



Here are the latest encouraging stories, health tips and news items.

**COVID-19 stories highlighted in blue*

JUST FOR COLLEAGUES



CEO UPDATE VIDEO

CEO Update Video: How to Vaccinate the Most People Now

The best way to quickly vaccinate the most people is to put vaccines in the hands of Pennsylvania's health care systems.



Refer a Physician or APC, Earn a Bonus

Get \$2,500 for referring a physician; \$1,000 for an APC.



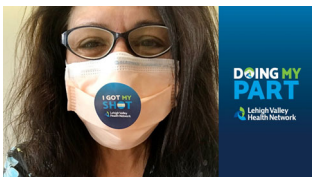
More Service Excellence Award Recipients Celebrated – Photos

Meet the Partner of the Year and Mentor/Coach Award recipients.

SERVICE EXCELLENCE AWARDS 2021

Honored for Patient Experience Excellence and Achievements

These departments achieved the highest patient satisfaction scores and took the greatest leap forward.



Patricia Anderson is Doing Her Part

She does so in appreciation of her colleagues.



I Survived COVID-19: Chris McMillan

LVH–Muhlenberg's first extubated patient shares what life is like after COVID-19.



How Cervical Disk Replacement Eased Frank Berardelli's Unrelenting Nerve Pain

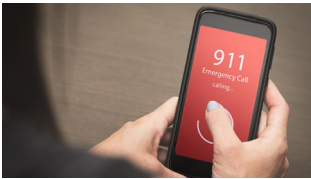
A month after surgery, this high school football coach was back to his active lifestyle.

HEALTH TIPS



Should You Get the COVID-19 Vaccine if You're Pregnant or Breastfeeding?

Read the latest information about COVID-19 and pregnancy.



Are You Prepared for a Medical Emergency?

Take these steps to help stay calm in the chaos.



Looking for Relief From Acid Reflux?

Attend a reflux event March 1, 6 p.m.



Lehigh Valley Heart Institute is First in the Region to Offer People with AFib WATCHMAN FLX

This device fits even more anatomies than the original WATCHMAN.

IN THE NEWS

WFMZ-TV 69 News/Sen. Pat Browne's Telephone Town Hall on COVID

February 4, 2021 | wfmz.com

WLVT-TV PBS 39/ Lehigh Valley Public Media presents Community Conversation on COVID-19 Vaccines: Fact vs Fiction

February 4, 2021 | wlvt.com

Hospital and Healthsystem Association of PA (HAP)/PA Senate Hearing Highlights COVID-19 Vaccination Efforts, Areas to Improve Statewide Distribution

February 4, 2021 | haponline.org

Share your story at LVHN.org/stories.



CEO UPDATE VIDEO

CEO Update Video: How to Vaccinate the Most People Now

Lehigh Valley, Pa., February 11, 2021

LVHN is doing everything possible to make more vaccine available to the people of our community. LVHN leaders are even working with elected officials to find solutions to our state's vaccination challenges. Recently, LVHN provided evidence during a Pennsylvania Senate Committee hearing that shows health systems such as LVHN are the fastest and best way to vaccinate the most people while supplies are limited. LVHN President and CEO Brian A. Nester, DO, MBA, shares that evidence with you in his

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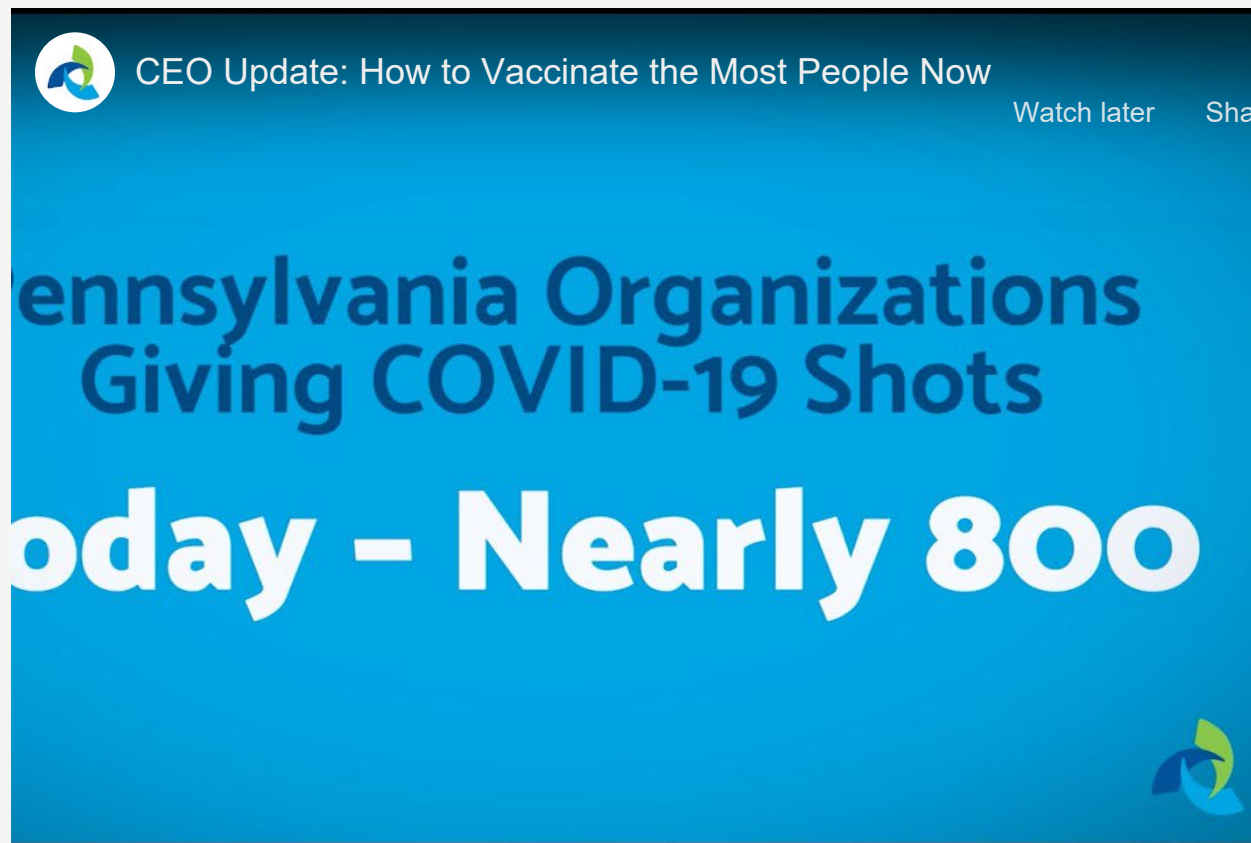
CEO Update Video: How to Vaccinate the Most People Now



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latest CEO Update Video. Watch the video or read the transcript below.



Vaccine supply continues to be low, and I know you are getting more frustrated every day. But know this: As your health partner, LVHN has your back. We are doing everything we can to make more vaccine available to you and people across Pennsylvania.

Last week, LVHN testified during a Pennsylvania Senate Committee hearing about the state's vaccination plan. We provided evidence that shows the best way to quickly vaccinate the most people is to put vaccine in the hands of the organizations that have the experience, technology, resources and capacity to do it fast, now. Unquestionably, these organizations are Pennsylvania's health care systems.

To help you understand, let me tell you how vaccine is currently distributed. Each week, the federal government sends vaccine supply to Pennsylvania. Then, Pennsylvania

distributes vaccine to organizations providing the shots.

Early on, there were about 60 organizations providing shots in our state. That number has grown to nearly 800. That means health systems like LVHN – with the ability to vaccinate up to 30,000 people per week – are getting less vaccine because the supply is being divided into smaller and smaller portions and being shared with pharmacies and physician practices that cannot schedule and provide shots nearly as effectively as we can. When demand radically exceeds supply, the best approach is to tap on providers with big capacity.

Our message is clear. Today, while vaccine supplies are limited, distribution should be based on an organization's ability to quickly and efficiently distribute vaccine to the largest number of people across the largest region. At LVHN, we've proven that we can do just that.

For 20-plus years, we have administered as many as 14,000 flu shots at our two-day drive-through clinics, with nearly 8,000 vaccinations delivered in a single day. Prior to our recent COVID-19 drive-through clinic at Dorney Park, we scheduled 1,000 appointments for people age 75-plus in just five hours via MyLVHN and our COVID hotline. And those who were vaccinated shared rave reviews about the organization of the event and the friendliness and professionalism of our staff. Thus far, we have provided more than 62,000 vaccinations at LVHN and have never wasted a dose because we didn't have someone to give it to. We have either distributed or scheduled 100 percent of the vaccine doses LVHN has received.

Vaccinating every Pennsylvanian is a daunting challenge. However, it can be achieved if we set a goal to use each dose Pennsylvania receives as quickly as possible. Hospitals and health systems such as LVHN are the fastest and best way to vaccinate the most people, while supplies are limited. We are eager and ready to get to work for you right now. All we need is the vaccine to get started.

When vaccine supplies begin to meet or exceed demand, other smaller providers such as pharmacies, physician practices or even the National Guard will take on a critical role in reaching pockets of Pennsylvania communities that haven't been able to access the vaccine.

We appreciate the opportunity from our elected officials to provide LVHN's perspective. Pennsylvania is a large and diverse state, and what works in one county may not work in another. We will continue to talk with policy makers to find solutions that work best for our community, because that's what you deserve from your health partner.

About LVHN

LVHN includes eight hospital campuses, three in Allentown, one in Bethlehem, one in East Stroudsburg, one in Hazleton and two in Pottsville, Pa.; [Coordinated Health](#), which includes two hospital campuses, nearly two dozen multispecialty locations including ambulatory surgery centers and orthopedic injury centers in northeastern Pennsylvania and western New Jersey; 26 health centers; numerous primary and specialty care physician practices; 20 [ExpressCARE](#) locations including the area's only [Children's ExpressCARE](#); pharmacy, imaging, home health, rehabilitation and lab services; and preferred provider services through Valley Preferred. Specialty care includes: trauma care for adults and children, burn care at the Regional Burn Center; kidney and pancreas transplants; perinatal/neonatal, cardiac, cancer, orthopedics, neurology, complex neurosurgery capabilities including national certification as a Comprehensive Stroke Center, and robotic surgery in 10 specialties. [Lehigh Valley Cancer Institute](#), [Lehigh Valley Heart Institute](#) and [Lehigh Valley Institute for Surgical Excellence](#) physicians provide the most advanced treatments. Lehigh Valley Cancer Institute is a member of the [Memorial Sloan Kettering \(MSK\) Cancer Alliance](#), an initiative that helps community providers improve the quality of cancer care and offers access to MSK clinical trials. [Lehigh Valley Reilly Children's Hospital](#), the community's only children's hospital, provides care in more than 30 specialties and general pediatrics. [Lehigh Valley Hospital—Cedar Crest](#) is ranked as the region's No.1 hospital for seven straight years and has been recognized among Pennsylvania's top six hospitals for seven consecutive years by [U.S. News & World Report](#). Lehigh Valley Hospital (LVH)—Cedar Crest, [LVH—17th Street](#) and [LVH—Muhlenberg](#) are the region's only [Magnet®](#) hospitals for nursing excellence. Additional information is available by visiting [LVHN.org](#) or following us on [Facebook](#), [Twitter](#), [LinkedIn](#) and [Instagram](#).



Refer a Physician or APC, Earn \$2,500 or \$1,000

February 10, 2021

Effective Jan. 18, all LVHN colleagues are eligible to earn \$2,500 for referring a physician and \$1,000 for referring an advanced practice clinician (APC) who is hired by LVPG.

The referral award is paid through the payroll process within 90 days after the physician or APC starts working.

[Download this flyer](#) and share it with your colleagues.

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Tweets by @LVHN



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Send candidates to Dina Givler, Physician Recruiting, at Dina.Givler@lvhn.org.



SERVICE EXCELLENCE AWARDS 2021

More Service Excellence Award Recipients Celebrated – PHOTOS

February 05, 2021

The LVHN Star Mentor/Coach Awards recognize colleagues who instruct, develop and promote other colleagues and are considered an “unsung teacher” in their department.

The Terry Capuano Partner of the Year Award named for our now retired Chief Operating Officer Terry Capuano. The recipient is chosen from among the 12 previous Partner of the Month Award winners.

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Here are the stories of four recipients of The Star Mentor/Coach Award and the recipient of The Terry Capuano Partner of the Year Award.

The Star Mentor/Coach Awards

Jean Davies

The recipient of the Mentor/Coach Award from the Lehigh Valley is Jean Davies, RN Manager, Integrated Care Coordination. Jean has been with LVHN for nearly 40 years. She was instrumental in providing clinical expertise to build the health network's centralized Transition of Care call center in 2015. The program has since grown to provide post-discharge care management to approximately 28,000 patients annually. Jean's philosophy is, "patient first." She always encourages learning about the patient and their needs along with knowing the policies and practices to provide quality care. She has taken multiple colleagues under her wing, both nursing and non-nursing, to provide guidance in their own clinical and professional development. Her willingness to do so is a testament to her dedication to our patients and community.

Kathy Grube

The recipient of the Mentor/Coach Award at Coordinated Health is Kathy Grube. Kathy is manager of the sterile processing department. In addition to maintaining the sterility of OR equipment – an important job in itself – Kathy mentors her team to go above and beyond every day. They work with the OR staff and equipment vendors to ensure physicians have everything they need for their cases. Since the implementation of Epic, surgical schedulers in the office have been ordering the equipment and supplies for each case. This has been a big change for them. Kathy and her team took it upon themselves to partner with the schedulers to review the orders and ensure physicians have everything they need.



Megan Antonelli



The recipient of the Mentor/Coach Award in Hazleton is Megan Antonelli. An effective mentor empowers colleagues to be their best. Megan embodies this quality. She is the site manager for LVPG Physiatry at the Health & Wellness Center. Megan's nominator says, "She has helped me become a better Patient Services Representative in many ways." She listens to her team's concerns and provides prompt solutions and responses. She is available and attentive, and she offers constructive advice that helps improve daily operations.



Michelle Strausser

The recipient of the Mentor/Coach Award in Schuylkill is Michelle Strausser. As a Patient Services Representative Site Lead for LVPG–Family Medicine Schuylkill Medical Plaza, Michelle always does everything she can for patients when she's on and off the clock. One of Michelle's patients was discharged from LVH–Cedar Crest without his cellphone. After he was back in Schuylkill County, he had no way to travel back to Allentown to get his phone. After a full day of work, Michelle took it upon herself to drive to Allentown, pick up the phone and deliver it to this patient. He was overjoyed and grateful for her kindness. A mentor sets an example for others, and Michelle sure sets a great example for her colleagues to follow.



Terry Capuano Partner of the Year Award

Tina Fiorino

The recipient of the Terry Capuano Partner of the Year

Award is Tina Fiorino. An elderly, homeless veteran – who was a patient in the emergency department at LVH– Muhlenberg – experienced difficulty making it to the bathroom in time. Clearly embarrassed, he asked for a clean pair of pants. However, the staff didn't have anything suitable for him. Tina helped bathe the frail gentleman and spent time talking with him. The two bonded over hometown memories of New Jersey, where they both previously lived. Meanwhile, the staff cleaned his room, washed the floor and put fresh sheets on his bed. A hot breakfast was delivered to his room. The patient's mood lifted, and he expressed gratitude for the wonderful care he received. After that, Tina went one step further. With her own money, she bought the patient several new pairs of pants and shirts as well as disposable underwear. When she presented him with the gifts, he was speechless. No one had ever been so generous to him. Neil Kocher, who nominated Tina for this award, says, "Tina is a wonderful, caring colleague who deserves to be recognized, because this kind of dedication is not out of character for her. She is extremely compassionate to our patients and colleagues and is truly someone who opens closed doors."



SERVICE EXCELLENCE AWARDS 2021

Teams Honored for Patient Experience Excellence and Achievement at Service Excellence Awards

February 05, 2021

Delivering an exceptional experience is in the LVHN DNA. Today, we will honor inpatient, outpatient and LVPG teams that have attained excellence and special achievement in providing an unsurpassed patient experience. Awards are given to the teams that achieved the highest patient satisfaction score, as well as the teams that

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achieved the greatest leap forward in their scores. Here are the recipients:

Inpatient Excellence, LVH–Pocono

Inpatient Achievement, LVH–Hazleton

Outpatient Excellence, Breast Health Services

Outpatient Achievement, LVH–Schuylkill

LVPG Excellence, Lehigh Valley Cancer Institute

LVPG Achievement, LVPG Family Medicine



CEO UPDATE VIDEO
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Lehigh Valley Health ...

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LehighValley.org/COVIDSTRONG



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Patricia Anderson Does Her Part in Appreciation of Her Colleagues

February 04, 2021

LVHN colleagues are amazing every day. “Their heart and love of all things will always be greater than any pandemic,” says Patricia Anderson, Registered Nerve Conduction Technologist.

“My story is no bigger or greater than most others,” say Anderson. “I am in awe every day of countless colleagues who show up and step up to tirelessly fight against COVID-

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Tweets by @LVHN



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19. They stand selflessly by every patient, doing what many cannot or will not. Thank you! Thank you! Thank you!”

Follow Anderson’s lead and do your part by getting vaccinated. The quickest and easiest way to schedule your vaccination is through MyLVHN. If you do not have MyLVHN, sign up today at MyLVHN.org or download the free app at Google Play or through the Apple App Store.

Submit your story

We must do everything possible to stop the surge. How do you model the behaviors that keep us safe? How do you inspire others to do the same? Submit your story and masked selfie at LVHN.org/stories, and you could be featured for doing your part.





I Survived COVID-19: Chris McMillan

LVH–Muhlenberg's first extubated patient shares what life is like after COVID-19

February 05, 2021

It's been close to a year since Chris McMillan, 47-year-old Bethlehem resident, was dubbed Lehigh Valley Hospital (LVH)–Muhlenberg's first extubated COVID-19 patient, early on in the pandemic. We wanted to know what life is like after COVID-19 so we reached out. Turns out, Chris was more than happy to share his experience.

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I Survived COVID-19: Chris McMillan



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What do you think when people say COVID-19 isn't a big deal?

After more than 460 thousand deaths in this country, I cannot fathom how people think this isn't a big deal. Even people I know who had the "light" version say they were wiped out for weeks afterward. This isn't a game. You get one life. Staying at home, wearing a mask and social distancing when going out are not a hardship if it means that you can help keep this virus away from loved ones. It's basic human decency.

What symptoms did you have that indicated you were sick?

I was awakened in the middle of the night (March 13) by my fiancée because I was uncontrollably shivering with a fever and, according to her, "breathing heavy and weird." She was IMMEDIATELY on the case and made sure I was set up in our furnished basement to isolate me from her and our kids.

How did you know it wasn't just a cold – what made it different?

After the third or fourth day of having a persistent fever that wouldn't break (and I was taking Tylenol to keep it lower) and feeling constant exhaustion, I had a feeling this was COVID. I was weak, feverish, foggy and lightheaded. My throat hurt constantly and I had a cough. At one point after using the bathroom (we didn't have a bathroom in the basement) I lost my balance and fell near the bottom of the stairs. It became harder to breathe. My fiancée has a friend who is a nurse who gave her a checklist of symptoms to look out for. On Sunday, March 22, I heard crackling in my chest and when I tried to breathe, it felt like I was taking sips...like my air would only come in and stop at the top of my chest.

Did you reach out to LVHN for diagnosis or testing (in person or virtual care)?

I went to get tested for the flu on March 13 because at that time they would only give people a COVID test if they first had a negative flu test. They ran the entire panel and I didn't hear back for a couple of days. As soon as I heard I was flu-negative I went for a COVID-19 test (March 21) I didn't receive the results of the COVID-19 test until after I was hospitalized.

How ill did you get with COVID-19? Were you hospitalized, and if so, for how long?

I checked in to LVHN (my fiancée's recommendation...she loves you guys) on March 22. I drove myself to LVH–Muhlenberg because we had our three kids with us and we didn't want to scare them with an ambulance or any talk of "emergencies." I was immediately put on oxygen, and for the next couple of days, doctors made every effort to get my O2 levels up. X-rays showed double pneumonia. When the oxygen failed, they came in and told me they were putting me on a ventilator. I gave the thumbs-up (I had ZERO idea what this meant practically.) Eight days later I awoke after what seemed like an eternity of strange, otherworldly dreams. I vaguely remember being extubated... or at least dreaming my way through it. Physical therapy followed for the next couple of days. My coordination was shot. The AMAZING, EXCELLENT, COMPASSIONATE, EMPATHETIC and PATIENT staff of nurses and doctors were so kind to me. They helped me with everything from using the bathroom, learning to eat again with utensils and brush my teeth again, to finally walking. This is all while I was wildly hallucinating, and sharing what I experienced with all. (cringe...that was BAD...and embarrassing... though the staff took it all in stride and didn't make me feel weird for it.) They are such GOOD people. On Monday, April 6, I was discharged.

Were you able to communicate with your family?

Yes! After I woke a nurse put me on Facetime with my fiancée. I learned later that the hospital staff was in communication with her on a daily basis while I was out, giving updates to my condition and assuaging her fears. When I could finally get my hands to work enough to use my phone, I texted and called home several times a day.

How did it feel to finally get discharged?

It was a relief. I wanted to get out of there (no fault of the facility, it was lovely, I just wanted to see my family.) Had a rather humorous exchange with a fantastic nurse when I "hypothetically, if I were to run how far would I get?" (at like 2 a.m., btw...as I said before, I was hallucinating a LOT) and she replied that I would topple over before I made it to the bathroom. We laughed a bit and at that point I decided that I would be good, dig into my rehab and wait until they said I could leave.

How was your day-to-day life and routine affected while you were sick with COVID-19?

Well, before heading to the hospital, I stayed in the basement and watched a LOT of

television. I had to drop out of school for the semester (I attend Arizona State University's online electrical engineering program) after my experience in the hospital (I missed a ton of work and I wasn't up for it at that moment.) A humorous situation was how my kids dealt with my isolation. They stayed away, and called me on the phone to talk, and when I came up to use the bathroom they shouted at me to "GET BACK IN YOUR HOLE!" That kind of thing sustained me, to be honest.

Did others in your family or friend group get sick with COVID-19 too?

A couple of my coworkers became sick as well, though not to the degree I experienced.

Do you have lingering symptoms since you recovered?

I don't sleep well anymore. I mean, I had issues with sleep before, but now I'm kind of constantly half awake. I had some PTSD when I got home...nightmares about what I saw while I was under...that has faded. It's been replaced by an inability to settle into sleep. I still have mental foggy. I have resumed classes after taking the summer off and I'm finding it MUCH harder to learn and retain information. Physically, I feel like I'm finally muscularly back to where I was, but exertion is harder on me. I took up running a couple of years ago and now, doing the "couch to 5k" program winds me completely.

Are you back to the things you normally do?

For the most part. I just do them at a different intensity than I used to. Slower and more methodical.

Is there anything you wish you had known prior to becoming ill to help prevent getting it?

Frankly, when I got it, we didn't know much about it at all. It was pre-mask, isolation and quarantine. I don't think I could have done anything different.

How can people do their part to help stop the spread of COVID-19?

Stay in the house when you can. Maskless contact with those you are living with only. Wash your hands! Wear a mask when you need to go outside. Keep at least 6 feet away from people if at all possible. Be wary of touching "very public" places (handrails, door handles, etc...basically all handles.) Be nice to people. Thank nurses and doctors

every chance you get. They are HEROES.

Take a look back at Chris's emotional reunion with his family after being discharged in April 2020>>

For more information and FAQs about COVID-19, visit LVHN.org/COVID19. Para obtener information en espanol, visite [Centro de ayuda para el COVID-19](#).



How Cervical Disk Replacement Eased Frank Berardelli's Unrelenting Nerve Pain

February 04, 2021

BY KRISTEN CHANLEY

For Frank Berardelli, 55, being active is a way of life. Berardelli, who played football in college, now coaches high school football and track. Off the field, he is an avid runner

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How Cervical Disk Replacement Eased
Frank Berardelli's Unrelenting Nerve Pain



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and strength trains four days a week. So, when he woke up to a pinched nerve in his neck in late February 2020, Berardelli worried it would affect his active lifestyle.

“Excruciating pain came out of nowhere, radiating from my neck down through my left shoulder all the way to my hand,” says Berardelli, a resident of South Abington Township, Pa. “I couldn’t sleep more than 20 minutes at a time, and nothing was helping.”

An MRI revealed a [herniated \(ruptured\) disk](#) in his neck, or cervical spine. Berardelli’s herniated disk pressed on a nerve, causing the pain, numbness and weakness he felt down his arm. He would need surgery to alleviate the pressure on his nerve.

Surgical options for a herniated disk

The standard surgery to treat disk issues is anterior (front) cervical fusion. In that procedure, the surgeon removes the disk through a small incision in the front of the neck. Then the vertebrae are fused together using a plate and screws.

A newer procedure, called cervical disk arthroplasty (replacement), offers an option to spinal fusion. The surgeon still removes the disk through an incision at the front of the neck, then replaces it with an artificial disk made of metal and plastic.

The benefits of cervical disk replacement surgery include:

- **More spinal mobility:** An artificial disk allows the spine to move more naturally than fusion.
- **Less surgery-related pain:** Since the implant is small, disk replacement is less invasive than fusion. It results in less pain, trouble swallowing and throat soreness following surgery.
- **Less wear and tear on adjacent disks:** Replacement avoids the long-term deterioration that may eventually occur in disks located above and below a fusion.
- **Quicker return to activity:** After fusion, a plate and screws hold the bones together while they heal, which may take months and requires activity restrictions. People can resume activities quickly after disk replacement.

Disk replacement surgery close to home

Berardelli assumed he'd need to go to Philadelphia for this type of advanced surgery. He was relieved, especially with the onset of the COVID-19 pandemic, to find a high-level surgeon nearby at [Coordinated Health Scranton Orthopedics](#), part of Lehigh Valley Health Network.

He met with [Christopher Henderson, MD](#), the only orthopedic spine surgeon in the Scranton area performing cervical disk replacement. "When I first saw Frank, he was writhing in pain," Henderson says. "I knew if I took the pressure off the nerve and replaced the disk, the pain would be gone, and he could get back to his active lifestyle quickly."

Henderson scheduled the procedure for March 24, just one week after meeting Berardelli and three weeks after the onset of pain. The surgery was successful, and Berardelli went home the same day to begin recovery.

Back in action after cervical spine surgery

Berardelli still cannot believe how quickly the nerve pain ended. "I woke up from the surgery with no pain," Berardelli says. "I kept expecting it to come back, but I've been completely pain-free and have full mobility in my neck. You wouldn't even know I had surgery."

Due to COVID-19 restrictions, Berardelli did not have physical therapy. Instead, he began walking daily and slowly strengthened his arm. "As an active guy and a coach, Frank was working out and lifting weights before the surgery," Henderson says. "He was able to ease back into those activities and rehab on his own."

Within a month, Berardelli was back to running and working out. In July, he ran a 5K. "I feel fantastic," Berardelli says. "It's amazing to know that we have top-notch, high-quality surgeons like Dr. Henderson right here, close to home."

Is cervical disk replacement right for you?

Cervical fusion is the most common surgery for severe disk herniation, but some people

are good candidates for cervical disk replacement. To be considered for disk replacement, you should have:

- No significant arthritis at the location of the herniated disk
- No significant disk collapse
- Good bone quality
- No deformity in the neck (loss of the normal c-shape)
- Stability at the disk level (no unusual movement)

If you are suffering from back or neck pain, visit [LVHN.org/spine](https://www.lvhn.org/spine) to learn more about how we can help you.



Should You Get the COVID-19 Vaccine if You're Pregnant or Breastfeeding?

February 10, 2021
BY KIRSTIN REED

There's a lot of excitement about [COVID-19 vaccines](#) in our community, and for good reason. These vaccines have been scientifically proven to be safe and effective.

Important questions have been asked regarding the vaccine for women who are

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Should You Get the COVID-19 Vaccine if You're Pregnant or Breastfeeding?



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pregnant, breastfeeding or planning to become pregnant. The COVID-19 vaccine development and regulatory approval is rapidly changing, so it's important to note that information and recommendations about these vaccines and their use in specific populations will continue to evolve.

We want to share the most current information to help you feel safe making your decision to receive the COVID-19 vaccine when it becomes available to you. [Elizabeth Flodin, DO, gynecologist and Chief of Gynecology with LVHN](#) – who also happens to be pregnant – made the decision to receive the vaccine after consulting the most up-to-date information.

Pregnancy is a risk factor for severe COVID-19 illness

Based on growing evidence, [Centers for Disease Control and Prevention \(CDC\)](#) now includes pregnancy as a factor that leads to increased risk for severe COVID-19 illness.

“Everything in health care is risk versus benefit,” Flodin says. “To me, the risk of getting COVID as a pregnant woman far outweighs any risk of the vaccine itself.”

Current data suggests that women who are pregnant and have COVID-19 are at increased risk for more severe illness than women who are not pregnant. If a pregnant woman with COVID-19 infection also has diabetes or is obese, she may be at even higher risk for severe complications from COVID-19.

Guidance from medical societies

Women who are pregnant, want to become pregnant, or who are lactating and breastfeeding, also can take into consideration the recommendations of leading medical societies. [The American College of Obstetricians and Gynecologists \(ACOG\)](#), [Society for Maternal-Fetal Medicine \(SMFM\)](#) and [American Society for Reproductive Medicine \(ASRM\)](#) all recommend that these patients be offered the COVID-19 vaccine.

No evidence that the vaccine causes infertility

These societies also recommend the vaccine be offered to patients undergoing fertility treatment based on [Advisory Committee on Immunization Practices \(ACIP\)](#) eligibility criteria. Since the vaccine is not a live virus, there is no reason to delay pregnancy

attempts because of vaccination or to defer treatment until the second dose has been administered.

“Women who had COVID-19 develop substances in their body that can cause an immune response to the virus,” Flodin says. “They develop the exact same substances when they get the vaccine. So, if the vaccine caused infertility, we would be seeing it in women who already had the virus,” Flodin says. “It’s just not true that the vaccine causes infertility.”

Speak with your health care provider

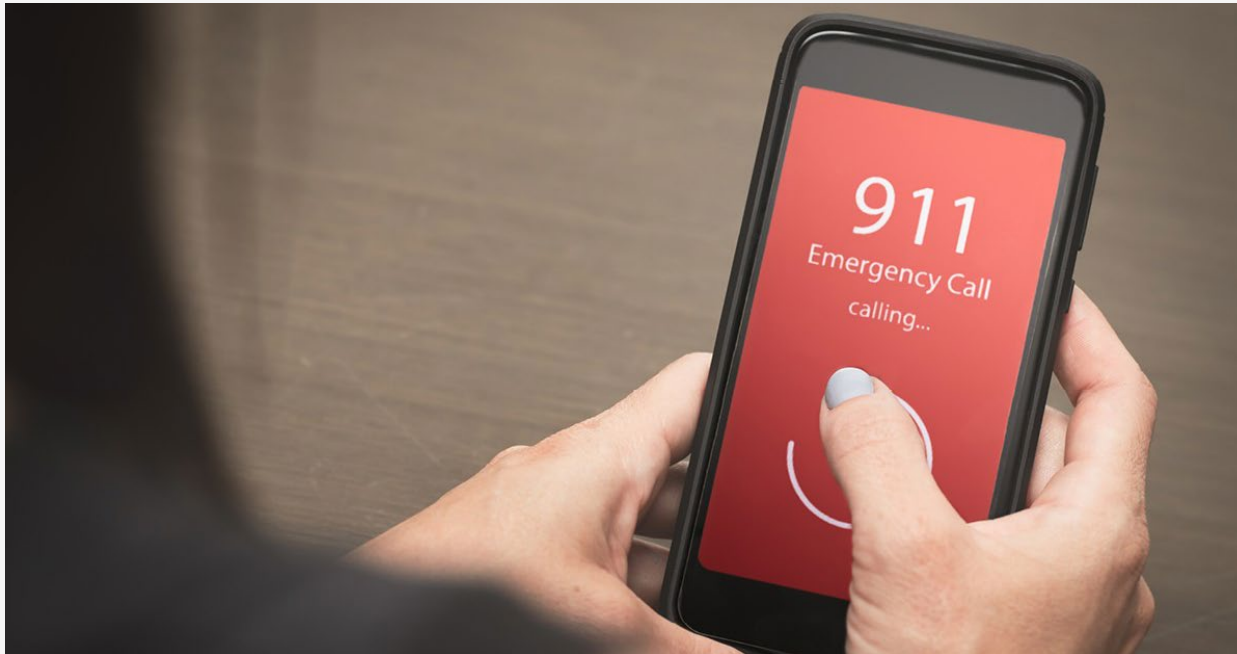
Your decision to receive the COVID-19 vaccine should be informed by the most recent evidence and a conversation with your health care provider. You should discuss potential benefits and unknown risks of declining or receiving the vaccine while pregnant, breastfeeding or planning to become pregnant.

MyLVHN is your path to COVID-19 vaccination

The quickest and easiest way to schedule your vaccination is through MyLVHN.

Everyone with a MyLVHN account is preregistered for a COVID-19 vaccine. You'll receive a notification when you are eligible for the COVID-19 vaccine and can schedule your vaccine appointment. If you do not have MyLVHN, sign up today at [MyLVHN.org](https://mylvhn.org) or download the free app at Google Play or through the Apple App Store.

To learn more about COVID-19 vaccines including FAQs and myth-buster videos, visit [LVHN.org/vaccines](https://lvhn.org/vaccines).



Are You Prepared for a Medical Emergency?

Take these steps to help stay calm in the chaos

February 10, 2021

BY KATIE CAVENDER

At work, we have fire drills. On a plane, we listen to safety protocols before takeoff. However, when it comes to our own health, we often don't have a plan. "Nobody can plan for every emergency," says Christopher Greb, operations manager with [Macungie Ambulance Corps](#). "But taking a few simple steps ahead of time could

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Are You Prepared for a Medical Emergency?



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save your life.”

Prepare now

Imagine experiencing a stroke. Among other symptoms, you suddenly have trouble speaking and even understanding others. Once emergency medical services (EMS) arrives, there is only a limited window of time to administer tissue plasminogen activator (tPA), a medication that dissolves blood clots. When time is of the essence, having the right information available can help EMS.

What you can do

Either utilize the Medical ID feature in the [Health app](#) on your iPhone or the built-in emergency feature on Android. If you don’t want to use a smartphone, keep a card in your wallet with the following information:

- Emergency contact information
- Medical history: include conditions currently being treated
- List of medications: include dosage and frequency
- Allergies
- Physician(s) and phone number(s)
- Preferred pharmacy
- Preferred hospitals

Other documents to have accessible include advance directives like a living will, power of attorney and a [Pennsylvania Orders for Life-Sustaining Treatment \(POLST\)](#) form.

In the eye of the storm

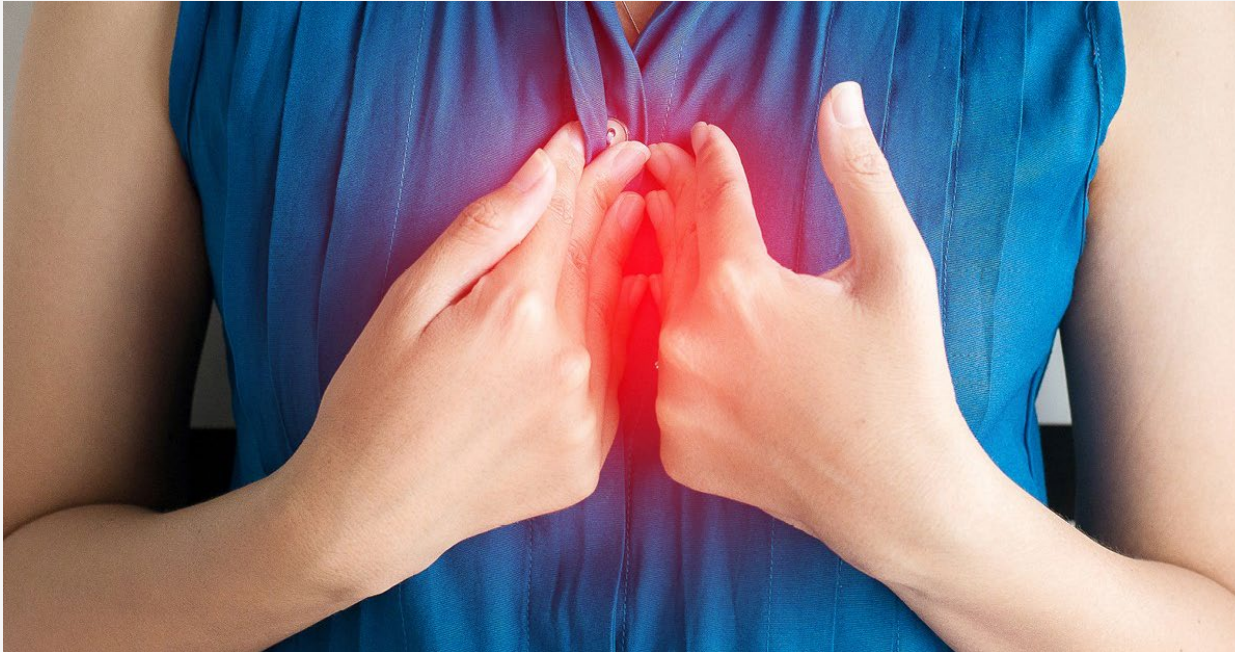
Emergency situations often feel chaotic. The first step is to call 911 and try to remain calm. “Ultimately the most important information to provide is your exact location,” Greb says. “Simply telling the dispatcher you need help at the mall is too vague.”

Listen to instructions from the 911 operator. “They will talk you through steps to help yourself or the person you’re calling on behalf of,” says emergency medicine physician [Jeffrey Kuklinski, DO, with LVPG Emergency Medicine](#). Before EMS arrives, take the following steps, if possible:

- Unlock doors
- Gather medications
- Secure pets
- Clear a path to the patient
- Gather belongings and medical devices that may be needed

Once EMS arrives, let them know your hospital preference. As a patient, you have the right to choose. “From there, the information gathered by EMS cascades to the entire emergency care team,” Kuklinski says.

Did you know? Apple's Health app now syncs with your [MyLVHN](#) patient portal data?



Looking for Relief From Acid Reflux?

February 09, 2021

Millions are burned by chronic acid reflux. Are you one of them? If over-the-counter or prescription medicines don't cut it, you should attend Lehigh Valley Health Network's (LVHN) virtual program. LVHN experts will discuss symptoms, treatment options and concerns about long-term use of proton pump inhibitors (PPIs).

Monday, March 1 | 6 p.m.

Registration and info: LVHN.org/refluxevent

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Looking for Relief From Acid Reflux?



Tweets by @LVHN



We're doing everything possible to make more vaccinations available to you. Recently, we provided evidence during a PA Senate Committee hearing that shows health systems such as LVHN are the fastest and best way to vaccinate the most people while supplies are limited. Watch now.



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Reflux program insights

At this virtual event, Paul Cesanek, MD, with [LVPG General, Bariatric and Trauma Surgery](#), and Hiral Shah, MD, with [Eastern Pennsylvania Gastroenterology and Liver Specialists, PC](#), will provide information about reflux, also known as gastroesophageal reflux disease (GERD), diagnostic testing and reflux medical management.

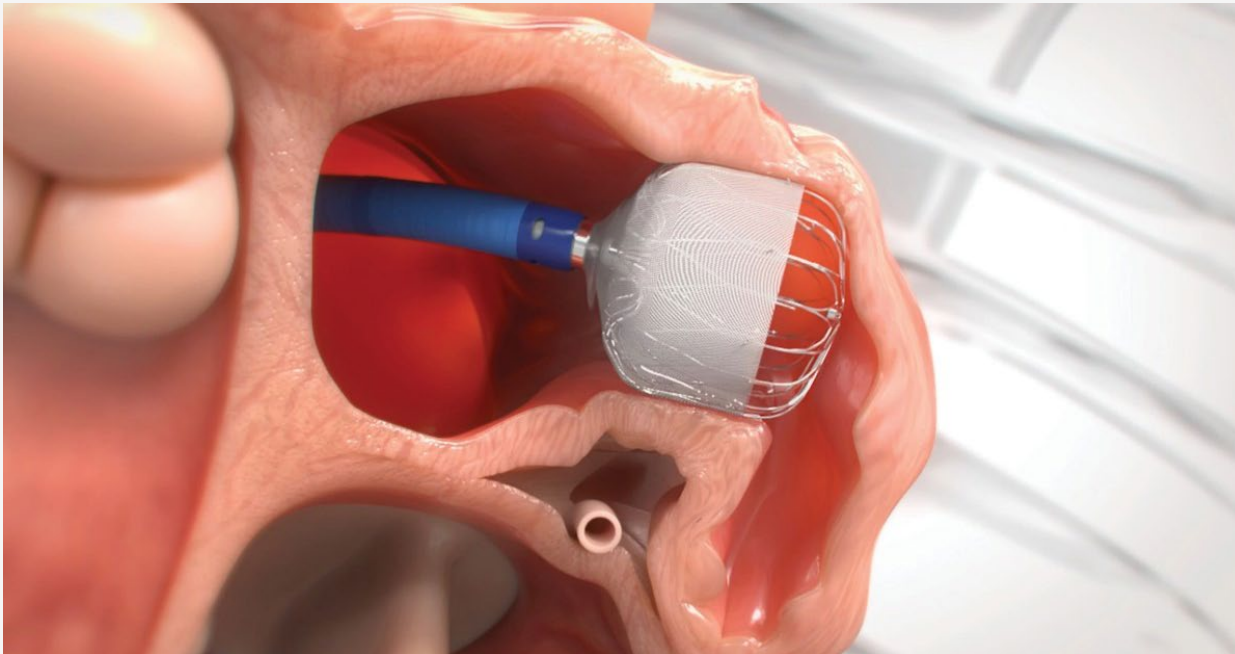
LVHN experts will cover:

- What is reflux (GERD)?
- When to see a specialist
- Lifestyle changes for reflux
- Medical management
- Diagnostic testing for reflux

Ready for relief?

Register for this virtual event at LVHN.org/refluxevent.





Lehigh Valley Heart Institute is First in the Region to Offer People with AFib WATCHMAN FLX

February 08, 2021

Even though many people may not be able to keep a beat, their heart should. When a person has an arrhythmia, his or her heart beats at an irregular rate or rhythm. One of the most common types of arrhythmias is [atrial fibrillation \(AFib\)](#), and for people with that condition WATCHMAN FLX can stand guard to prevent strokes. Lehigh Valley

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Tweets by @LVHN



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Heart Institute has implanted more than 100 WATCHMAN devices and now people with AFib can receive the latest version of the device – WATCHMAN FLX.

AFib and stroke risk

“With AFib the top chamber of a heart quivers and that causes blood to stagnate. The most common place is in the left atrial appendage (LAA) of your heart,” says [Babak Bozorgnia, MD, with LVPG Cardiology](#). Blood that stagnates will form clots, and when those clots become lodged in an artery in the brain, a stroke may occur.

“Traditionally AFib patients have been prescribed blood-thinning medications to reduce their stroke risk, but that also increases their risk of bleeding,” says Bozorgnia. “WATCHMAN FLX provides another option.”

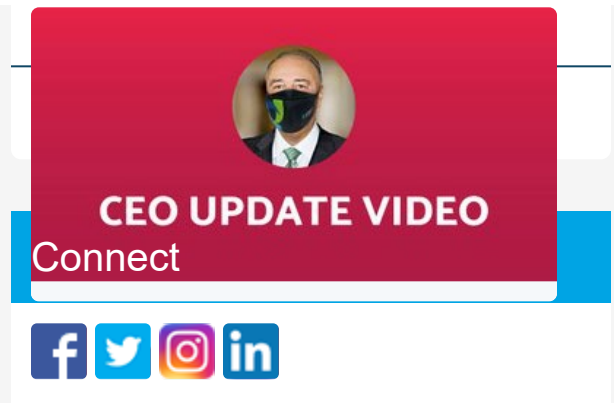
Why WATCHMAN FLX?

During an hour-long procedure, an LVPG cardiologist inserts a tube into the patient’s leg and then guides the WATCHMAN device to the heart. The umbrella-like device seals off the area where clots are likely to form, and the outcomes speak for themselves. Within 45 days of implantation 92 percent of patients are able to stop taking blood-thinning medications.¹ People typically stay one night in the hospital following their procedure and are able to go home the following day.

WATCHMAN FLX can fit even more anatomies than the original device. It also includes features that further increase the device’s safety.

Living worry-free

In 2014, Lehigh Valley Heart Institute implanted the first WATCHMAN device in the region, and it has protected that patient, Buzz Hill, ever since. Prior to the procedure Hill survived two strokes. “He was behind the wheel during one of his strokes,” says Buzz’s



wife, Carolyn Hill. “We weren’t sure he was going to make it.” The WATCHMAN device was a game changer.

When asked what he’s been up to since the minimally invasive procedure, Hill said, “Where should I start? I’ve been hunting, gardening, doing lawn care and household chores.” The retired history teacher is living life to the fullest. “We have a lot fewer worries now. We’re grateful for the WATCHMAN,” says Carolyn.

“Lehigh Valley Heart Institute implants more WATCHMAN devices than anyone else in the region,” says Bozorgnia. “We are highly experienced.”

Talk with an LVPG cardiologist to learn more about WATCHMAN FLX.

1. Holmes DR Jr, et al. J Am Coll Cardiol. 2014;64(1):1-12