Northfield Hospital + Clinics

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What it's like to be in the hospital

Hospitalization has been headline news during the pandemic.

So, what's it like to be in the hospital – whatever your illness or injury?

At Northfield Hospital, your care is led by hospitalists, doctors who specialize in hospital care. Northfield Hospital's seven hospitalists are family practice and internal medicine doctors with additional expertise in high-acuity care – everything from recovery after surgery to injuries to heart attacks, respiratory illness, infectious disease.

Our hospitalists lead a multi-discipline team that brings a range of expertise to tailor your care for your best healing in the hospital, and later at home.

They also use leading-edge technology to bring specialists across the region to your bedside.

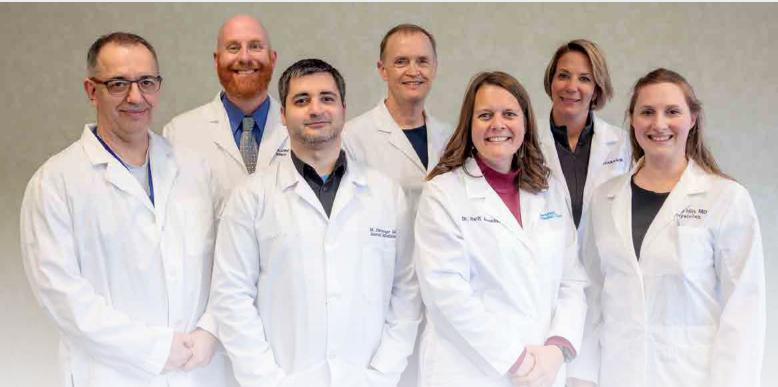
"Northfield Hospital has a unique combination of personalized care, plus connectivity to specialists, plus an on-site multidisciplinary team that can round on patients several times a day," says Dr. Stephanie Erickson, Medical Director of hospitalist care at NH+C.

Before the pandemic began, "we were comfortable taking care of patients who were moderately ill, and we transferred patients who needed specialty care," Dr. Erickson says. "During COVID surges, those beds and specialists were full, and there was no place to send patients. Like many community hospitals, our physicians, nurses, and staff came together to take care of sicker patients than we were used to. We were put to the test. It was daunting, but also rewarding. We realized we have this skill set. Caring for these seriously ill patients has given us experience and confidence that we are giving cutting-edge care."

For patients who were transferred, the bigger hospitals in the Twin Cities and Rochester often followed the treatment plan that Northfield Hospital's team started. "The other hospitals continued the same care the patient was getting here," Dr. Erickson says. (The reason for transfer usually was the need for a specialist we don't have here.)

Hospitalists have been the standard of care for a decade. Before then, primary care doctors would round on their patients once a day. Hospitalizations were longer, because the doctor's attention was spread out over many days. Now, the team rounds each morning when they can order tests, change medications, increase therapy; then they round again as needed to review test results, discuss discharge plans, and talk with patients' families. "The time intensity of your care increases," Dr. Erickson explains. "We can address your problems in a shorter timeframe."

"Our hospitalists have such a wide breadth of experience and knowledge. Your case is discussed with a multidiscipline team every single day."



L to R: Dr. Paulo Guimaraes, Dr. Randolph Reister, Dr. Mehdi Dastrange, Dr. Tom Holt, Dr. Berit Amundson, Dr. Stephanie Erickson (director), Dr. Marie Hill

Your bedside care team

Northfield Hospital is unique in providing MD-level care for every hospital and Emergency Department patient. "From the moment you're evaluated in the Emergency Department throughout your hospital stay, you will see an MD," Dr. Erickson says. That's rare: Most hospitals rely on nurse practitioners and advance care providers for some phases of care.

Our multi-discipline team gets the full picture of what you need in the hospital – and at home. Your care team might include surgeons, pharmacists, respiratory therapists, physical therapists, occupational therapists, dietitians, and social workers in addition to nursing staff. The team meets with each patient every weekday, and each team member gives advice. "We get such valuable input from each team member – a physical therapist might say 'this patient has trouble getting from bed to the bathroom' or a pharmacist might say 'this medication may cause this side effect; here's a better choice," Dr. Erickson explains. "This gives the hospitalist valuable information" to decide if the patient is ready to go home, and what support they might need at home. (The team works with NH+C Home Care for skilled nursing, PT and OT at home, as needed.)

It's efficient to get every expert's input at the same time. It's also more effective. "We know patients are more comfortable at home, and we understand that the care doesn't stop when you leave here," Dr. Erickson says. "We can prevent readmissions, and increase the value of the hospital stay. If you're here for 24 hours, you may have seen two MDs, a dietitian, an occupational therapist, and a social worker. It's easier for us to coordinate that care than in big facilities."

The result: "The right kind of care at the right time."

You get more personalized care, too. For example, rather than simply including a prescription in your discharge packet, our care team will coordinate with your insurance on prior authorization for the medicine, explain to your insurer why the doctor chose this medication, or find a suitable alternative to help manage your out-of-pocket costs.

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Your care team across the region

Partnerships and technology let NH+C bring the best in regional care to your hospital room.

As an independent hospital, NH+C has partnerships that bring the best quality care from specialists across the region. Partners include Minneapolis Heart Institute, Hennepin Health, Mayo Clinic and Allina.

"I like being able to tell a patient, 'While I'm not a cardiologist, I have spoken with a cardiologist at Minneapolis Heart Institute, and this is the care they advise," Dr. Erickson says.

If a Northfield Hospital patient needs an echocardiogram, Minneapolis Heart Institute sends a sonographer who does the ultrasound right in the patient's room and transmits the images to Minneapolis. "Within 30 minutes, I'm talking with the cardiologist as he's looking at images of the patient's heart – and the patient has never left their hospital room in Northfield. That's revolutionary," Dr. Erickson says. "The information flows back and forth."

It flows far and fast, too: Images like CT scans, MRIs, x-rays can be shared with any specialist, anywhere. Electronic medical records make up-to-the-minute diagnostic data and patient assessments easy to share.

"With the tools we have now – real-time imaging that can be shared, real-time sharing of medical records – plus the culture of personalized care, we're proud to be providing world-class hospital care that's equal

EHOSPITALISTS EXTEND BEDSIDE CARE ... BEYOND GEOGRAPHY

NH+C works with Avel eCare to provide hospitalist care with the swipe of a screen.

Avel's intensivists are based in Sioux Falls, SD and communicate directly with patients and staff virtually: an iPad on wheels is brought to the bedside, and the hospitalist talks with the patient and nursing staff in real time.

With the doctor on-screen and nurse at the patient's side, they care for the patient "just as if the doctor was in the room," says Dr. Stephanie Erickson, NH+C's Medical Director of hospitalist care. The doctor can listen to the patient's heart and lungs through a stethoscope connected to the iPad: the nurse places it on the patient and sound transmits to the doctor "as clearly as my own stethoscope," Dr. Erickson says. A magnifying glass with flashlight lets the doctor examine the patient's skin, eyes, mouth. (Ultrasounds and CT scans help with abdominal exams.) The doctor can review and add to the patient's medical chart at the bedside, too.

NH+C uses Avel for hospitalist coverage at night, dedicating staff hospitalists to daytime coverage, when patients' needs



and staff care (like labs and x-rays) tend to be highest. "We like having two hospitalists on during the day to talk with families, and coordinate patient care in the way that we do it so well," Dr. Erickson says.

Emergency Department doctors take charge for any hands-on emergencies at night.

to our peers in the Twin Cities and Rochester," Dr. Erickson says.

Dr. Erickson joined NH+C in early 2020, just as the pandemic began. She spent eight years in the Air Force, providing all kinds of medical care (including on the front lines in Afghanistan). That, plus a background in rural medicine, taught her to adapt medical care to the setting. It also gave her a breadth of experience, from delivering babies to Emergency Room triage. At Northfield Hospital, "I get to take care of patients on a daily basis and have a leadership role where I can influence meaningful change."

The future beyond pandemic

Some of the experience, skills and confidence earned during pandemic will influence hospital care going forward. That includes post-hospital care.

"I think we'll see a time where your hospital-level care at home is just as important as your time in the hospital," Dr. Erickson says. "Picture going home, and then within 24 hours having video visit with the hospitalist team as you transition to your primary care provider. We know how you were doing 24 hours ago in the hospital. We can look you over, take your blood pressure, review your medications, make sure you're progressing back to your best health."

It's the best in hospital care, close – very close – to home.



Back, Neck and Spine Care comes to Northfield

Got a pain in the neck? (Or back?)

NH+C now offer specialized back, neck and spine care in our Orthopedics Clinic in Northfield.

You benefit from the comprehensive approach of a team with specialized training in spine care. Our multi-disciplinary team includes spine surgeons, doctors, and physical therapists.

The care team treats the full spectrum of back and neck problems with a range of options:

- Full orthopedic spine exam Joint injections
 - Spine surgery

Neck pain

Whiplash

Leg numbness

Physical therapy Spinal injections

We design custom treatment plans built on a non-surgical approach. We leverage conservative methods such as guided injections, specialized physical therapy, exercise, activity modification, and medication.

If you need surgery, we'll refer you to spine surgeons Dr. Amir Mehbod and Dr. Benjamin Mueller through NH+C's partnership with Twin Cities Spine Center. They see patients in NH+C's Orthopedic Clinic in Northfield, and perform surgeries at TC Spine locations.

Contact us if you're experiencing:

- Back pain
- Arthritis
- Muscle weakness

Appointments: 507-646-8900

Learn more: northfieldhospital.org/spine



Jeff Meland, MD



Monty Seper, MD



Amir Mehbod, MD



Benjamin Mueller, MD

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Quick care for kids? Ask the

Darla and Marc Cleary are familiar with Urgent Care. Very familiar.

Darla and Marc's family made a half-dozen trips to the doctor over six weeks. From McKenzie's sprained ankle to Liam's persistent cough, they rely on the Lakeville Clinic and Urgent Care for quick care for their kids.

"We kind of just live there right now," Darla laughs. "They all know us."

It started when COVID spread through the family. The team at Urgent Care helped care for their lingering long-lasting symptoms.

Then an injury: Six-year-old McKenzie sprained her ankle on a trampoline ... prompting a trip to the Emergency Department. "We chose Northfield Hospital because she's been seen there before," and the drive from their Elko New Market home is the same distance to Northfield as it is to Burnsville. The ED team x-rayed McKenzie's ankle and crafted a cast for her petite foot (too small for standard-size cast or brace). "They were so great with her."

Darla and Marc followed up with McKenzie's pediatrician Kelly Meyer, DO in the Lakeville Clinic. "Dr. Meyer is fantastic," Darla says. "She distracted McKenzie by talking about ice skating and other things that she likes, and got McKenzie to take a few steps." Dr. Meyer confirmed a sprain (not broken), and tailored McKenzie's care appropriately.

Then, more illness: Four-year-old Liam couldn't shake his cough, and "seemed to pick up every virus that came his way," Darla says. Multiple visits to Urgent Care and to Dr. Meyer helped home in on a diagnosis and treatment for Liam. (Darla recorded episodes of Liam coughing at home to help diagnose it.)

Then – spoiler alert – McKenzie got sick too. Back to Urgent Care, again.

Darla expected a long wait; it was right after school, and the end of the workday. But "we were being seen within five minutes, and done in 30 minutes," she says. "Urgent Care is so fast, and they're really good."

Darla likes the continuity of care, too: Nurse Practitioner Jane Carlson, CNP, APRN has seen both kids multiple times. That's not always common with walk-in care.

"She's been just wonderful," Darla says. "She listens, and she treats you like a person. She makes it a calming experience for the kids.

"Jane says, 'If you see any change in the next 24 hours, call me. We'll do everything we can,'" Darla recalls. "The Urgent Care team is really open to trying different things to help the kids."

"Urgent Care is so fast, and they're really good."

Cleary family

Urgent Care makes pandemic precautions easy for walk-in care, too: If your child has a cough or respiratory symptom, you call from the parking lot and are checked in over the phone. Then when it's time for your child to be seen, you come right into the clinic and straight through to the exam room. "We keep some toys and games to play in the car to keep them busy until it's our turn," Darla adds.

"Urgent Care in Lakeville is our first choice. We've had really great experiences there," Darla says. "They're very receptive to listening, and want to do all that they can for us."

Meanwhile, Darla gets prenatal care in at the Women's Health Center adjacent to Northfield Hospital – an easy drive from Elko New Market for multiple appointments.

Darla's advice for other parents? "Advocate for your kids. If you're feeling mom-tuition about something, know that they will listen to you. The providers have all been very helpful, and extremely receptive to our concerns. They treat you like a person, not like a textbook."

No matter how often you're there.

Rachel McIver Morey

For Rachel McIver Morey, it all happened so fast.

Rachel was walking through a Northfield intersection and got hit by a car. Within five minutes, an ambulance was there.

"They were kind and professional in a scary moment," Rachel says. "I was impressed how well they managed the real crisis of a car accident with a pedestrian, while navigating COVID safety precautions."

The Emergency Department trauma team was ready when Rachel arrived at Northfield Hospital.

"There was this wall of medical personnel there to receive me," Rachel recalls. "I thought, 'I must be in really bad shape.' And then, 'Wow, is everybody here?' It was an intense moment of awe that the staff was ready to go the second the ambulance arrived."

ED physician Alice Suchomel, MD took charge. The immediate concern was Rachel's collapsed lung. X-rays showed that Rachel also had broken ribs and a broken leg. Plus, she had a concussion. Dr. Suchomel "was super-efficient, and matter-of-fact about it all," Rachel recalls. "She listened to me. I wasn't very articulate because of the concussion, but I felt listened to. I felt so well-cared for."

Rachel was kept overnight in the hospital, then home the next day "with pain management, phone numbers for doctors, and followup appointments already set up," she says. "It was all taken care of."

In the months since the accident, Rachel's life has mostly returned to normal – "just what you want after a catastrophic incident," she smiles. Reflecting on her whole experience, the most lasting impression is how fast it all happened – not just the accident, but the emergency care.

"My walk-away thought is 'Wow, five minutes.' They got to me so quickly. What a blessing it is to have a local hospital so close," says Rachel, who grew up in a rural community where the nearest hospital was 45 minutes away. "Having quick access to care makes all the difference in the outcome. That's a gift."

praises emergency care

Decisions about emergency care are made by the community, based on the resources the community chooses to support, Rachel explains.

decided for you," Rachel says. "I'm grateful that NH+C has people in place to make caring and wise decisions on my behalf."

"The moment of crisis isn't a decision time; it's

WHEN MINUTES MATTER: THE TRAUMA TEAM STEPS UP

When EMS gets called to a trauma – a car crash, a farming accident – as they rush to the scene, the ambulance crew reports from the scene in to Medical Resource Control Center (MRCC), the regional dispatch center for emergency services. MRCC contacts the hospital's Emergency Department, so the trauma team can prepare.

MRCC gives crucial details from the scene:

- Type of accident
- Number of injured people
- Injuries sustained
- Vital signs for each injured person
- Estimated time of arrival at the Emergency Department

At the hospital, the trauma team gathers quickly:

- 1-2 ED doctors
- 2-3 ED nurses

• Lab

- - Respiratory therapy
 - House supervisor
- Patient advocate
- Medical/Surgical charge nurse

An ED doctor and nurse triage the patient(s) as they arrive, based on the information from MRCC, the paramedics' report, and two-part "trauma survey" exam, starting with a primary assessment for life-threatening injuries and conditions that must be addressed right away. Then, a secondary assessment examines the patient head-to-toe to make sure nothing was missed. Patients who need to be hospitalized are admitted or transferred.

Those who need a more specialized level of care are typically transferred to a Level 1 trauma center in the Twin Cities or Rochester. Patients are transferred via ambulance or helicopter. NH+C's ED doctors, surgeons and hospitalists determine the most appropriate place for care based on the patient's condition and needs.

Northfield Hospital is a Level 4 trauma center, designed to stabilize and transfer critical patients. NH+C works with Level 1 trauma centers that have all the resources possible for critical care, including HCMC (Hennepin County Medical Center) and Regions Hospital, to ensure our patients get the care they need, when minutes matter.

David Sindelar gets back to

When David Sindelar started looking like Popeye, it was time for help.

David does a lot of physical work. So when he injured his right arm and shoulder, he shrugged it off ... for about six months. The pain and weakness built gradually until even simple movements were hard – turning a rachet wrench, or a pepper grinder.

Then suddenly, David's bicep bulged out like Popeye's forearm. And it hurt. A lot. "It wasn't going to get better on its own," David says, so he took it to his primary care doctor, David McIntyre, MD who suspected the bicep muscle had torn away from the bone. He referred David to orthopedic surgeon Clint Muench, MD.

An MRI confirmed the torn bicep, and showed possible damage to David's rotator cuff, the group of muscles and tendons around the shoulder joint that hold the head of the upper arm bone in the shoulder socket.

Dr. Muench recommended surgery to repair the bicep, and any damage to David's rotator cuff. Age and activity level were both factors in choosing surgery, David recalls: "Dr. Muench said, 'You're active and do a lot physically, so let's repair it."

They wouldn't know the extent of rotator cuff damage until Dr. Muench could see it in surgery. It would be the difference between 12 weeks or six months of recovery. At the same time, David was coping with carpal tunnel in both wrists. "I thought, 'If I'm going to lose

the use of my right arm and shoulder for a while, let's get my left hand working better first," David says.

Dr. Muench repaired David's left wrist, then six weeks later repaired his bicep, rotator cuff and right wrist. Both were outpatient surgeries at Northfield Hospital's Surgery Center.

It was David's first time in an operating room. "I knew I was in good hands," he says of the surgery team. "My only concern was not knowing how bad the rotator cuff would be."



Clinton Muench, MD



Maria Bohl, DPT

Not too bad, it turns out. Dr. Muench cleaned up some arthritis and bone spurs in David's shoulder. Recovery would be short.

Weekly physical therapy with Maria Bohl, DPT restored mobility to David's hands and shoulder through a combination of stretches, massage, and exercises: "I'm getting more mobility every day with little pain," he says.

"It's like bad eyesight or hearing loss: You don't know what you're missing until it's fixed."

work

David still has some tingling pain from carpal tunnel as numbness from compressed nerves subsides, and sensation returns to his fingertips. "I expect that to improve over the coming months," he says.

He's looking forward to yard work, gardening, and playing with his grandkids.

David's advice for men who do a lot of physical work and brush off pain: "If it doesn't go away or it gets worse, it's worth checking out – especially as you get older. The damage can be slow and progressive. You just don't recover like you did when you were 20."

Or bounce back like a cartoon character.

"It's like bad eyesight or hearing loss: You don't know what you're missing until it's fixed."

David Sindelar, Dundas



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Clinics, Hospital + Specialty Care close to you



Specialty Care

Breast Care Center – Northfield 2000 North Avenue, Tel: 507-646-1143

Cancer Care & Infusion Center – Northfield 2000 North Avenue, Tel: 507-646-6979

Endoscopy – Northfield 2000 North Avenue, Tel: 507-646-1201 Northfield Eye Physicians + Surgeons 2019 Jefferson Road, Tel: 507-645-9202

Orthopedics Clinic – Northfield 1381 Jefferson Road, Tel: 507-646-8900

Rehabilitation Clinics Northfield: 1381 Jefferson Road Tel: 507-646-8800

Lakeville: 9913 – 214th Street West Tel: 952-985-2020

Hospital + Emergency

Northfield Hospital + Emergency 2000 North Avenue, Tel: 507-646-1000

Clinics + Urgent Care

Faribault Clinic 1980 30th St. NW (at Lyndale Ave.), Tel: 507-334-1601

Farmington Clinic 4645 Knutsen Drive, Tel: 651-460-2300

Kenyon Clinic 225 Huseth Street, Tel: 507-623-0123

Lakeville Clinic + URGENT CARE 9974 214th Street W., Tel: 952-469-0500

Lonsdale Clinic 103 15th Avenue SE, Tel: 507-744-3245

Northfield Clinic 2000 North Avenue, Tel: 507-646-1494

Specialty care available at multiple clinic locations

Sleep Center – Northfield 2000 North Avenue, Tel: 507-646-1099

Women's Health Center – Northfield 2000 North Avenue, Tel: 507-646-1478

Wound Healing Center – Northfield 2000 North Avenue, Tel: 507-646-6900



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