



CAMBRIDGE  
MEDICAL  
CENTER

Allina Hospitals & Clinics

# Healthy Communities™

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MAGAZINE

Winter 2010



Robert Doohen, MD, orthopedic surgeon at CMC, checks the range of motion of Dave Carlberg's shoulder. Carlberg had surgery and physical therapy at CMC to repair injuries to his shoulder after a fall.

For patients like Carlberg, the next step is often a steroid injection into the shoulder to reduce pain and inflammation. But even that didn't solve the problem. Surgery was the next option. This is where Carlberg's case was a little different than most.

"Up to 80 percent of shoulder problems are treated without surgery," says Doohen. A magnetic resonance imaging scan (MRI) helps determine whether surgery is necessary. Tears of tendons, loose debris, arthritis and bone spurs may need to be repaired surgically.

Carlberg had shoulder surgery in May 2009. Doohen reattached a torn tendon, released the bicep and arthroscopically removed a bone spur in Carlberg's shoulder.

Arthroscopy typically leaves a few small scars and is easier to recover from than open surgery, which requires a longer incision. It was an outpatient procedure, and

—CONTINUED ON PAGE 2

## Shouldering the pain

**Y**ou don't have to be Brett Favre to be sidelined with shoulder problems.

A fall, or overuse from gardening, racket sports or other repetitive activities can cause tears, sprains, bursitis or fractures in your shoulder—all painful reminders of how important our shoulders are in our daily lives.

On an icy December day in 2008, Cambridge resident Dave Carlberg fell in the parking lot at work and "felt something go" in his right shoulder. When the severe pain didn't go away the next day, he went to Cambridge Medical Center (CMC) to have it checked out.

Carlberg went through the same process most people do when they experience shoulder pain.

"The first step is physical therapy," says Robert Doohen, MD, orthopedic surgeon at CMC. Physical therapists at Sister Kenny® Rehabilitation Institute – Cambridge develop a program of exercises to improve range of motion and strengthen the shoulder and its stabilizing muscles. Other modalities, including ultrasound and electrical stimulation, may be used.

### The next level

After an X-ray confirmed that no bones were broken in Carlberg's shoulder, he tried a physical therapy program without success.

visit us at [cambridgemedicalcenter.com](http://cambridgemedicalcenter.com)

### Inside:

- 2 Healthful breakfast recipe
- 3 Kids and tonsils
- 4 OB/GYN care at CMC



Physical therapists at Sister Kenny Rehabilitation Institute – Cambridge created a therapy program to help Dave Carlberg strengthen his shoulder and regain full range of motion after surgery.

## Shouldering the pain

—CONTINUED FROM FRONT PAGE

Carlberg went home the same day.

Carlberg says the surgery itself wasn't bad; he went back to work after five days. But keeping his right arm strapped in a special sling system 24 hours a day for six weeks was difficult, especially because he is right-handed.

After six weeks, he began physical therapy again.

"Physical therapy is key to regaining range of motion and strength, with or without surgery," says Doohen.

### Learning to move again

"The physical therapy team at CMC was great," says Carlberg. "They explained exercises, showed me how to do them, watched me do them and gave me a program to do at home.

"It was a long healing process, but I feel it was successful," he says. "Immediately after my fall, I couldn't even pick up my car keys off the ground. Now my goal is to

throw a football and baseball to my sons in the spring.


"I work for the city of Cambridge and really appreciated that I could have such high-quality doctors and staff right here in Cambridge."

After shoulder surgery, more than 80 percent of patients report full, pain-free use of their shoulders, and more than 95 percent note significant improvement.

### Should you see a doctor?

If you are injured and can hear a popping or tearing sound, see your doctor, recommends Doohen.

For aches and pains, avoid overuse, and rest the shoulder for a month, but maintain a full range of motion. If the pain doesn't go away after a month or if you feel locking or catching, see your doctor.

For more information,  see the *Healthy Communities* section at [cambridgemedicalcenter.com](http://cambridgemedicalcenter.com).

## Breakfast fruit wrap

### Ingredients

- 2 teaspoons "fruit only" strawberry preserves
- 1 tortilla, preferably whole-wheat
- 2 tablespoons reduced-fat ricotta cheese
- $\frac{3}{8}$  to  $\frac{1}{2}$  cup sliced fresh strawberries
- 2 tablespoons sliced almonds, toasted

### Instructions

- On a surface, spread preserves on tortilla. Top with ricotta cheese. Carefully top with sliced fruit. Sprinkle with sliced almonds.
- Starting from one end, roll tightly. Wrap in foil for neater eating.

*Variation: Spread tortilla with apricot preserves and use sliced fresh or canned, well-drained peaches.*

### Nutrition information

Makes 1 fruit wrap. Per serving: 231 calories, 9g fat, 2g saturated fat, 34g carbohydrates, 9g protein, 4g dietary fiber, 213mg sodium

Source: American Institute for Cancer Research

 For more healthful eating ideas, check out the Recipe of the Week at [allina.com](http://allina.com).



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# Kids and tonsils

When the two may need to go their separate ways

**G**etting your tonsils out—it used to be almost a rite of passage. You missed a bunch of school, spent several nights in the hospital and ate legendary amounts of ice cream.

Although kids haven't changed and they'd still welcome the ice cream, doctors are recommending this surgery less often than in decades past, reports the American Academy of Pediatrics (AAP).

Sometimes, though, removing tonsils is the best move.

## Cranky and sore

If you look in your child's throat with a flashlight, you'll see these oval-shaped pads of tissue, one on either side. Tonsils are part of the body's immune system, and they fight germs that enter the body through the nose and mouth.

Tonsils cause problems when they become inflamed, usually due to infection, a condition called tonsillitis.

According to the AAP, signs and symptoms of tonsillitis include:

- red, swollen tonsils
- white or yellow coating over the tonsils
- a sore throat
- swollen lymph nodes in the neck
- a fever.

Tonsils can also become enlarged, making it hard to breathe. Enlarged tonsils can cause trouble sleeping or even sleep apnea, a disorder in which breathing stops and starts repeatedly during sleep.

Snoring may be your first clue, and the end result can be a sleep-deprived, cranky child.

## Deciding on surgery

Tonsillitis caused by bacteria usually gets better with antibiotics, and enlarged tonsils may shrink on their own.

But when tonsil trouble affects a child's well-being, the approach is often to remove the tonsils.

"Every child is different, and the decision to remove tonsils should be made on a case-by-case basis," says Shari Graham, MD, family medicine doctor at Cambridge Medical Center. "If your child is having repeated throat infections or excessive snoring, discuss your concerns with your physician."

This outpatient surgery usually takes less than an hour, although an overnight stay may sometimes be necessary.

Adenoids—tissue high in the throat that is also part of the immune system—can cause similar problems. They are usually removed along with the tonsils.

## Life without tonsils

When tonsils are removed, the body's ability to fight infection is not harmed; other tissues in the body cover this function.

Children typically are healthier and also tend to sleep better, which can mean a happier child and relieved parents.



**Surgery may be advised when a child's well-being is affected by problem tonsils.**

## Preparing for tonsil surgery

It is nice to promise a cold treat after a tonsillectomy. And here are a few additional tips for preparing your child:

- Talk with your child about his or her feelings about the surgery, and offer reassurance. For example, assure the child that he or she doesn't need tonsils to be healthy.

- Explain that he or she will have a sore throat afterward but will eventually be healthier than before.
- Follow the doctor's instructions about eating and taking medicines before surgery.
- Stay with your child, as much as possible, before and after the surgery.



# Better health, better life for women

**T**here is a lot more to women's health than pregnancy. Premenopausal and menopausal counseling and treatment, well-woman care and screenings, treatment for incontinence, bleeding problems, and osteoporosis are also important issues.

There are a number of pelvic problems that some women feel embarrassed about or think are just part of aging, and they don't tell their doctor.

"Sometimes women come in with a condition that is so significant that we know it has been a problem for years," says Ross Anderson, MD, an obstetrician-gynecologist (OB/GYN) at Cambridge Medical Center (CMC). "If you have symptoms that are causing you discomfort, we can often help."

CMC now has a team of four OB/GYNs who have training and experience in solving women's pelvic health problems. There are many new treatments that don't require major surgery or downtime.

## Heavy or irregular bleeding

Heavy or irregular menstrual bleeding is a pelvic health problem that affects more than 10 million women. A normal menstrual bleeding cycle occurs every 24 to 35 days and lasts

between two and seven days. If you have to change pads more than hourly, the bleeding would be considered excessive.

"It's more than an inconvenience and not a normal part of aging," says Michelle Larson, MD, OB/GYN at CMC. "It can cause anemia, so women should see their doctor."

In rare cases, heavy or irregular bleeding may be caused by cancer, so Larson recommends a biopsy—a simple office procedure—if the patient is over 35.

Depending on the cause of the bleeding, birth control pills or an intrauterine device with hormones may be effective. A new treatment called ablation produces good long-term results for many women. During ablation, heat applied to the uterine lining causes it to slough off.

## Fibroids

Fibroids are noncancerous tumors in the uterine wall that can cause excessive menstrual bleeding, pelvic pain and frequent urination.

See Page 8 to learn about future Apple a Day women's health presentations.

"They are very common and often don't cause problems or require treatment," says Anderson. "If symptoms are significant, fibroids may be treated with medicines or surgery."

### Pelvic organ prolapse

When muscle tissue that holds pelvic organs in place becomes weak, the uterus, bladder or rectum can press on vaginal walls, causing discomfort, pressure and pain; a dropping or falling-out sensation; urine leakage; and bowel problems. As many as 50 percent of women who have given birth have some degree of this problem, called prolapse.

"Prolapse repair is something I have specialized in, and I enjoy reestablishing quality of life for women who have suffered from issues of prolapse," says Gail Lundeen, MD, OB/GYN at CMC. She notes that many patients who have been treated successfully initially thought that their symptoms were not treatable. She encourages women to have an evaluation.

### Incontinence

In a roomful of women ages 40 to 60, more than one-fourth of them are hoping that a good laugh isn't going to cause an embarrassing leakage of urine. Yet in a study reported by the National Women's Health Resource Center, more than 50 percent of women with stress incontinence symptoms had never discussed it with their doctors.

Biofeedback, bladder retraining, pelvic floor exercises, electrical stimulation and diet changes can improve or cure incontinence in 80 to 85 percent of women. For some women, surgery is the answer.

### Get a diagnosis

"Women who have been suffering in silence should come in for an evaluation," says Anderson. "We do all of these procedures and more at CMC."

**Go!** For more information, visit [cambridgemedicalcenter.com](http://cambridgemedicalcenter.com) and go to the *Healthy Communities* section.

## Another birth control option

Are you ready for permanent birth control but would like to avoid surgery?

If so, you may want to consider Essure®—a safe and highly effective method of sterilization.

"Even better, Essure does not require surgery and can be performed in the comfort and convenience of the clinic," says Michelle Larson, MD, obstetrician-gynecologist (OB/GYN) at Cambridge Medical Center (CMC).

The procedure is approved by the U.S. Food & Drug Administration and has been performed on tens of thousands of women around the world.

### What are the benefits?

Larson explains that there are a number of benefits for women who choose the Essure procedure for permanent birth control. Essure:

- is highly effective at preventing pregnancy
- requires no cutting into the body and leaves no scars
- requires no general anesthesia
- is performed in an office setting
- takes only 35 minutes on average
- is covered by most insurance plans
- has high patient satisfaction
- is hormone-free.

### How does Essure work?

Essure works by blocking the fallopian tubes to prevent pregnancy. During the procedure, tiny, flexible coils called micro-inserts are passed through the body's natural pathways (vagina, cervix and uterus) and placed in each fallopian tube.

During the three months following the procedure, your body and the micro-inserts work together to form a tissue barrier (like scar tissue) so that sperm cannot reach the egg. This prevents you from becoming pregnant.

For more information about Essure, schedule a consultation appointment with a CMC OB/GYN to see if this procedure is right for you.



CMC has a team of four obstetrician-gynecologists to provide maternity and gynecology care for women: (from left) Michelle Larson, MD; David Hovinen, MD; Gail Lundeen, MD; and Ross Anderson, MD. They see patients in the clinic and perform surgeries and provide maternity care at the hospital.



# Health care support that puts patients first

## Allina's Care Navigation Help Desk

**A**llina's Care Navigation Help Desk provides personalized health care support to patients and their families.

"The Care Navigation Help Desk is one way the health care team at Allina works to provide seamless care to patients," explains Gayle Mattson, president, Allina Home & Community Services.

"When you or a loved one has many medical needs, trying to determine how to get help and what services exist can be difficult," Mattson says. So the Care Navigation Help Desk staff steps in to help. Registered nurse and social worker care navigators provide an assessment to determine what needs

**Care navigators help connect patients with care and services.**

a patient might have and how to connect them with the right care and services. Resources offered include home health care, home oxygen and medical equipment, hospice, resources for people with advanced illnesses, life care management, private caregiving, and housing referral and placement.

### Julie and Jane's story

When Julie was diagnosed with stage III lung cancer, she and her sister Jane weren't sure what the future would hold. In subsequent months, Julie's health continued to decline, and her doctor recommended that she quit chemotherapy because of the side effects she had from the treatment. Jane thought Julie seemed depressed and that they both needed help figuring out what to do next.

That's when Jane went online to look for help and found information about Allina's Care

Navigation Help Desk. Jane called and talked to a registered nurse care navigator, who offered to work with Julie's doctor to get a referral for palliative care.

A palliative care nurse visited Julie at home three times over the summer to care for her and talk to her about her condition. When the time was right, the palliative care nurse recommended that Julie begin hospice care.

"Ever since Julie went into the hospital, we've been glad we're hooked up with Allina," says Jane. "They've been able to help with home oxygen, palliative care and now hospice care. Not every health system has all those services."

**For more information**  
about the Care Navigation  
Help Desk, go online to  
[allina.com/care](http://allina.com/care) or call

**651-635-9173 or  
1-800-261-0879**

## Primary and specialty care



### Clinic locations

#### Cambridge Medical Center

701 S. Dellwood St.  
Cambridge, MN 55008  
763-689-8700  
1-800-252-4133

#### Allina Medical Clinic – North Branch

38986 14th Ave.  
North Branch, MN 55006  
651-674-0055

## Same day care



### Same Day Clinic

#### Cambridge Medical Center

701 Dellwood St.  
Cambridge, MN 55008  
763-689-7820

Monday-Friday,  
8:30 a.m. to 7:30 p.m.  
Saturday: 8:30 a.m. to 5 p.m.  
Sunday: 11:30 a.m. to 5 p.m.

## Emergency care

IN CASE OF EMERGENCY,  
CALL 911.



### Hospital locations

#### Cambridge Medical Center

701 S. Dellwood St.  
Cambridge, MN 55008  
763-689-7700  
1-800-252-4133

#### Abbott Northwestern Hospital

800 E. 28th St.  
Minneapolis, MN 55407  
612-863-4000

Patients have the right to choose their providers for primary, urgent and emergency care. This listing may not include all medical providers in your area.

## MyChart Your secure, online health connection

With our electronic medical record, information from your doctor and hospital visits and test results are available to Allina's network of primary care providers, specialists and hospitals. MyChart also allows you to schedule appointments, request prescription refills, review your health history and more—online, anytime! For more information, visit [allina.com/mychart](http://allina.com/mychart).

## Health briefs

**Sing while you scrub** Next time you wash your hands, sing "Happy Birthday"—twice—as you scrub. You may not win any awards, but that is about how long it takes to get your hands clean. Frequent handwashing can protect you from illnesses such as colds and flu.

**Go!**

For more information about flu prevention, go to [allina.com/flu](http://allina.com/flu).

—Centers for Disease Control and Prevention

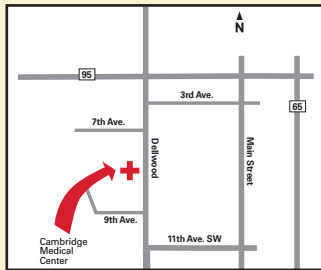


**Be a safety sleuth** A used child safety seat may seem like a bargain, but you'll need to do some detective work to make sure it is a safe choice. If a seat is old, has been recalled, has missing parts or the instruction manual is missing, put your child's safety first—buy a new one. Search for safety seat recalls online at [www.recalls.gov](http://www.recalls.gov). See Page 8 for a CMC car seat safety class.

—American Academy of Pediatrics

## How to find us:

701 S. Dellwood  
Cambridge, MN 55008



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U.S. Postage  
**PAID**  
St. Cloud, MN  
Permit No. 2260

701 S. Dellwood  
Cambridge, MN  
55008

## Mark your Calendar

Cambridge Medical Center (CMC) invites you to a health-promoting class or seminar. For more information, visit [cambridgemedicalcenter.com](http://cambridgemedicalcenter.com) or register by calling the CMC Education Department at 763-689-7780.

### Phone numbers changing Jan. 16

A new phone system will be installed at CMC on Jan. 16. Many phone numbers will change from a 689 prefix to a 688 prefix. If you get a "fast busy signal" when calling a 689 number, try using 688 instead. The medical center's main numbers (763-689-7700 and 763-689-8700) will not change.

### CANCER RESOURCE CENTER

The Harbor Room is filled with resources for cancer patients and their loved ones. Call 763-689-8415 for hours and activities.

### CPR AND FIRST AID

Two- and four-hour classes offered at various times

Basic life support recertification classes for health care providers are offered throughout the year. Call CMC's Education Department at 763-689-7780, ext. 1, for details about first aid or other basic life support class availability. Minimal charge.

### DIABETES AND NUTRITION EDUCATION

For more information, call 763-689-7775.

### Diabetes Self-Management Training

For people diagnosed with diabetes.

### The Winning Weigh Foundation Room

For people diagnosed with prediabetes, impaired fasting glucose, impaired glucose tolerance or dysmetabolic syndrome. Cost is often covered by insurance. Check with your insurance company before registering.

### CHILDBIRTH CLASSES

#### Prepared Childbirth

Wednesdays, 6-9 p.m.

- Jan. 6, 13, 20, 27
- Feb. 17, 24, March 3, 10
- March 31, April 7, 14, 21

Using the Lamaze® approach to prepared childbirth, the classes focus on relaxation and breathing for labor and delivery. A tour of the Maternity Care Center is included. \$75 (\$50 if delivering at CMC).

#### Fast Track Prepared Childbirth

Jan. 9 or April 10

9 a.m. to 5:30 p.m.

\$75 (\$50 if delivering at CMC).

### JOINT REPLACEMENT SURGERY

#### Monthly classes

##### Foundation Room

A class for CMC patients anticipating knee or hip replacement surgery. Learn how to get ready for surgery and how to prepare for a successful recovery. Class is taught by an orthopedic nurse. Call for dates and times. Free.

### PARENTING CLASSES

#### New Baby Care

Wednesdays, Feb. 3, March 17, April 28

6-9 p.m.

##### Foundation Room

Learn the basics of baby care, such as bathing, diapering, swaddling, cord care, infant CPR and more. \$20 per couple (free if delivering at CMC).

#### Car Seat Safety

Tuesdays, Jan. 5, Feb. 9, March 16, April 20

5:30-6:15 p.m.

##### Dining Room B

This class, taught by child-passenger safety technicians, will focus on how to safely position your child in the car seat, when to transition to a larger seat and tips for proper seat installation. \$15 per couple (free if delivering at CMC).

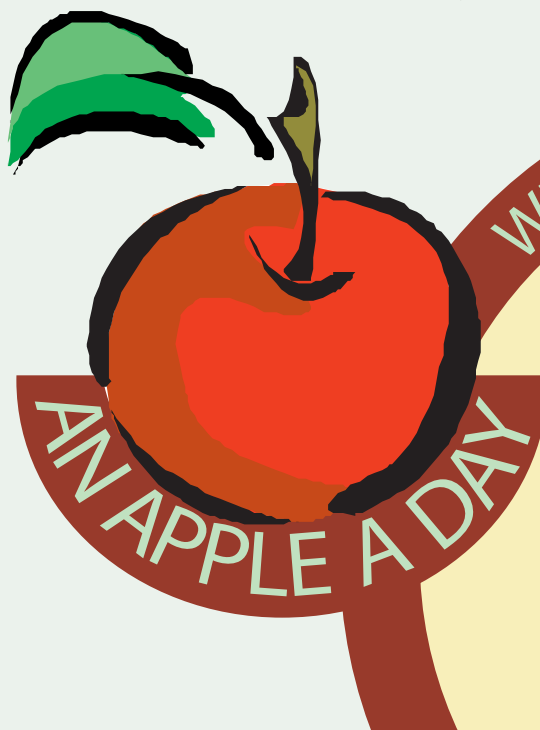
#### Breastfeeding

6:30-7:30 p.m.

Jan. 5, Feb. 9, March 16, April 20

##### Dining Room B

Get your breastfeeding off to a good start. The course is taught by a certified lactation counselor. \$20 per couple (free if delivering at CMC).



Mondays, 6:30-8 p.m. Foundation Room

Reservations requested.

Call 763-689-8419.

#### Feb. 15: Women and Heart Disease

Presented by Elizabeth Grey, MD, cardiologist with the Women's Heart Health Program at the Minneapolis Heart Institute.

#### March 15: Sleep Disorders and Treatment

Presented by Margret Lenarz, MD, director of Sleep Services at CMC.

#### April 19: Women's Health Issues

Presented by Michelle Larson, MD, obstetrician-gynecologist at CMC.