specific activities, but because it’s underwater, impact on joints and body weight are lessened.

After two months of aquatic therapy, Nahas is pain-free and back to regular gym workouts three days a week. He uses six different machines and exercises at home too. “The aqua therapy was a great deal of help,” he says. “Gene and the therapy team were very knowledgeable and went out of their way to help me achieve my goals.”

—Leslie Feldman

Physical therapist
Gene Myers
helps people recover from pain or injury with an underwater treadmill inside the Health & Wellness Center at Hazleton.
The patient’s right hand was pale. His wrist had no pulse. He did have a blood pressure. These were among the symptoms Lehigh Valley Hospital (LVH)–Hazleton clinicians considered as they worked toward a diagnosis. Although they’re accustomed to handling critical situations, this case was personal. The patient was Bill Bauer, the hospital’s chief financial officer.

They suspected Bauer’s condition was life-threatening. His survival would depend on quick, coordinated care from numerous specialists. Follow his steps to survival:

THE MORNING OF NOV. 2, 2015
The hospital is abuzz. Leaders are planning to announce LVH–Hazleton’s new designation as a Level IV Trauma Center, identifying its ability to provide quality care quickly. It’s exactly what Bauer would need. “As I walked to my office, I felt pressure in my neck,” says Bauer, 53. “I never felt anything like it before.” Noticing Bauer leaning against a cubicle, his colleagues get a wheelchair and bring Bauer to the emergency room (ER).

IN THE ER
After reviewing Bauer’s EKG and chest X-ray, emergency medicine physician Gerald Coleman, DO, rules out a heart attack. Then Bauer starts shaking his right hand and complains of pain in his left leg. Coleman and intensivist Anthony Valente, MD, a friend and colleague of Bauer’s who came to the ER to check on him, suspect an aortic dissection, a life-threatening tear in the inner lining of the aorta, the main artery that carries blood through the body. A CT scan confirms it.

A phone call to LVH–Cedar Crest mobilizes a team of caregivers who prepare for Bauer’s arrival via MedEvac helicopter. “In a health network like ours, there’s a familiarity among caregivers and a knowledge of the protocols that make things happen quickly,” Coleman says. “It cuts out the logistical planning and allows us to focus on the patient.”

ARRIVAL AT LVH–CEDAR CREST
More than 20 caregivers await Bauer’s arrival. One of them is cardiothoracic surgeon Raymond Singer, MD. He determines the tear started in the section of the aorta that ascends from the heart and continued along the length of the aorta, which bends like a candy cane and descends through the abdomen. Blood is flowing through the tear into the lining of the aorta – instead of through the blood vessel itself – preventing enough blood from reaching Bauer’s organs and extremities.

Bauer had a very extreme case of aortic dissection known as malperfusion syndrome. For patients with this complication, very little blood is going to the vital organs. The survival rate is 15 percent. Bauer needs emergency surgery to restore blood flow. “Every minute counts,” Singer says. “It’s important for patients with an aortic dissection to be in a facility like LVHN with the capabilities to perform this complicated surgery.”

In the OR
Assisted by cardiothoracic surgeon Vincent Lotano, MD, Singer replaces the section of the aorta where the tear originated with a polyester tube that keeps blood flowing through the vessel. He also repairs the aortic valve, which was damaged by the tear. During surgery, Bauer’s body temperature is lowered to 15 degrees Celsius (59 degrees Fahrenheit) to protect his brain. After the seven-hour procedure, his body is gradually warmed.

RECOVERY AND REHAB
The next day, Bauer can breathe without a ventilator. Slowly he begins to regain function in his arm and legs, and his cognitive functions are normal. Once well enough, he is transferred to LVH–Hazleton’s Gunderson Center for

Next Step
LEARN MORE ABOUT
▶ Heart and vascular care at LVHN.org/heart
▶ Gunderson Center for Inpatient Rehabilitation at LVHN.org/gunderson.
Inpatient Rehabilitation. There, he's encouraged by visits from co-workers and motivated by therapists. In three weeks, he can walk the length of the center's hallway.

**ANOTHER STEP**

On Dec. 16, Bauer returns home to find a metaphorical step in his recovery – the step from his garage to his kitchen. “It seemed higher,” Bauer says, but as he regains strength, it’s not so daunting. Bauer suffered minimal nerve damage in his hand, but his legs are now strong enough to drive him between his Bloomsburg home and work.

‘WHY ME?’

Still unknown is why this happened to Bauer. Although people with high blood pressure or Marfan syndrome (a connective tissue disorder) are at greater risk for aortic dissection, Bauer has neither. Yet he does know you can receive excellent care close to home. “Most people don’t survive what happened to me, let alone have a good quality of life,” he says. “Mine is getting close to being back to normal.”

—Rick Martuscelli
Her Heart Is Back on Course

ER, CARDIOLOGY TEAMWORK SAVES DONNA BARNCA

Golfing with friends brings smiles for Donna Barna (second from left).
As the president of a local insurance agency, an active Hazleton business leader and a golfer, Donna Barna is used to dealing with all kinds of situations. Most don’t give her pause. So when she thought she had a bad case of bronchitis in June 2014, she kept working as normal.

“I’m old school,” says Barna, now 55. “You always go to work.” This despite having a headache, body chills and difficulty breathing.

After work, “I was feeling really terrible, and I kept saying to my husband that I think I should go to the ER (emergency room) and get antibiotics,” she says. “I started thinking about my heart, and I remember hearing that if you take an aspirin and it takes the pain away, you’re not likely having a heart attack.”

So Barna took an aspirin, started feeling better, and told her husband and son, both named David, she would go to their family doctor the next day.

She headed for bed around 9 p.m., but the symptoms came back, worse than before. Not wanting to bother her husband, who would have to get up for work in the morning, she asked her son, who had just graduated from college, to drive her to the ER. She lives about seven minutes from Lehigh Valley Hospital (LVH)–Hazleton.

“I COULDN’T SCREAM FOR HELP”

When she arrived and started giving her health history – including the fact that both of her parents have heart problems – ER caregivers hooked her up to a heart monitor. “The next thing I remember is hearing something that sounded like a fire alarm,” she says.

“I could feel myself passing out, and I couldn’t scream for help.”

The alarm was the heart monitor going off because her heart had stopped beating. In fact, by the time Barna regained consciousness, her heart had stopped for 27 seconds.

“Normal people can have their heart slow moderately at night when they sleep, and we sometimes have pauses of up to five seconds at night,” says cardiologist James Sandberg, MD, with LVPG Cardiology. “But pauses of 27 seconds are markedly abnormal.”

A QUICK FLIGHT

ER colleagues in Hazleton quickly arranged for a Medevac flight to LVH–Cedar Crest in Allentown. Barna called her husband and was able to see him before the flight left.

Twelve minutes later, the helicopter landed. Barna learned she would have a cardiac catheterization done at 9 a.m. (it was now after 2 a.m.) By the time her husband arrived in the morning, the procedure was over.

“In her case, even though she came in with chest discomfort, she wasn’t having a heart attack,” Sandberg says. Instead, the fact that her heart stopped – and that she has a slow heartbeat to begin with – meant she needed a pacemaker, which Sandberg implanted later that day.

“A pacemaker sends a stimulus to the heart so it maintains the heart rate and eliminates pauses,” Sandberg says. “It is inserted under the skin on the front wall of the chest just under the collarbone. We’ve put pacemakers in people as old as 96 and as young as 22.”

A ‘21ST CENTURY’ PACEMAKER

The pacemaker Barna received is so 21st century that in addition to being MRI-safe (no metal), it can communicate with Sandberg’s cardiology team wirelessly through an app on Barna’s smartphone. Similarly, if her cardiology team needs to make adjustments to her pacemaker, they can do it virtually through that same app.

Since Barna had the pacemaker inserted, it’s been needed about 10 to 15 percent of the time to regulate her heartbeat. “So 85 to 90 percent of the time her heart is working on its own,” Sandberg says.

Now back to a busy schedule including golfing, cooking with her son via Skype and volunteering with the Hazleton Rotary Club, Hazleton Rotary Foundation, Greater Hazleton Library Board of Trustees, CANDO and as the board chair for the Greater Hazleton Chamber of Commerce, Barna says, “I touch my pacemaker every day. And I wake up with a positive attitude. I realize that in a heartbeat you can be gone, so I live every day to the fullest.”

–Leah Ingram
Lindsey Hannigan celebrated her 21st birthday in January at home in Clarks Summit, Lackawanna County, aware she might not have reached this milestone of adult life.

Less than two months earlier, the college junior had heart surgery at Lehigh Valley Hospital (LVH)–Cedar Crest in Allentown to replace her diseased aortic valve with one that would allow blood to easily flow from her heart to the rest of her body. She says the operation was done just in time, as her own valve had been leaking dangerously with each heartbeat over the past few months.

“I might not have reached 21 if I didn’t have the surgery,” Hannigan says.

NONSTOP CHEST PAIN
She recalls the mounting fatigue and stabbing chest pain during her fall semester at University of Pittsburgh, where she studies psychology.

“The chest pain occurred at all times of the day, whether I was exercising, sitting, lying down or walking,” she says. A test at nearby Allegheny General Hospital, Pittsburgh, revealed the problem was at its worst stage; she was told surgery was desperately needed, and soon.

“We researched the best places possible, which led me to Lehigh Valley,” Hannigan says. “My sister found that it had great ratings (LVH is nationally ranked in cardiology and heart surgery by U.S. News & World Report), plus it was actually recommended when I was in the hospital in Pittsburgh.”

A THOROUGH EXPLANATION
An appointment with Raymond Singer, MD, with LVPG Cardiac and Thoracic Surgery, confirmed to the Hannigans they’d made the right choice. Singer has the best valve surgery patient survival rates in Pennsylvania, according to the Pennsylvania Health Care Cost Containment Council’s most recent cardiac surgery report.

“He explained the surgery to us, told us about the valve options and answered our questions,” she says. “He treated us like we were part of his family. I had a sense of peace being with him.”

On Dec. 10, 2015, Singer removed her damaged “native” valve and replaced it with one made of cow tissue so she wouldn’t need blood thinners that are required with artificial valves.

FEELING BETTER EACH DAY
Hannigan started a cardiac rehabilitation program this past winter and is feeling better each day. She hears from Singer through texts and phone calls, and says “his compassion makes a world of difference.”

Hannigan returned to college in May, and she hopes to specialize in a new branch of psychology that helps patients deal with the emotional issues heart patients often experience. “If I can help someone going through what I experienced, it will all be worth it,” Hannigan says.

—Robert Stevens
**Community Events**

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<th>Event</th>
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<tr>
<td><strong>Bariatric/Weight-Loss Management Information Session</strong></td>
<td>Tuesdays, Aug. 30, Oct. 25 and Thursdays, July 28, Sept. 29: 6-8 p.m., LVH–Hazleton, annex building, second floor conference room</td>
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<tr>
<td><strong>Miller-Keystone Blood Drive</strong></td>
<td>Wednesday, Sept. 21: noon-5 p.m., LVH–Hazleton, first floor lobby conference room</td>
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<tr>
<td><strong>Senior Choice Lunch and Learn</strong></td>
<td>Tuesday, Sept. 20: 11:30 a.m.-1 p.m., Lobitz Catering–Safari Room</td>
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<tr>
<td><strong>What Every Person Should Know About Stroke</strong></td>
<td>Wednesday, Aug. 3, Sept. 7, Oct. 5: 2-3 p.m., LVH–Hazleton, sixth floor, Gunderson Center for Inpatient Rehabilitation</td>
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<tr>
<td><strong>Senior Choice Annual Summer Picnic</strong></td>
<td>Wednesday, Aug. 4: 11:30 a.m.-2 p.m., Freeland Public Park Pavilion, Front Street, Freeland</td>
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<tr>
<td><strong>ATV Simulator and Score Program</strong></td>
<td>Saturday, Sept. 17: 10 a.m.-noon, LVH–Hazleton, Business and Education Center</td>
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**Calendar CLASSES AND SUPPORT GROUPS**

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<th>Support Groups</th>
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<tr>
<td><strong>Bariatric Support Group</strong></td>
<td>Wednesdays, July 20, Aug. 17, Sept. 21, Oct. 19: 7-8 p.m., LVH–Hazleton, Business and Education Center, first floor conference room</td>
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<tr>
<td><strong>Stroke Support Group</strong></td>
<td>Mondays, July 25, Aug. 22, Sept. 26, Oct. 24: 2 p.m., LVH–Hazleton, sixth floor, Gunderson Center for Inpatient Rehabilitation</td>
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**Health Screenings**

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<tr>
<td><strong>Blood Pressure Screenings</strong></td>
<td>Thursdays, Aug. 4, Sept. 1, Oct. 6: 8-9 a.m.</td>
<td>Laurel Mall Walkers, Laurel Mall, Hazleton</td>
</tr>
<tr>
<td><strong>Infant Care/Breastfeeding Class</strong></td>
<td>Wednesdays, July 20, Sept. 21, Nov. 16: 7-9 p.m.</td>
<td>LVH–Hazleton Family Birthing Center</td>
</tr>
<tr>
<td><strong>Infant/Child CPR Class</strong></td>
<td>For due dates in July and August: Wednesdays, Sept. 7, 14, 21, 28: 7 p.m.</td>
<td>LVH–Hazleton Family Birthing Center</td>
</tr>
<tr>
<td><strong>Labor and Delivery Class Series</strong></td>
<td>For due dates in September and October: Wednesdays, Nov. 2, 9, 16, 30: 7 p.m.</td>
<td>LVH–Hazleton Family Birthing Center</td>
</tr>
<tr>
<td><strong>Sibling Class</strong></td>
<td>Wednesday, Sept. 7, Nov. 16: 6-7 p.m., LVH–Hazleton Family Birthing Center</td>
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The New Health Center at Mountain Top

You shouldn’t have to travel far for the best care possible. At the new Health Center at Mountain Top, we’re bringing the services of Lehigh Valley Health Network to you. It’s the right care, right here.

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