

Healthy **LIVING**

3D-DIGITAL MAMMOGRAPHY

DCH provides the community with the best screening tool available to save lives by identifying cancers earlier.



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JACK ROSTAS III, MD, FSSO - FELLOW OF THE SOCIETY OF SURGICAL ONCOLOGY

Daviess Community Hospital is pleased to announce updated credentials of Dr. Jack Rostas III, of Washington. Dr. Rostas has been providing surgical oncology for a diverse number of cancers to the community for nearly three years, and has been a Fellow of the Society of Surgical Oncology since February 2018.

The Society of Surgical Oncology now allows fellow to use the credential "FSSO" in recognition of this honor. The distinction recognizes achievements in the specialty of surgical oncology. Dr. Rostas is a member of Daviess Community Hospital's Medical Staff. He is a highly skilled surgeon who provides care for patients in Daviess and the surrounding counties.

A graduate of the University of South Alabama Medical School, Dr. Rostas completed his residency in General Surgery at University of South Alabama Health Systems. He then completed a research fellowship at the University of South Alabama Mitchell Cancer Institute.

Dr. Rostas has completed fellowships in both Surgical Oncology and Americas Hepato-Pancreato-Biliary Association (AHPBA) at the University of Louisville, KY. During that same time, he graduated with a Masters of Public Health (MPH) from the University of Louisville, KY.

SSO membership has many benefits including access to a global community of cancer surgeons who lead advancements in the field and educational resources that inspire their peers. Membership in SSO demonstrates a level of commitment for continued learning and skill development in surgical oncology. Using this designation signals to patients and colleagues a surgeon's commitment to excellence.



**Jack Rostas, III
MD, FSSO**


**Daviess
Community
Hospital**

Healthy LIVING

DAVISS COMMUNITY HOSPITAL ROLLS OUT 3D-DIGITAL MAMMOGRAPHY

Daviness Community Hospital is pleased to announce that 3D Mammography is now available in Washington.

This advanced technology, also known as tomosynthesis or “tomo,” use the same x-ray technology as regular “2D” mammograms. The procedure is the same from the patient’s point-of-view, although it will take a few seconds longer. In both 3D and 2D mammograms, the breast is compressed between two plates. In 2D mammograms, which take images only from the front and side, this may create images with overlapping breast tissue. Because 3D mammography provides images of the breast in “slices” from many different angles, finding abnormalities and determining which abnormalities seem potentially worrisome may be easier with 3D tests.

The clinical benefits of 3D mammography are indisputable. Simply put, screening saves lives by identifying cancers earlier. Hologic’s 3D mammography exam has been clinically proven and FDA approved to detect 20 to 65 percent more invasive cancers, reduce unnecessary callbacks by up to 40 percent compared to 2D mammography, and is approved as superior for women with dense breasts compared to 2D alone.

While the benefits of 3D mammograms appear to be tiny for an individual woman, the benefits of the 3D test could add up for a large population of women. For example, a study examining over 44,000 screening tests, including over 28,000 3D mammograms, over 5 years found that 3D screening detected significantly smaller invasive breast cancers (about 1.5 cm (about ½ inch) vs. 2.3 cm (about 1 inch). And, the cancers that were detected by 3D tests were less likely to have spread to the lymph nodes (about 15% vs. 31%). (Source: Neal, C. and Philpotts, L. (2017). Breast Imaging (Multimodality Screening and Breast Density). Accessed from <http://archive.rsna.org/2017/17039959.pdf>). Finding a cancer that is smaller and hasn’t spread to the lymph nodes means that a woman would require less aggressive treatment of her cancer, such as less radical surgery and fewer chances of needing chemotherapy.

“Adding the 3D imaging really gives us the opportunity to provide our community with the best screening tool available,” said Heather Decker, Director of Imaging Services at DCH.

The 3D test takes a few seconds longer than 2D digital or film mammography (adding a few seconds of discomfort). The newer, low-dose 3D mammography uses less radiation than a 2D mammography.

Sharon Mead, a two-time breast cancer survivor and the DCH Cancer Patient Navigator, says that the purchase of the 3D technology is especially meaningful. “Cancer is a devastating diagnosis, but what people don’t realize is the wait for the diagnosis can be excruciating,” she says. “Everyone has been touched in some way by a loved one diagnosed with breast cancer. This technology will ensure that all moms, sisters, daughters and wives have access to the best technology without having to travel.”

To schedule an appointment for a mammogram at Daviess Community Hospital, please call 812-254-9324.

COVER PHOTO

Daviess Community Hospital's new 3D Mammography machine



Left to Right: Mammography Technologists Kim Boyd and Chrissy Hunt; Sharon Mead, RN, OCN

THERAPIST WAS KEY TO PAIN ANSWERS

For Carol Vaal, living pain free for the last few months has been nothing short of a miracle.

As a mother and substitute teacher at North Daviess Schools, she had spent more than a year battling severe pain in her lower abdomen that would not go away and was virtually impossible to diagnose.

“At times, the pain was so bad I could not even make it through the grocery store,” recalled Carol. “I would actually have to sit in the aisle because it was too unbearable to walk out of the store.” Carol also had trouble performing duties at school such as recess duty and had to leave work many times due to the pain. It was a struggle to even make dinner for her family. As soon as the meal was ready, Carol would often have to lay down. Vacations were not an option either as the pain prevented her from hiking or any other physical activity with her thirteen-year-old son.

Her story began in May 2019 with her first trip to the Emergency Department. “The first time I went to the ER, they did x-rays and told me I had kidney stones,” she said. “The ER staff advised me to see my primary care provider for follow up.” During her follow up appointment, the cholesterol shot she had been receiving in her stomach became a possible cause of her pain. Carol decided to discontinue the shot, but her pain persisted.

The next step was to have a bladder scope to determine where the pain was coming from. The results did not match up to the location of Carol’s pain, so the idea of kidney stones as the cause was dismissed.

Carol was then referred to a gastroenterologist for a colonoscopy. The results showed nothing unusual and Carol was advised to try physical therapy. Carol chose the DCH CORE Center and was introduced to Clint Young, Physical Therapist.

“For the first time through this whole ordeal, I felt like someone (Clint) really cared about what was happening to me,” Carol said. “Someone was finally taking me seriously.”

She was pleased with how thorough Clint was in asking her questions about the pain and trying methods such as Dry Needling to relieve her pain. Soon after Carol began her therapy, COVID-19 hit Daviess County and she was advised to pause her sessions. She had one more meeting with Clint before seeing urologist Michael Gallentine, MD, in early June.

“Clint was so concerned about my pain that he wrote a detailed letter to Dr. Gallentine prior to my appointment,” Carol recalled. “I believe it was that letter that helped convince Dr. Gallentine to dig further into what might be causing the pain.”

Tests conducted following her appointment confirmed that Carol did indeed have kidney stones and surgery was immediately scheduled. Dr. Gallentine successfully remove five kidney stones and placed a stent in her kidney. Tests showed that Carol had stones in her other kidney which would be addressed at a later date.

“I had a rough time after surgery, so they kept me at DCH overnight,” she said. “The nurses in the OR were awesome and I had great care during my stay.”

Carol remembers how grateful she was to be without pain. “Relief from the pain was almost immediate. The first time I went shopping and had no pain, I broke down and cried in the store!” she exclaimed. Carol is pleased to be active again and spending time with her son. She is also relieved that the depression she suffered as a result of the pain has subsided.

“Clint was a God-send,” she explained. “I can never thank him enough for listening to me and helping me find answers to the pain.”

Carol Vaal with Clint Young,
Physical Therapist



SEEING DOUBLE AT DCH

In a recent edition of “Healthy Times”, we featured the Lundy family and their twins’ birth experience during the pandemic. It was soon after that article printed that we discovered more sets of twins were on their way to delivery at Daviess Community Hospital.

According to Shawna O’Kelley Brinson, RN (OB Manager), six sets of twins were delivered at DCH so far in 2020 with at least one more set due before the end of the year. “It is not uncommon for twins to be born here,” Brinson commented. “The fact that we have had three DCH employees deliver sets of twins in five months is what is most interesting.”

As we move toward becoming a designated level 2 nursery, DCH is able to keep and treat premature babies who would have been transferred out in the past to Neonatal Intensive Care Units (NICU) in Evansville or Indianapolis. Since completing training earlier in 2020, we have been able to keep and successfully treat eleven babies who would have been transferred out.

“One of these babies was born nearly eight weeks premature but was able to stay here at our facility and receive excellent care close to home,” said Miranda Schneider, Nurse Practitioner/Hospitalist in the DCH nursery. “This was a huge “win” for the baby’s parents as transportation back and forth to Evansville during the baby’s 20-day hospital stay would have been nearly impossible. We look forward to continuing to grow and increase the services we can provide in the Special Care Nursery and OB department at DCH.”

All three couples had great things to say about their experience at Daviess Community Hospital.

“Everyone went above and beyond to make sure we knew what was going on and educate us on what we needed to know about our babies,” said Emily Thompson. “When we had our first daughter at another hospital, the OB staff knew I was a nurse and assumed I would know everything about a newborn even though I was not an OB Nurse. At DCH, the staff knew I was a nurse but still gave me all the information I needed to know about breastfeeding and caring for myself as well as the twins.”

“I had delivered in a larger hospital with my first two children,” said Melissa Russell. “This experience was so much more comfortable because I felt like I was taken care of by “family”. Nurses Nikki Kroeger and Jenelle Collison held my hands as I was getting prepped for a c-section. They stayed with me and Michael and helped keep me calm until the twins were born.”

Melissa and Michael also appreciated that, even during the current pandemic, he could leave the hospital to pick up items or check on the other children while she and the babies were still in the hospital. “The hospital also provided meal vouchers for me so that I didn’t have to rely on food from a vending machine,” said Michael.

“Giving birth during a pandemic was a very different experience than I expected,” recalled Hannah Lundy. “Jeremy and I were wearing masks, my mom and sister-in-law could not be in the room with us, and we could not have visitors in the hospital after the twins were born. The staff in OB seemed to understand how this affected us. They really were attentive and made the experience special.”



Pictured are: Jeremy and Hannah Lundy with twins Norah and Haizlee, Joel and Emily Thompson with twins Will and Olivia and Michael Cassidy and Melissa Russell with twins Lily and Lyla.

DAVISS COMMUNITY HOSPITAL

For the year ended December 31, 2019

OPERATING REVENUE

Inpatient Revenue	\$46,034,441
Clinic Revenue	\$17,001,951
Outpatient Revenue	\$93,147,690
Total Acute Care Patient Revenue	\$156,184,082
Hospice Care Revenue	\$1,075,800
Total Revenue	\$157,259,882

DEDUCTIONS FROM REVENUE

Contractual Allowances	\$71,992,958
Charity	\$692,180
Bad Debt	\$4,786,024
Other Allowances	\$19,335,816
Total Deductions	\$96,806,978
Other Operating Revenue	\$1,760,300
Total Net Revenue	\$62,213,204

OPERATING EXPENSES

Salaries and Wages	\$22,898,564
Physician Salaries	\$3,749,419
Benefits	\$5,946,480
Fees - Physicians	\$4,605,023
Fees - Other	\$8,065,129
Physician Recruitment/Retention	\$431,190
Supplies	\$7,733,771
Utilities	\$1,019,714
Repairs/Maintenance/Rent	\$5,091,833
Insurance	\$586,767
Interest Expense	\$859,089
Other Expense	\$981,286
Depreciation and Amortization	\$3,308,431
Total Expense	\$65,276,696
Income from Operations	\$(3,063,492)

NONOPERATING REV/EXP

Other Expenses	\$197
Other Income	\$34,871
Total Nonoperating	\$34,674
Net Profit/Loss	\$(3,028,818)



DAVISS COMMUNITY HOSPITAL *at a Glance*

EXPENDITURES

Salaries and Wages	\$26,647,983
Benefits	\$5,946,480
Professional Fees and Purchased Services	\$12,670,152
Supplies and Drugs	\$7,733,771
Other	\$8,969,879
Depreciation	\$3,308,431
Total	\$65,276,696

AS A % OF OPERATING EXPENSES

Salaries, Wages & Benefits	49.9%
Supplies and Drugs	11.8%
All Other Expenses	33.2%
Depreciation	5.1%

COST OF WRITE-OFFS

Contractual Allowances	\$24,610,342
Charity	\$236,617
Bad Debt	\$1,636,072
Other Allowances	\$6,609,828
Total Cost of Write-offs	\$33,092,860

Cost Per Day to Operate \$169,776

FOR EVERY DOLLAR CHARGED \$1.00

Contractual	\$(0.58)
Charity	\$(0.004)
Bad Debt	\$(0.03)
Total Cost of Write-offs	\$(0.62)

REMAINING AMOUNT TO COVER OPERATING EXPENSES \$0.39

Salaries, Wages & Benefits	\$(0.19)
Supplies and Drugs	\$(0.05)
Other	\$(0.13)
Depreciation and Amortization	\$(0.02)

483
TOTAL BIRTHS

1,957
TOTAL SURGERIES

103
REHAB
ADMISSIONS

23,167
RESPIRATORY TESTS

69,163
CORE CENTER VISITS
(PT, OT, ST)

286,645
TOTAL LAB TESTS

Imaging

26,797 TOTAL IMAGING

2,210 MAMMOGRAMS



12,734 VISITS **808** ER PATIENTS ADMITTED

TOTAL ER, INPATIENT AND OUTPATIENT ADMISSIONS

Outpatient

42,133
CLINIC VISITS

11,511
QUICK CARE VISITS

Employment

636
TOTAL # OF EMPLOYEES

469.5
FULL TIME EMPLOYEES

\$0 PROPERTY TAXES PAID

\$692,179
CHARITY CARE

DCH FOUNDATION HOSTS ONLINE AUCTION

The pandemic has affected our lives in many ways, including limiting the types of events that can be held and the number of people who can attend. For that reason, the Daviess Community Hospital Foundation cancelled this year's "Kentucky Derby Fundraiser", which has always helped to sustain their mission of supporting hospital projects, and launched their first online auction.

The Foundation's commitment for 2020 is to support the hospital's purchase of 3D Mammography equipment. This technology comes with multiple benefits. It will allow for earlier detection of breast cancer, less need for callbacks, improved comfort and experience, and improved chances for a good outcome for our patients. This upgrade to the mammography equipment in our Women's Center at Daviess Community Hospital will provide the best imaging services for women in our community. It may even save the life of someone you know and love!

The DCH Foundation is committed to raising \$100,000.00 to offset the equipment cost of \$350,000.00. As of today, the Foundation has raised nearly \$62,000.00 which includes the proceeds from the auction and the recent Annual Golf Benefit.

Through generous donations from area businesses, individuals and hospital departments, the Foundation collected over 50 gift certificates, gift baskets and specialty items for the auction. There were many affordable items that were very popular with bidders.

"We were amazed at the number of people who not only bid on items, but stayed up until the midnight

deadline to ensure theirs was the winning bid," said Angie Steiner, Foundation Director. "This vital fundraising event has helped us to continue raising funds for this much needed technology."

Foundation Board President Chasity Matthews was pleased with the auction results. "The Daviess Community Hospital Foundation has made a commitment to help provide support to 3D mammography services at DCH," stated Matthews. "The DCH Foundation Board is grateful to those who supported this program through the online auction and those have donated in the past year."

The Daviess Community Hospital Foundation's mission is to secure funds to support Daviess Community Hospital's efforts to meet the health care needs of our communities. Thanks to our generous supporters, the DCH Foundation was successful last year in raising over \$300,000.00 for projects benefiting patients, families and the communities we serve.

Tracy Conroy, Chief Executive Officer at DCH, also appreciates the community support. "Having state-of-the-art technology and care close to home is very important to our community," she said. "DCH is pleased to offer this service to women and men who meet the qualification for routine or diagnostic screenings."

The Foundation Board hopes to combine their annual Kentucky Derby Fundraiser with another online auction next spring. For more information on the DCH Foundation efforts, please contact Angie Steiner at 812-254-8858 or asteiner@dchosp.org.

Congressman Larry Bucshon, MD visited the Daviess Community Hospital CORE Center in Washington, Indiana, to speak with the Administration Team about their ongoing efforts to combat COVID-19 in our communities. "The nurses and doctors are doing an incredible job serving Hoosiers and I am proud of the work they are doing," said Congressman Bucshon.

Pictured (left to right): Nancy Devine (CNO at Daviess Community Hospital); Congressman Larry Bucshon; Keith Miller (COO at Daviess Community Hospital); and Randy Russell (CFO at Daviess Community Hospital).



DCH FOUNDATION RAISES OVER \$27,000 FOR 3D MAMMOGRAPHY

While the current pandemic has created limitations in fundraising activities, the Daviess Community Hospital Foundation was able to proceed with their annual golf benefit. Eighty-nine golfers enjoyed partly sunny skies and a warm breeze which made the day nearly perfect for the 27th Annual Daviess Community Hospital Foundation Golf Benefit. This year's event was held on Thursday, August 13, 2020 at Country Oaks Golf Club near Montgomery, IN.

According to Angie Steiner, Director of the DCH Foundation, "Each year we have been fortunate to have many local and regional partners supporting our efforts through sponsorships and golfers. We all come together to support the Foundation events and projects."

The sponsors and individual players are vital to raising the funds for this year's 3D Mammography project, but the event would not be possible without the volunteers to make it happen. This year, the list of volunteers included those who have benefited from past Foundation funding including scholarship recipients as well as healthcare professionals from the OB, Endocrinology, Radiology and Oncology units. Each of the four tents on the course provided information about past projects as well as refreshments for the golfers.

"It was great to see so many different people assisting with this year's golf outing," remarked Chasity Matthews, DCH Foundation Board President. "They are an outstanding group of people. The outing was extremely well organized, which shows the dedication and hard work of those who put it together."

This year's event raised more than \$27,000 to support the upcoming installation of 3D Mammography equipment at Daviess Community Hospital. The monies raised from this year's campaign will assist Daviess Community Hospital in reaching their goal

of providing 3D mammography services to women in our area. The hospital's goal is to roll out this advanced technology, also known as digital breast tomosynthesis (DBT), by the end of 2020.

For those less familiar with the technology, 3D mammography takes multiple images of breast tissue using a low-dose scan, providing radiologists with greater clarity in identifying and characterizing individual breast structures. Radiologists are then able to better identify abnormalities in women with dense breasts which leads to fewer callbacks and biopsies.

The Daviess Community Hospital Foundation has made a commitment to help provide philanthropic support to the services and equipment needs of the hospital," stated Steiner. "The DCH Foundation Board has committed to raise \$100,000 for this project in 2020. We are grateful to those who supported this program through the golf outing this year and we look forward to engaging many in the community as we kick off a capital campaign this fall to raise the needed funds to meet our goal."

Next year's event will again be held on the second Thursday in August. For more information on the Foundation efforts, please contact Angie Steiner at 812-254-8858 or asteiner@dchosp.org.





DCH FACILITIES MANAGEMENT TEAM RECEIVES AWARD

Prioritizing Safety: How Medxcel Facilities Support Regulatory Compliance

The Medxcel facilities management team at Daviess Community Hospital recently received the FMOS award which is given to organizations with a regulatory compliance rate of 95% or higher. DCH is one of only 20 organizations across the country to receive this award.

Medxcel assumed management of the hospital's maintenance services in 2018. Since that time, many facility improvements have been made including emergency management & safety, grounds, environment of care and survey readiness.

Medxcel understands that providing a safe and compliant healthcare environment is their key role in supporting quality care of patients, staff and visitors. Because of this, Medxcel had identified a methodical way of ensuring no risks are overlooked as it pertains to the Environment of Care (EOC).

"Our job is to keep our hospitals operating efficiently, effectively and safely", says Eric Fulkerson, Medxcel Facilities Director.

FMOSTM, short for Facilities Management Operating Systems is a tool to help facilities measure, monitor and maintain regulatory compliance pertaining to the EOC. Nearly 75% of facilities management activities are subject to regulatory standards, which are designed to reduce risks to anyone who steps into a healthcare facility. With that in mind, FMOSTM organizes policies, procedures and documentation for quick access. In doing so, Medxcel's Regulatory Compliance team facilitates the work of surveyors, giving facilities the best chance of passing the EOC portion of a regulatory survey.

For Medxcel associates, FMOSTM also means they can catch potential issues early, before they snowball into expensive, time-consuming problems.

FMOSTM AWARDS

Each fiscal year a trained Medxcel regulatory compliance team completes an EOC validation survey, essentially a mock survey to ensure Medxcel teams are supporting their hospitals in a safe and compliant manner. Medxcel teams achieving 95% or higher compliance during the mock survey earn the FMOSTM designation: a recognition of above-and-beyond performance. With regulations evolving quickly, as do risks to patients, this is an extraordinary accomplishment.

DCH WELCOMES DR. LAURIE WILBANKS

Daviess Community Hospital is pleased to welcome Dr. Laurie Wilbanks, Ophthalmologist, who is now providing outpatient surgical procedures in Washington.

Dr. Wilbanks received her Bachelor of Science degree from Purdue University. She attended the University of Louisville School



of Medicine where she earned her doctor of medicine with distinction in research. She was chosen for a competitive surgical internship at the Medical University of South Carolina in Charleston and completed her residency in ophthalmology at the Storm Eye Institute.

She is qualified in all aspects of general ophthalmology including but not limited to cataract surgery, glaucoma, retinal disorders, diabetic eye disease and macular degeneration.

For more information about Dr. Wilbanks, please call Southern Indiana Eye Associates at 812-482-6424.



Healthy LIVING

DCH CORE CENTER OPENS SATELLITE LOCATION

Daviess Community Hospital recently began offering outpatient therapy services at Parkview Village Christian Care in Odon, IN. The location is referred to as "CORE @ North Daviess".

Therapy offerings include Physical, Occupational, and Speech provided by CORE Center therapists with many years of experience. Outpatient therapy is open to anyone in the public either through a medical provider's referral or direct access physical therapy with certain insurance networks.

Outpatient Therapy hours are Monday, Tuesday, and Thursday. Due to the high patient volumes, hours are expected to expand in the near future. Current therapy hours are:

Monday: 8a-12p

Tuesday: 1p-5p

Thursday: 8a-5p

"We believe it is very important to be actively engaged with the communities we serve," said Tracy Conroy, CEO at Daviess Community Hospital. "By expanding our therapy services into Odon, we are offering the people in the northern part of Daviess County the ability to be seen closer to home. We have witnessed great support for the last several years of our Family Medicine services at the North Daviess Medical Clinic and look forward to a long therapy relationship with the community as well."

To learn more about CORE Center offerings, please call 812-254-8889 or visit www.dchosp.org/Locations/CORE-Center.



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www.dchosp.org



DAVIESS COMMUNITY HOSPITAL RECOMMENDS FLU SHOT



Flu season is right around the corner, and healthcare professionals are urging you to get vaccinated. CDC recommends getting the Flu vaccine by mid-October since it takes about 2 weeks for the body to develop “flu fighting antibodies”. Flu vaccines can be given to anyone from the age of 6 months and up. There are rare exceptions to this and if you have questions regarding your suitability for vaccination this year, speak with your Health Care Provider.

“It is going to be very important to have a flu vaccine this season, not only to protect you and your loved ones but also to help reduce the strain on healthcare systems responding to the COVID-19 Pandemic”, said Jennifer Butler, Director of Infection Control at Daviness Community Hospital.

Butler says “The flu and coronavirus are transmitted in similar ways, and one of the biggest challenges is going to be the high volumes of sick people. We’re going to have a large population of people with respiratory symptoms, and sorting out whether or not they have influenza vs. COVID will be a challenge.”

The flu and coronavirus have many similar symptoms, but Butler says there are some symptoms that

help distinguish between the two to help tell the difference. She says if you have a sudden change in taste or smell that it may be an indicator you have coronavirus instead of the flu. However, the problem is that not everyone gets that symptom.

“The best way to know whether or not they’re dealing with COVID or the seasonal flu is going to be testing,” she stated.

It is possible to have both the flu and coronavirus at the same time, and if you have either the best idea is to stay home, isolate and seek care when needed by way of primary care clinics, urgent care clinics or the Emergency Department, depending on the seriousness of the illness.

“No matter where you’re going, you should always wear a mask, make sure you wash your hands, social distance from the group in front of you, etc,” said Butler.

She stressed that it is everyone’s responsibility to get vaccinated for the flu to prevent the spread and follow recommendations to prevent the spread of COVID-19. Watch for updates and guidance from the CDC and your local health department.