

Healthlines



Orange City Area Health System

INTEGRITY • INNOVATION • INSPIRATION



Message from Marty -by Marty Guthmiller, CEO

At times it seems like “winning” is all that matters in our society today. The goal is to win at all costs, regardless of which side of the “right/wrong ledger” it falls. Do I believe that? Well ... it depends on the definition of “winning.”

If winning is defined as serving the community, treating our staff fairly, promoting a healthy and healing culture, and being good stewards of the resources we have – then yes, I believe our goal is to “win the game” because there really are no losers.

Most people understand that there are offensive and defensive strategies to a game. You need both to be a balanced team and increase your odds of being successful. Sometimes timing is critical. Sometimes it’s more of an art than a science.

Course correction – or game plan modification – needs to occur as well, as time unfolds and reveals a new or different set of circumstances.

OUR GAME PLAN
FOR 2023

At Orange City Area Health System we have a game plan referred to as our Strategic Plan. It includes a blend of offensive and defensive initiatives intended to best fulfill our mission as an organization serving the health and wellness needs of this region.

An example of an offensive strategy is the addition of various new technologies in radiology, including a wide-bore MRI, a 64-slice CT scanner, and new ultrasound systems (see page 4).

An example of a defensive strategy is the preservation of cash reserves in the event they are needed in the future, perhaps unexpectedly.

As important as the strategy we employ, is the environment in which it occurs. We call that environment ... “culture.” It is akin to operating software on a computer that is critical, but always operating behind the scenes.

In fact, there is a famous Peter Drucker quote that says “Culture eats strategy for breakfast.”

about this photo

Meet the Korver men. Patriarch Casey Korver is flanked by his son Lyle, grandson Travis, and great-grandson Davis.

Avid golfers, they are pictured here on the campus of Prairie Ridge Care Center, which is across the road from Landsmeer Golf Club. (Note family matriarch Gladys Korver in the background!)

Casey and his wife Gladys are residents at Prairie Ridge. Hear about their experience there in the Senior Living insert inside this newsletter.

A joyful *fertility* and birth story



Kayla and Ross Groeneweg welcomed baby Kora Rose on February 9. Dr. Harrison Hanson journeyed with them through their fertility, prenatal, and birthcare experience.

M My husband and I started the Creighton model of fertility after 8 months of trying to become pregnant. I first heard about this model after moving to Orange City and was drawn in by how well it aligned with our life values. I loved learning the Creighton model because I learned more about my body and how God created fertility. Our teacher was so gracious and kind during the learning process and the team stayed so positive during the highs and lows of figuring out how to grow our family. We joyfully share that the Lord provided a beautiful daughter through the help of the Creighton model! We now continue to use the model to family plan!



FertilityCare™ practitioners Anita Schneider, Liz Kruse, and Rhonda Heller (shown here consulting with the Groenewegs) offer personal, confidential one-on-one sessions with women and couples regarding the Creighton Model, a medically-supervised program for achieving or avoiding pregnancy.



Are you hoping to achieve a pregnancy? Or are you looking for a natural way to avoid pregnancy? Do you have concerns about hormone issues? The Creighton Model Fertility-Care™ System (CrMS) is a great way to get started! The Orange City Area Health System FertilityCare Center, located within Orange City Area Health System's family medicine clinic, is a medically-supervised program available for learning the Creighton Model.

learn more



Effectiveness of the CrMS and NaProTECHNOLOGY

- 99.5% effective (perfect use) and 96.8% effective (typical use) in avoiding pregnancy. This is as effective as the birth control pill.
- On average is more successful than In Vitro Fertilization for assisting infertile couples, and does not result in early abortions or frozen embryos.
- Multiple pregnancy rates are 10 times lower than that with artificial reproductive technologies.
- 95% success rate for treating PMS.
- 95% success rate for treating postpartum depression (PPD).
- Has cut the prematurity rate from 12.1% to 7%.

Real solutions to real problems

- Infertility
- Menstrual cramps
- Premenstrual syndrome
- Ovarian cysts
- Irregular or abnormal bleeding
- Polycystic ovarian disease
- Recurrent miscarriage
- Postpartum depression
- Prematurity prevention
- Hormonal abnormalities
- Chronic discharges



For an appointment with Dr. Schoenfelder or Dr. Hanson in our fertility/family medicine clinic, call 712-737-2000.



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Welcome!



**General Surgeon
Dan Locker**

We welcome Dan Locker, M.D. to our surgical services team.



**Family Doctor
Taylor Dreise**

We welcome Taylor Dreise, D.O. to our family medicine, emergency medicine, and sports medicine team.

Joining us
in 2024



**Family Doctor
Brandon Vander Stoep**

Meet our *surgery* team

Whether you need “general surgery” – hernia repair, gallbladder surgery, C-section, colonoscopy, lumpectomy, and other important procedures – or a specialty surgery including orthopedics, cataracts, ear-nose-throat, and more – our Surgical Center offers safety, comfort, and state-of-the-art technology, served by a team of skilled



**Meet our General Surgeons
Dan Locker, MD, Brent Nykamp, MD, and Steve Locker, MD**

surgeons, techs, nurses, and anesthesia professionals. Our three general surgeons work closely with your family doctor to provide optimal care, close to home. And whether you need a hospital stay in our award-winning hospital, or can go home the same day, we have an onsite pharmacy and consulting clinical pharmacists and a commitment to trusted post-surgery follow-up from your family medicine and surgical partners.



Our dedicated surgical technologists and perioperative nurses provide skilled and compassionate patient care before and after your surgery.



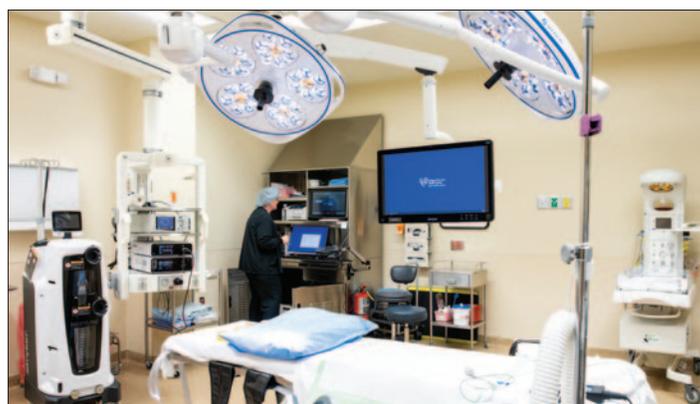
**Anesthesiologist
James Jeltema, DO**



**Certified Registered Nurse Anesthetists
David McFarland and Dustin Schuur**

Orange City Area Health System is the first facility in the nation to install Stryker's new Connected OR Lite integration platform (COR Lite).

Stryker's COR Lite integrates the operating room with native 4K video routing and a centralized point of control for Stryker surgical devices. Its small design reduces the equipment footprint in the OR, providing more space for the surgical staff to safely and efficiently care for patients. The primary focus of the COR



Lite design is to increase efficiency with an intuitive user interface and auto-populated surgeon profiles with device preferences, maximize control by providing central points of control with Stryker's 1688 camera head and the COR Lite touch panel, and provide a scalable solution with easy upgrades, multiple install options, and minimal infrastructure requirements. This first-in-the-nation implementation allows our team to seamlessly capture, record, print, and securely send surgical images and videos directly to the patient's chart.

A commitment to ensuring that you have access to the **best technology in the region** means we continue to invest in the tools needed for diagnosis, treatment, safety, and well-being.

High tech

We invested in and installed some pretty awesome screening technology in our Radiology department this past year, including a wide-bore Signa Voyager MRI, a Revolution EVO Gen 3 CT scanner, and the next level in ultrasound technology – all to provide better imaging tools for improved patient outcomes.

GE Voyager MRI

- Larger bore (opening the patient lies in) to accommodate more of our patient population. The wider opening allows us to scan larger patients comfortably.

- Soft coils – rather than the former plastic ‘cages’ used to focused body parts being imaged, a softer blanket-like coil is used for most imaging. This enhances patient

comfort as well as provides ‘extra’ room as the soft coil conforms to the patient’s body better.

- Faster scan times – due to improved software and the use of artificial intelligence technology, scan times are nearly 40% less per scan.
- Sharper images – image clarity is sharper with state-of-the-art imaging technology that clears up grainy image ‘noise’ for beautiful images.



“We are so fortunate at OCAHS to have a strong commitment to bring the best imaging technology to our community, most recently with the installation of our new CT and MRI machines. This has the obvious benefit of improved imaging quality which I have already seen, but also faster scan times and a better patient experience. It’s also enabled us to perform new exams, such as lung cancer screening and calcium-scoring heart CTs.”

- Dr. Jameson Guthmiller, Radiologist



GE Revolution Evo CT

- Increased speed for 4x faster scan times from the previous scanner
- Image quality is enhanced with the use of Artificial Intelligence software, technology capabilities, and less

patient motion due to the speed of the scan

- Lower radiation doses per scan by at least 50%

This new CT also allows for new services to Orange City Area Health System including lung cancer screening (see sidebar) and Cardiac Calcium Scoring. Cardiac calcium scoring is a short CT of the heart region that measures calcium buildup in the vessels supporting the heart function. A higher level of calcium may be an early predictor of heart disease and/or heart attack. To date, 66% of those tested at OCAHS are normal while 34% indicate moderate risk of heart disease.

Talk to your healthcare provider regarding important screenings for your stage of life.



CT Lung Cancer Screening

The American College of Radiology states that “Annual lung cancer screening with low-dose CT in high-risk patients significantly reduces lung cancer deaths. This screening can identify cancers at an early, treatable, and curable stage. Given that the American Cancer Society predicts 135,720 lung cancer deaths this year, more widespread screening could save 30,000-60,000 lives in the United States each year.”

This new technology at OCAHS involves a short scan that helps detect early signs of lung cancers in patients that qualify as a higher risk for lung cancer.

Criteria for this test:

- Age 50-77, with no signs or symptoms of lung cancer
- Current smoker, or one that has quit within 15 years
- Smoking history of 20 pack-years or more (1 pack year = one pack per day for one year)

SENIOR LIVING

*a continuum of care
starts here*



Kanaal Huis
55-Plus Condos



Landsmeer Ridge
Retirement Community

Prairie Ridge
Care Center



**Our tagline “A lifetime of care starts here”
is more than just a mantra.**

It’s a mission.

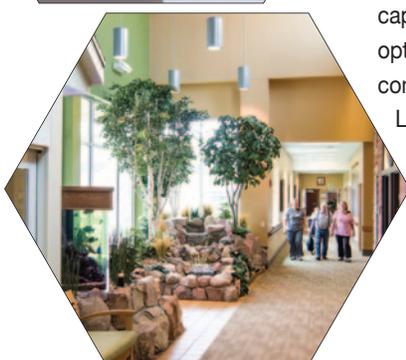
No matter what stage of life you’re in, Orange City Area Health System is your trusted partner and provider for comprehensive healthcare services ... for a lifetime. And our commitment to a

lifetime of care is not contained within our four walls (of our four clinics and hospital). It reaches out to the communities we serve – the community you call home. With home health services. Emergency medicine. Outreach and in-house partnerships with specialty medical providers. And “senior living” facilities, services, and amenities.

Our Senior Care Campus on the north edge of Orange City houses Landsmeer Ridge Retirement Community and Prairie Ridge Care Center. Landsmeer Ridge includes Assisted Living and Independent Living apartments, and a ton of amenities to create a comfortable, socially-rich environment for seniors at many stages of their “golden years.” Prairie Ridge is a nursing home facility that includes four cottages (one a memory care unit) serviced by nursing and nurse aide staff, and devoted to quality of life and a sense of “home” for those who need this level of care.

With an aging – and growing – population in the region, both of these senior living communities are at capacity, with waiting lists for tenants and residents. One way we are helping to extend “senior living” options, and perhaps slow the demand for the more advanced-care services, is a new “55-Plus” community called Kanaal Huis.

Learn more inside. Or for more information, attend one of our community forums, where we address the challenges – and opportunities – for senior living and care in our community.



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peace of mind, quality of life

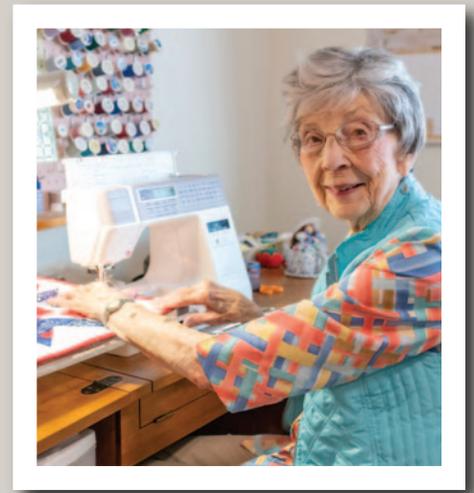
Landsmeer Ridge Retirement Community was built in 1999 on our Senior Care Campus at the north edge of Orange City. It is a unique retirement community for those age 62 and above, offering a relaxed, carefree living environment featuring 36 Independent Living and 28 Assisted Living apartments.

The one- and two-bedroom Independent Living apartments are in close proximity to the 34 attached garages that tenants may choose to rent. The one-bedroom and studio Assisted Living apartments are near our health office.

Amenities include comfortable sitting areas, pleasant dining rooms, Treat Shoppe, hair salon, library with computers, whirlpool, and more.

The 13-acre campus is ideal for walking the paved path around our Senior Care Campus, riding one of our adult trikes, playing shuffleboard or horseshoes, riding through the monarch habitat, observing the growth of our young orchard, or just sitting in a patio area enjoying the weather and the view.

Tenants at Landsmeer have priority placement into Prairie Ridge Care Center should the need arise for skilled nursing care.

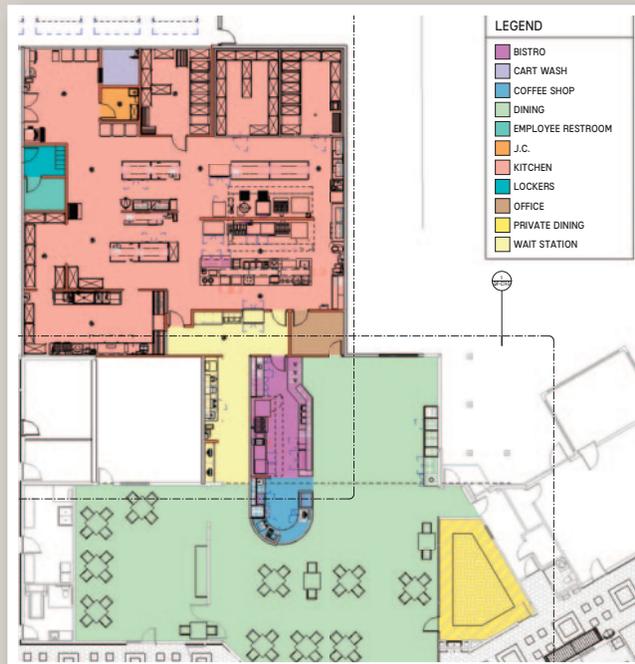


Meet Gladys Greving

Gladys, 96, grew up on a farm south of Hull. After attending Central College, she and her husband Clarence, a pastor, served in churches in Newkirk, Michigan, Minnesota, and then Alton, where they retired. The couple was shown plans/blueprints of Landsmeer Ridge when it was being built, and they moved into a two-bedroom apartment there in 2006. After only a year, Clarence moved into a nursing home, and Gladys moved into a one-bedroom unit at Landsmeer after he passed away. Gladys loves to sew and quilt, and is always working on a puzzle in her room. She loves the food – especially the broasted chicken – and once served on a committee that helped plan the meals for the tenants. “I can hardly believe I’m fortunate enough to live here,” she says. “I have everything I could possibly need.”

Landsmeer, “the next 25”

One way to help delay the need for skilled nursing care (e.g. Prairie Ridge Care Center) for our seniors is to expand some services at Landsmeer Ridge. With Landsmeer reaching its 25th anniversary as a senior living option for our region, we are now “re-tooling” the facility/campus for “The Next 25.” This includes adding four new Assisted Living one-bedroom units along with various improvements in terms of form and function. An extended “Main Street,” new bistro and coffee shop, spacious multi-function community room, and totally-renovated kitchen and dining areas will expand not only the services and amenities, but enhance the experience for our tenants and their families. “The Next 25” will begin in late 2022 or early 2023, with a completion expected a year later.



The adjacent floor plan details the new kitchen (orange) and the re-configured formal and informal dining areas (green), along with the bistro/coffee shop (purple/blue).

a place to call home

Prairie Ridge Care Center was built in 2013, joining Landsmeer Ridge on our Senior Care Campus. Prairie Ridge is an 89-bed Skilled Nursing facility which includes an 11-bed memory care cottage.

Licensed nurses are on duty around the clock, attending to the medical concerns of each resident as detailed in their individual care plans. Certified Nurse Assistants (CNAs) provide for each resident's personal care needs and provide therapy as directed by a licensed physical therapist. Hosts/hostesses, the activity department staff, food service, maintenance, and housekeeping staff all serve together to be actively involved to make life for each resident as pleasant and comfortable as possible.

Prairie Ridge holds to a strong commitment of changing the culture of a skilled nursing facility from a medical model in which nursing tends to dominate life, to a home model in which the activities the residents want to do dominate life – and nursing undergirds that.



Meet Casey and Gladys Korver

Casey, age 91, and Gladys, 90, both grew up in this area, and knew each other a bit through the church their families attended. Gladys invited Casey to a rollerskating party; Casey reciprocated with a request for a date and in Casey's words, "The rest is history." The Korvers started their family in Orange City, but then lived in Pipestone, MN, for 31 years, where they raised their three daughters and two sons. In 1996 they retired back to their old stomping grounds of Orange City and settled into a condo on the east side of town. In March, 2016 they moved into one of the newly added-on apartments at Landsmeer Ridge Retirement Community. In May of 2021 it became necessary for Gladys to move to Prairie Ridge Care Center; Casey remained at Landsmeer Ridge until he too moved to PRCC in February, 2022. They enjoy having visitors, playing Rummikub and Bingo, listening to concerts, and declare that they are "very content." They appreciate the friendly staff whom they credit with being "willing to help out in every situation." When children with their spouses, thirteen grandchildren and seventeen great-grandchildren all gather, it's quite a crowd!



Learn more

ohealthsystem.org/all-services/senior-care/



Our Senior Care Campus

Prairie Ridge Care Center

Landsmeer Ridge Retirement Community



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1000 Lincoln Circle SE, Orange City Iowa

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Family medicine clinics in Hospers, Orange City, Paullina, and on the campus of Northwestern College.

SENIOR LIVING

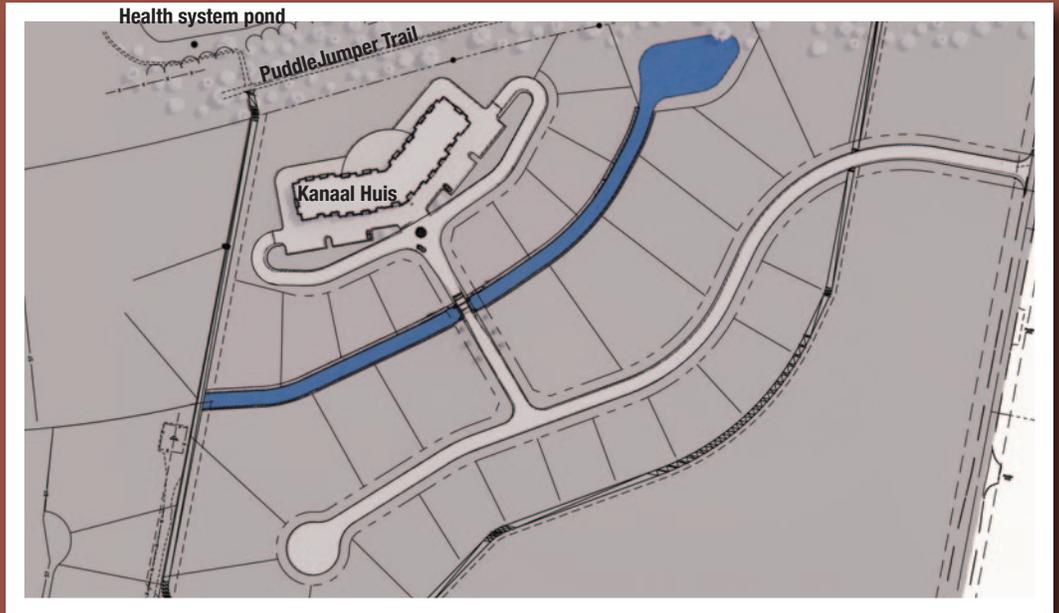
a continuum of care starts here

There are some current trends affecting how “seniors” select housing as they move through the empty nest, retirement, and then potentially assisted-living-type stages of life.

While many or most 55+ adults will opt to “age in place” as long as possible, there is a desire among this population to move from single-family homes to a more congregate setting to “downsize” in terms of property care and maintenance. There are some real benefits to this type of housing, namely the social aspect – a sense of community and connection – plus safety and security, and a host of accessible amenities.

According to Grand View Research, “Active adult housing is purpose-built multifamily housing for younger seniors and has an emphasis on community space and activities. The living preferences of baby boomers are changing, as this population wants to stay independent and lead an active lifestyle. Post-retirement they prefer to relocate to communities that have residents with shared values – and not senior living or assisted living facilities.”

As part of our mission to provide “a lifetime of care,” including senior living options, Kanaal Huis will not only give the 55+ adults a place to thrive as they journey through their senior years, but it will hopefully free up single-family homes in the communities we serve – opening up housing opportunities for the next generation.



The Canals – a 20-acre site south of the PuddleJumper Trail – is a joint venture with Orange City Area Health Foundation and Vision Builders. It will consist of single-family homes, twin homes, and a 36-unit condominium called Kanaal Huis that will be owned and operated by our health system foundation. This new housing option extends “senior living” opportunities, and hopefully alleviates some of the high demand – and wait times – for Landsmeer Ridge Retirement Community residency.

More information will be shared through a series of community forums, a Facebook page, and other venues as the project gets underway in Fall 2022.



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A “total healing environment” means more than a beautiful, light-filled building or the best technology. It means personal, skilled, compassionate, patient care. Every day.

High touch

Ezra's story

-by his mother Briana Kraayenbrink

After being a waiting adoptive family for over two years, we finally received the call in April of 2020 that we were matched with our son! Before we received the call, we knew that he had Tracheoesophageal Fistula (TEF) and that he had the repair surgery a few days before we received his profile and that he was recovering well from the surgery. TEF is when the esophagus is not fully connected to the stomach. We were told he would be off the ventilator and oxygen when we would get to Florida to see him.

When we met Ezra for the first time we immediately fell in love with him! Little did we know how long of a medical journey we were about to face. Ezra ended up having a hard time getting off the ventilator, and we found out he had tracheomalacia where his trachea was too floppy to stay open on its own, and that it would need time to get stronger. We were told that a trach and ventilator would be the best option for him at this point.

My husband and I spent two months in Florida with Ezra until my husband had to return home for work. I stayed in Florida by myself with Ezra for another two months. I spent many hours trying to figure out how we were going to get Ezra home. We were told Ezra was not able to go home by vehicle for a few months, and the only way would be to do a medical flight. Insurance would not cover the flight as it was not a medical necessity, because both hospitals could provide the same level of care.

By God's will, we raised enough money for the medical flight. We were now able to be an hour away from home instead of 24 hours away from home.

Ezra ended up spending another five months at that hospital until he was discharged home, February of 2021. After being discharged from the NICU, we took Ezra to therapy at the hospital an hour away once a month.

It came to a point that we needed something closer and more frequent therapy for him. I asked others who they recommend for pediatric therapy and I was told by a few individuals, “Orange City Area Health System provides the best pediatric therapy!”

In April of 2021 Ezra started OT, PT, and Speech Therapy at Orange City Area Health System. When we met Libby (Occupational Therapist) and Audrey (Physical Therapist) for the first time, it was very overwhelming and stressful for Ezra. It took time for him to gain trust from others after being in the hospital for nine months of his life. They did a great job following his stress responses, and we were able to increase the therapy sessions slowly at the beginning to get him to a point where he tolerated a full session well.

Ezra has been working on oral motor skills in occupational therapy with Libby, and has been making great improvements each week. In physical therapy he has been working on tummy time (the trach and ventilator tubing make tummy time more difficult). He has also been working with physical therapy on sitting, standing, and using the lite rail to take steps.

Speech therapist Courtney has been working alongside us with Ezra's speech generating device. While Ezra has the ventilator, he is unable to communicate verbally so this device helps him communicate with us.

We are so thankful for the skills each of these therapists have provided. Not only to our son, but how they listen and make sure we understand how to do the therapies at home and how they do it in such a loving and supportive way.



Courtney Sexe, Speech Therapist, is part of Ezra's pediatric therapy team which also include Physical Therapy and Occupational Therapy.



WORKING TOGETHER. KEEPING YOU in the GAME.

In addition to providing medical diagnoses and integrated, high-tech treatments for injuries in our Sports Medicine Clinic – located in our Orange City Family Medicine Clinic – Taylor Dreise, D.O., and Mark Muilenburg, M.D., serve as team doctors for the Northwestern College Red Raiders.

Dr. Dreise and Dr. Muilenburg work closely with athletic trainers, as well as our family doctors, physical therapists, and orthopedic surgeons.



Repairs made here.



Cutting-edge interventions. Close to home



Our team – YOUR team! – of sports medicine physicians and physical

therapists provide care with the most recent advances in medical and rehabilitation methods to help athletes of any age and ability return to performing their sport. The Sports Medicine Clinic builds on the outstanding quality and personalized care at Orange City Area Health System by giving a pathway for athletes to access sports-specific care.



Orange City Area Sports Medicine

712.737.6076

Message from Marty - continued from front cover

The implication being that the culture of an organization determines success, regardless of how effective your strategy might be.

Culture is nurtured and protected in a number of ways. First, it starts with hiring quality staff. We refer to them as “decent human beings.” Second, we want our staff to be immersed in an environment of “do right.” By this we mean 1) do the right thing, 2) do it the best you can, and 3) treat others as you would expect to be treated. Third, culture begins with *integrity*. Without it, a healthy culture simply cannot exist. Finally, open communication and transparency allows for minor course adjustments to our “game plan” as necessary, while reducing the need for major ones.

So ... game on! Thank you for your continued trust and confidence in Orange City Area Health System and our “decent human beings” who are committed to doing right as they serve you and your family with a lifetime of care.

With you, our future is bright!

Open communication and transparency allows for minor course adjustments to our game plan

What do *we choose* to think about? -by Dr. DeeJay Donlin, Behavioral Health Clinic



Recently, Orange City Area Health System CEO, Marty Guthmiller, talked to our employees about the value of reflection. It caused me think about how reflecting on our current circumstances often becomes a projective test.

Back in graduate school, I was required to take a

course on the administration and interpretation of the Rorschach test. It is considered a projective personality test in which the things you see may have more to do with you than the image. Although some may question the validity of the test, most believe that all of us may do some “projecting” of ourselves into situations that we perceive.

The last few years have certainly been an illustration on how different people respond to similar situations in very diverse ways. Some have seen the pandemic as an overwhelming restriction on life, while others have seen it as an opening of opportunities that had never been available before.

It strikes me that life is often a projective test for us. It follows the cliché “be careful what you look for, because you will probably find it.” We can see overwhelming problems, irritations and limitations in both people and situations, while also recognizing unlimited opportunities or appreciation for those same people or circumstances. The choice of how we see them and how we respond is something that we can change, even though we cannot change the people or many of our

circumstances. For example, we can observe a person and be irritated by his or her insistence or stubbornness. Conversely, we can look at the same person and possibly be impressed by his or her tenacity or perseverance. We can complain about being “too old” or “too short”, but also find how our age or stature might be an advantage in a different situation.

Improving mental health is sometimes a matter of changing the way we think (something we can control) rather than focusing on what we cannot control. In order to do that, we may need to become very aware and intentional about our thinking. Sometimes we fall into thinking “ruts” or habits that can be negative or even irrational. It may be hard to spot those thought habits because “it’s just the way I think!” Trying to develop a different perspective by “thinking outside the box,” using the “30,000 foot level” or advice from trusted others can be very helpful. Let’s be honest though. Changing the way we think takes just as much energy, intentionality and persistence as changing a behavioral habit. It certainly can be done, people do it all the time, but it takes persistence and time. It might start with identifying something positive, realistic and likely that we can put in front of us and begin to focus on that, rather than on the negative or on other distractions. Reminding ourselves of that intention can take the form of morning devotions/meditation, sticky notes, phone alarms, etc. Remember, going back to automatic pilot happens a lot. Don’t be discouraged when it does, see it as typical, but bring your intention back to the positive. Maybe, just maybe, the persistent intention can one day become the habit.

Perhaps it’s time this month, this week, this day, this moment, to identify a thought you would like to change and begin to focus on the realistic or positive rather than on the negative.

Developmental milestones -continued from back cover

It has been built by looking for milestones or behaviors and skills that have been studied and examined. Not just established by conventional wisdom or expert opinion. It also sought to reconcile the differences in different sources of guidance. There were differences between expert panels about what age a child or infant should be able to perform certain tasks. This caused confusion as to whether a child was progressing as expected, or was lagging behind. Now with stated guidance as to what abilities and skills a child should have (not may have) by a certain age, it is hoped that providers and parents will know if something is wrong. This will lead to earlier intervention and, it is believed, better outcomes for any child with a delay in development.

Let’s look at a specific example. The 6-month-old infant guidelines used to include, “Begins to pass things from one hand to another.” So if an infant was not doing that, was it abnormal? Or was it that some infants may be doing this, but it is not abnormal if your child is not. This milestone has now been moved to the 9-month-old infant checklist and states, “Moves things from one hand to the other.” Meaning if the child is not doing that, it indicates there is a delay. That is not to say every delay means there is a problem. All age milestones must be looked at together along with the child’s physical growth and health to determine if more testing or evaluation is needed. But at least the ambiguity of “maybe, begins, might” has been removed. As a practitioner, I find this helpful.

Allow me to make one last point. Work on this has been ongoing for some time. The process began in 2017, with the goal to resolve conflicting information and provide more firm evidence. Like all things in medicine, this has taken research, time, study and cooperation. These things do not happen easily and should cause us to carefully examine what we are doing. The results were issued early this year. Because of the timing, and the fact that some guidelines were removed or moved to an older age, some have felt it indicates infants are not developing like they were in the past because of the events in the last two years. That is not the case. This change was being worked on before the pandemic and is meant to improve our ability to detect problems. They have not been rewritten to hide slower child development or indicate a change in normal human development. It is really an attempt to help doctors do their work better and help parents know if something is wrong.

For those who might like a more scholarly approach to this topic, I refer you to an excellent medical article that contains much more information. It can be found by looking up: Zubler JM, Wiggins LD, Macias MM, et al. Evidence-Informed Milestones for Developmental Surveillance Tools. *Pediatrics*. 2022;149(3):e2021052138.

The new guidelines are available from the CDC. If you have any concerns that your child is not growing or developing as expected, please consult with your trusted healthcare provider. As with any tool, the milestones are helpful. But they cannot replace working with a trusted expert in the area of concern.



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Medical minute

CDC changes developmental milestones

-by Dr. Alan Laird, Chief Medical Officer



The CDC (Center for Disease Control) has updated the ages at which certain activities and behaviors should be seen in children. This has included changing some ages for some activities and adding new checklists for some others (ages 15 and 30 months). What is this all about?

Developmental milestones are used by health-care providers and parents to assess the ongoing neurological and social development of a child. Just like we measure height, weight and head circumference to look for healthy growth; developmental milestones are used to look for healthy neurological and social development. Things like rolling over, walking and language development can give us insight to how a child's brain and neurological system is developing. While we have known for some time when the "average" child is walking, it has been debatable about when a child is definitely in need of evaluation or intervention for a delay in walking. Deciding to test or intervene at 50% (average) mark, would mean a lot of children have further tests and referrals they do not need. Waiting until things are clearly delayed, could miss an opportunity to correct a deficiency or find a problem before it causes irreversible harm. And so the previous milestones were not always helpful to know when things needed more attention.

This new set of milestones seeks to address that, along with some other problems.

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In the news ...

ORANGE CITY AREA HEALTH SYSTEM PROVIDES NEARLY \$1 MILLION IN COMMUNITY BENEFITS

Contributes \$54 million to the area's economy

A study by the Iowa Hospital Association (IHA) found that, in 2021, Orange City Area Health System (OCAHS) provided nearly \$1 million in total community benefits, including charity care and bad debt. The study also found that OCAHS employed close to 600 people, which had a multiplier effect in the area economy of over 1,100 people. Direct labor expenses totaled about \$33.4 million in wages, with a multiplier of nearly \$54 million in the region.

Community benefits are activities to improve the health status and increase access to health care. Besides uncompensated care and charity care, community benefits include health screenings, support groups, counseling, immunizations, nutrition services, and transportation programs. These efforts, with IHA's advocacy, help ensure the financial stability of hospitals, making it possible for them to provide the services and programs most-needed by their communities.

"We continue to acknowledge and accept the role of our health system as a key economic driver in the communities we serve," stated Marty Guthmiller, CEO of Orange City Area Health System. "We greatly appreciate the trust and confidence placed in us by our patients, families, and staff, enabling the significance of this kind of economic impact."

IHA compiled data for the study from the American Hospital Association's annual survey of hospitals, the Bureau of Labor Statistics and the Bureau of Economic Analysis. IHA used Regional Input-Output Modeling System multipliers to calculate the data, which includes statewide, hospital-specific and county totals. IHA also conducted a separate survey, compiling hospital-submitted data about Iowa hospital community-benefit programs and services.

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**Orange City Area
Health System**
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712-737-2000 • ocHealthSystem.org
Family medicine clinics in Hospers, Orange City,
Paullina, and on the campus of Northwestern College.