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STEVE MYERS HEARTFELT APP

Steve Myers started his Monday morning off like any other workday. He ate breakfast, enjoyed a hot cup of coffee, and went to his office at Myers LP Gas and Myers Transportation. The rest of the day was filled with events that would be far more impactful than most days in his life.

The date was December 5, 2022. As an owner of Myers LP Gas, it was not uncommon for Steve to take a call from a customer relating to propane. On this particular morning, a customer told Steve he was concerned about a possible gas leak at his home. Steve hopped in his truck and drove from his office north of Washington to the customer's home located south of town.

After assuring the customer that the smell was nothing to worry about, Steve headed north to Washington. As he was traveling toward Washington, he felt a strange "tightness" in his chest. He dismissed the feeling as something minor such as heartburn and decided to continue north through town toward his office. As he approached the Hwy 50 bypass, he broke out into a cold sweat.

"I had received news earlier in the morning about my cousin's death," Steve recalled. "He had likely passed away from a heart attack. Since he was about my age, I started to think about what might really be happening to me at that moment. My first thought was to drive back to the office, but something told me to drive to DCH to get checked out."

By the time Steve arrived at the hospital a few minutes later, his condition had worsened. As soon as Steve told the admitting clerk what his symptoms were, a nurse immediately wheeled him back to a room where the DCH Emergency Department team collected vital signs, started IV's, gave medications, and called the cardiologist to inform them that EMS would be transporting Steve to the Cardiac Catheterization Lab in Jasper.

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RECIATION TO THE DCH TEAM

Unit Clerk Fran Hinkle called Steve's wife, Clara, to let her know what was happening. Clara arrived just as Steve was being loaded into the ambulance. He was feeling better at this point, but knew that a cardiologist would need to determine what was happening with his heart.

"I felt secure and confident that the proper people were taking great care of me at DCH," Steve remarked. "Many of the staff were familiar to me which gave me an added sense of comfort. Joan,

Fran, Jenny, Emily, Dr. Susec and Nick were fantastic!"

Once he arrived at the Cardiac Catheterization Lab, the cardiologist discovered that Steve had a rare blood clot located at the end of an artery which had caused the episode. "The good news was that the clot was in the best place it could possibly be," Steve recalled. "The cardiologist explained that they don't know what causes clots in these areas and that they used a "balloon" to move it out of the way and that I should not need any additional procedures."

He was released within a few days to return home and began

knew exactly what to do when I mentioned chest pain," he mentioned. Steve, a long-time resident of Daviess County, is very familiar with the staff and services at Daviess

Cardiac Rehab at Daviess Community Hospital a

I never felt "bad", but the Emergency room staff

few weeks later. "What I find remarkable was that

Community Hospital. "I am very "pro DCH"," he said. "I spent several years on the Board of Governors, and my family and I have used

> DCH for many procedures, therapies, lab work and other tests. My experience was second to none and I couldn't have asked for better care."

"We are so fortunate to have this hospital here in Daviess County," he said. "The renovations that are taking place now will only improve the patient experience as other renovations have done over the years."

Steve had never had any heart issues whatsoever until this event. While some signs of heart attack are well known, here are some things to indicate a heart attack is imminent. Symptoms of a heart attack vary. Some people have mild symptoms, while others have severe symptoms. Some people have no symptoms whatsoever.

Common heart attack symptoms include:

- Chest pain that may feel like pressure, tightness, pain, squeezing or aching
- Pain or discomfort that spreads to the shoulder, arm, back, neck, jaw, teeth or sometimes the upper belly
- Cold sweat
- Fatigue
- Heartburn or indigestion
- Lightheadedness or sudden dizziness
- Nausea
- Shortness of breath

Women may have atypical symptoms such as brief or sharp pain felt in the neck, arm or back. Some heart attacks strike suddenly, but many people have warning signs and symptoms hours, days or weeks in advance. Chest pain or pressure (angina) that keeps happening and doesn't go away with rest may be an early warning sign. Angina is caused by a temporary decrease in blood flow to the heart.

If you experience any of these symptoms, please call 911.

COVER PHOTO

Dr. Otto Susec, Steve Myers, Jenny Roberson, RN, Emily Davis, RN, Fran Hinkle, Unit Clerk

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EMERGENCY ROOM IS A BLESSING TO THE CREWS FAMILY

Amber Crews, RN, is a busy wife and mother. She puts in many hours caring for patients in the DCH Intensive Care Unit. In 2022, she also spent many hours at DCH's emergency room with family members. Each visit was unique, but every one of Amber's loved ones received excellent care.

As a DCH employee, she is familiar with the various departments within our facility, even if she doesn't directly work with them. In 2022, she gained a new appreciate for one particular department.

"In May of 2022, my step-daughter was involved in a car wreck," Amber began. "Due to the severity of her injuries, she was flown to a hospital in Indianapolis. My DCH family/team in the emergency department were wonderful with the care they provided her and the compassion they showed us during a very traumatic time."

Just two months later, Amber's husband, Derrick, was a patient in the DCH Emergency Department. "Derrick had participated in a lifting competition at our local Anytime Fitness," Amber recalled. "After the competition, he mentioned that he didn't feel well and had a terrible headache. It was too painful for him to even stand up, but he somehow drove himself to the DCH Emergency Department."

Dr. Otto Susec was the provider who treated Derrick that day and realized quickly that Derrick had possibly suffered a subarachnoid hemorrhage. A CT scan was performed and a radiologist read the results onsite and confirmed Dr. Susec's diagnosis.

bleeding in the space that surrounds the brain. It is life threatening and a medical emergency. It usually occurs in people over 40 years of age. It usually presents as the worst headache of your life.

Dr. Susec and the ED team prepared Derrick for a transfer to a larger hospital where a neurosurgeon performed a procedure to relieve the pressure in his brain. Derrick spent 11 days in a neuro ICU with a spinal drain and was required to stay home for 2 months after the procedure. All follow ups were 100% clear and he has had zero deficits to this day. "It was a miracle that Dr. Susec was the provider who treated Derrick and immediately suspected the cause of his condition," Amber said. "If it weren't for our emergency department, Derrick might not be here today."

In October of that same year, Amber's 8-month-old child, Israel, became lethargic and unresponsive. She immediately brought him to the DCH ED and was once again met by Dr. Susec. After the examination, Israel was immediately admitted to the ICU where numerous tests were run. The tests revealed that Israel had Rhino Virus and he was kept overnight for observation. He was later transferred to a hospital in Evansville.

Today, the members of the Crews family are all doing well. They are grateful for the care they have received close to home. "I don't know what we would have done if this hospital and the wonderful staff were not here to take care of us during all of these situations," Amber said. "My work family taking care of my family has meant the world to me."



INCREASED SECURITY AT DAVIESS COMMUNITY HOSPITAL

By Mike Grant

Reprinted with permission from the Washington Times Herald

Daviess Community Hospital's Board of Governors approved steps to increase security this fall at DCH. The board voted unanimously on a new security plan that included turning the hospital's security officers into a police force.

Immediately following their October meeting, board president Deron Steiner deputized the officers by having them take an oath of office.

"Thank you to the officers that serve," said Steiner. "Our staff and their safety are top priorities. This building is just brick and mortar, but when you put the staff in here, it becomes a hospital, a place of healing. We don't want it to become a place of violence and problems. Our staff is the first line of defense. They work hard every day, and they appreciate knowing you (security staff) will be here to protect and backstop them."

"What we have done is given our security personnel the authority so that they can act in a manner to keep our employees and patients safe," said Daviess County Hospital CEO, Tracy Conroy. "We have a couple of security officers who have not yet been to the police academy to get their training. They will get their eight-week training soon and then come back to protect the hospital."

The officers who were sworn in include John Ben Markley, Johnny Lagle, Justin Davis, Jacob Sims, and Caleb Lankford.

"Some are already police officers and won't have to go to the academy," said Conroy. "Right now, we have a hard time getting off-duty officers to be part of our security department. Now that the officers have been deputized and have the authority, we will have active-duty officers pick up shifts and assist in providing security while they continue to work for the local police departments."

DCH Board Chairman
Deron Steiner (far right)
gives the oath of office to
hospital police personnel
(L-R) John Ben Markley,
Johnny Lagle, Justin Davis,
Jacob Sims, and Caleb Lankford.

Local officials say the increase in authority for the security officers is at least, in part, a response to the growing issue of health care workers being the targets of attacks at work.

"These officers mean a lot to us. They keep us safe and protect our patients and staff which is very, very valuable," said Conroy. "Typically, violence had not impacted hospitals, but now it has and that has put all of us on high alert. We have had a couple of staff members attacked in our emergency department."

DCH is not putting all of its security upgrades in a single basket. Conroy says the hospital is working on a grant that would lead to more locked doors and surveillance equipment.

"We want to make sure our number one priority is protecting the hospital patients and staff," Conroy explained. "In order to do that we need to make sure we have adequate surveillance equipment. Doors that need to be locked stay locked. We have card readers both externally and internally to limit access. With our construction project, there will be card readers installed where only the staff can pass through. That is for the protection of everyone. We really are increasing our surveillance and video equipment monitors both externally and internally."

Conroy says that most of the assaults on staff happen in the emergency department. The hospital is currently in the midst of an \$8 million remodeling project that will include an expansion of the emergency department. Part of that project will involve putting the security office in the emergency department so that officers will be close at hand in the event of an altercation.

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DCH WELCOMES NEW GENERAL SURGEON

Daviess Community Hospital is excited to announce the addition of General Surgeon Marcus Kurucz, M.D. to the staff

of Washington Surgical Associates. Dr. Kurucz has seventeen years' experience in General Surgery in Southern Indiana. He joins Dr. Megan Stevenson and Dr. Alex Mathew, at the clinic located at 1401 Memorial Avenue in Washington.



Marcus Kurucz, M.D.

Dr. Kurucz graduated from Loyola University in Chicago with a bachelor's degree in chemistry and biology, and received his medical degree at American University of the Caribbean in Coral Gables, Florida and St. Maartan.

His residency in general surgery included training at Mayo Clinic Graduate School of Medicine in Rochester, Minnesota; West Virginia University in Morgantown; University of Connecticut in Hartford; and Carraway Methodist Medical Center in Birmingham, Alabama, where he served as Chief Surgery Resident. Dr. Kurucz is certified by the American Board of Surgery.

Dr. Kurucz and his family enjoy snowboarding in Utah and surfing at Patoka Lake.

To schedule an appointment with Dr. Kurucz, please call Washington Surgical Associates at 812-254-8856.

ELKE'S STORY

It's no secret to those who know Elke Guratzsch that she takes her health seriously. She has exercised most of her life and prefers to eat her own home cooking to most other food options. She enjoys canning and freezing the "fruits of her labor" every year from her own garden.

For these reasons, her friends and family were stunned when they heard the news that she had experienced a heart attack in August of 2023.

Elke distinctly recalls what led up to the heart attack. "Just a few days after my 65th birthday, I had a root canal at my local dentist office," she explained. "The next day, I had a burning in my throat and dismissed it as something related to the antibiotic I had been given the previous day."

The burning came and went throughout the next day. When Elke woke up early Saturday morning, the burning in her throat was much worse, but she was somehow able to fall asleep again.

"I got out of bed to brush my teeth and felt very "clammy" and was gagging to the point that I had to lay down again," Elke recalled. "I had read somewhere that jaw pain and nausea are signs of a heart attack in women and I knew my husband, Frank, needed to get me to the hospital quickly."

Frank immediately drove Elke the short distance to the Daviess Community Hospital Emergency Department where the ED crew took immediate action.

"They took me seriously when I said I thought I was having a heart attack," Elke said. "There were so many people in the room that I knew they were doing whatever they needed to stabilize me. Everything the staff did was fantastic. I have no doubt that they saved my life!"

The DCH Emergency Department team collected vital signs, started IV's, gave medications, and called the cardiologist to inform them that EMS would be transporting Elke to the Cardiac Catherization Lab in Jasper.

Once she arrived at the Cath Lab, tests revealed that Elke had a 100% blockage resulting in one stent. She was released within a few days to return home and began her Cardiac Rehab at Daviess Community Hospital a few weeks later.

When a patient arrives at Daviess Community Hospital complaining of chest pain and other symptoms of a heart

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attack, the staff immediately begin the process of evaluating the patient and performing an EKG. The American College of Cardiology and the American Heart Association guidelines call for an EKG within ten minutes of arrival with chest pain. The average time from the call to completion of the EKG is **four minutes** at DCH.

A Respiratory Therapist carries the "chest pain phone" or "bat phone" which the Emergency Department unit clerk or nurse calls to inform the therapist of a patient with chest pain. The team has an average response time of 3.8 minutes, comparing the documented arrival time in the Emergency Department with the actual time stamp printed on the EKG tracing.

"Our goal for entering our door to the patient receiving care on the table in the cath lab is 90 minutes — and we run under 90 minutes consistently," said Chrissy Wininger, Director of Emergency Services. "If we get the diagnosis by EKG within four minutes of the patient's arrival, it stands to reason the patient will get to the cath lab sooner as well. For every minute passing during an MI (heart attack), heart muscle is dying. Time truly is of the essence when a patient is experiencing a heart attack."

"The success of this process is a direct result of teamwork here at DCH between the Emergency department admitting clerks, unit clerks and nurses as well as the respiratory therapists," stated Nancy Devine, Chief Nursing Officer. "We've worked together to positively impact direct patient care. The staff involved are proud of the results!"





"Frank and I have used Daviess Community Hospital in the past," she remarked. "It is a great place for healthcare needs in our community. They connect you with higher level care if you need it."

Two weeks after her heart attack, Elke became a patient of the DCH Cardiac Rehab department where she met therapist Connie Wilson MSN, RN, CCRP, CCEP. During her initial visit, the Cardiac Rehabilitation staff spent time getting to know Elke's story and assessing risk factors for heart disease. This visit allows the staff to develop a personalized rehabilitation program.

"The program typically consists of therapy 3 times per week for 12 weeks, including aerobic exercise, dietary information, and stress management," Connie Wilson explained. "Each patient is monitored by cardiac telemetry and blood pressure is assessed at each visit to help the physicians control that risk factor."

The rehab staff works with the patient's local physicians to provide information that will allow the doctors to adjust medications when necessary. Patients exercise with others who also have heart issues to get extra support from the people that are attending rehab with them. Exercise is a key component to regaining strength and stamina.

Elke is happy to be back doing yoga regularly and was able to travel to Germany and Austria just four weeks after her heart attack. "I want to say thank you to the staff at DCH who took great care of me and takes great care of our community," Elke said. "I couldn't have asked for better care."

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DCH ACUTE CARE UNIT NOW OPEN

Daviess Community Hospital is pleased to announce the opening of the DCH Acute Care Unit. Located on the second floor of the hospital, this latest in expansion of services for the organization combines the former Med Surg Unit with the Intensive Care Unit.

The new space offers patients and their loved ones a new level of comfort and care, with sixteen private patient rooms featuring the latest amenities and cutting-edge technology. Careful consideration was taken in the design of the new center, as the DCH staff took an active role in planning for patient accommodations.

Daviess Community Hospital is grateful for the generosity of donors who have already pledged to support the renovations for both the Acute Care Unit as well as, the Emergency Department. They include: Chet & Pat Thompson, Tom and Marsha Boyd, First Federal Bank, Myers LP Gas, Jim and Sue Pearson, Jordan and Ashley Sherman, NASCO Industries, Joe Wagler, Dr. Thomas Waits, Dr. and Mrs. Greg Brown, Nancy Devine, Daviess Community Hospital Auxiliary, Dr. Suresh Lohano, True Scripts Management Services LLC, and to the many additional organizations and individuals who have given to the fundraising campaign, but wish to remain anonymous.

Grant funds and proceeds from the 2022 and 2023 foundation events, including the golf outing, year-end



employee appeal, 5k, and the Kentucky Derby event also provided support for this project thus far.

The Foundation Board at Daviess Community Hospital committed to raising \$1,000,000.00. They are confident that the goal will be reached within the next several months.

"At Daviess Community Hospital, we understand that healthcare is changing," remarked Tracy Conroy, CEO. "It is our mission to provide patients with the most compassionate and advanced care in our region. With the support of our community, the newly renovated Acute Care Unit and the upcoming renovation of the Emergency Department will help us achieve just that. We are committed to providing the utmost comfort and convenience to our patients during their hospital experience."

A blessing and two open houses took place on December 14th and December 15th. The first patient was admitted to the new unit on December 19th.

For more information about the DCH expansion and Foundation fundraising efforts, contact Angie Steiner at 812-254-8858.