Taylor Federly will celebrate her first birthday in September.
A Word From Our President and CEO

As the weather warms up and the outdoors begins to blossom, we’re often reminded of new beginnings.

At UnityPoint Health – Des Moines, we celebrate every new beginning with our patients. Recently, we put that celebration to music! Read about our new tradition of playing a lullaby after every birth on page 3.

We’re also celebrating the arrival of innovative new programs at our facilities. Turn to page 6 to learn how iRound is adding another dimension to patient care—allowing physicians and other providers the opportunity to spend more time offering personalized care at the bedside.

Also in this issue, you can read about a recent recognition of UnityPoint Clinic’s medical home program (page 3).

We encourage you and your family to get out and about this summer—and Live Well!

Sincerely,

Eric Crowell
President & CEO

Off to the Races for Organ Donation

Joey Gase, NASCAR Nationwide Series driver and donor family member, joined us in April to kick off Donate Life Month to raise awareness about organ and tissue donation. Joey’s mom, Mary Jo Gase, died of a brain aneurysm in April 2011, and her family chose to donate her organs.

Jordan Shaw, who received a kidney transplant from Mary Jo, also attended our kickoff event. We were honored to have Joey and Jordan share their stories of hope and giving.

Interested in becoming an organ donor? Visit iowadonornetwork.org.

Mark Your Calendar!

Join us for these fun upcoming events.

Downtown Farmers’ Market
Sat., May 3–Oct. 25
Court Avenue District

Yoga in the Park
Saturday mornings, June–September
Grays Lake Park

Understanding Me! A Mother/Daughter Workshop
Saturday, June 28
Iowa Methodist/Blank Children’s campus

Girls’ Night in the Village
Thursday, Sept. 18
Iowa State Historical Building

UnityPoint Health – Des Moines will also be participating in the Principal Charity Classic (May 27–June 1), Dam to Dam (May 31), 80/35 music festival (July 4 & 5) and Hy-Vee Triathlon (August 31). For more events, visit unitypoint.org/livewell.
To take a virtual tour of our maternity centers and learn about all the ways we make the birthing experience special, visit unitypoint.org/pregnancy.

Every time a baby is born at a UnityPoint Health – Des Moines maternity center, the whole hospital shares the family’s joy.

We started a tradition in January 2014: Following each birth at our maternity centers located within Iowa Methodist Medical Center, Iowa Lutheran Hospital and Methodist West Hospital, an instrumental version of “Rock-a-bye Baby” plays throughout the hospital to celebrate the new arrival. Parents and siblings are invited to push a button to start the tune that lets everyone know they’re beginning a wonderful new chapter in their lives. “Big brothers and sisters get so excited about pushing the button—often, they say, ‘I want to do it again!’” says Stephanie Nusbaum, MSN, RN, manager of maternity services at Iowa Lutheran and Methodist West. “The lullaby brings happiness to families and staff alike. Some employees keep count of the number of times the song plays and remark to our maternity staff, ‘Oh, you were busy today! I heard so many lullabies!' Hospitals aren’t always happy places, but the music uplifts everyone and reminds them of the renewal of the circle of life.”

That reminder makes for a pretty special birthday gift.

UnityPoint Clinic Earns Medical Home Recognition

Seven UnityPoint Clinic locations in the Des Moines area were recently awarded recognition by the National Committee for Quality Assurance (NCQA) Patient-Centered Medical Home (PCMH) 2011 Program.

UnityPoint Clinic is transforming its primary care practices to the medical home model, which promotes systematic, patient-centered, coordinated care that supports access, communication and patient involvement.

“The NCQA PCMH is a model of 21st-century primary care that combines access, teamwork and technology to deliver quality care and improve health,” says Margaret E. O’Kane, NCQA president. “NCQA’s PCMH 2011 Recognition shows that UnityPoint Clinic has the tools, systems and resources to provide patients the right care at the right time.”

“A medical home emphasizes the importance of an ongoing patient-provider relationship to ensure an individual’s health is managed appropriately over time,” adds Patricia Newland, MD, physician lead of the medical home implementation team for UnityPoint Clinic. “The provider leads a team of nurses, medical assistants and other staff who are collectively responsible for providing or coordinating the care, education and support that patients need.”

To find a UnityPoint Clinic primary care provider in your community, visit unitypoint.org.

The Sweetest Sound

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Taylor’s parents—Jeremiah, a stay-at-home father, and Tara, a physician specializing in pediatric and adult allergies—were overjoyed to learn they were pregnant with their second child in April 2013. The Norwalk couple and parents of then 1-year-old Samuel knew two things: The new baby would complete their family, and its gender was unimportant.

“When someone asked if we wanted a boy or girl, we always told them, ‘It doesn’t matter, as long as the baby is healthy,'” Tara says.

On Sept. 1, Tara’s uneventful pregnancy took a drastic turn. Her quiet Labor Day weekend at home was interrupted by severe abdominal pain and pressure. Jeremiah drove her to Iowa Methodist Medical Center, where physicians ordered an emergency cesarean section. The couple’s baby had only reached 24 weeks’ gestation. (Babies born between 39 weeks, zero days, and 40 weeks, six days, have better outcomes compared to those born before or after that full-term period, according to the American College of Obstetricians and Gynecologists and the Society for Maternal-Fetal Medicine.)

“The obstetrician was unable to detect fetal heart tones, and it became clear that although I was only at 24 weeks’ gestation and had not received any steroids to allow our baby’s lungs to develop, the baby had no chance of survival if we waited any longer,” Tara says. “Everything happened so
quickly, and of course, as a physician, I knew too much. So many thoughts were going through my head, but all I could say was, 'It's too early.'"

The last thing Tara heard before the anesthesia took effect was two nurses and Samir Alabsi, MD, neonatologist and medical director of the Neonatal Intensive Care Unit at Blank Children's Hospital, taking turns telling her, “We are going to do everything we can for your baby, Tara.”

A Fierce Will to Live

Taylor fought for her life from the moment she entered the world weighing 1 pound, 6 ounces—her heart was failing, her skin was pale blue and severe respiratory distress syndrome made breathing difficult. Initial efforts to revive her using a breathing tube were unsuccessful.

“We continued aggressive resuscitation attempts by massaging Taylor’s heart, providing her with positive pressure ventilation, placing catheters in her umbilical cord stump, and administering medication and fluids to stimulate her heart to work and improve her circulation,” Dr. Alabsi says. “Finally, she responded and was placed on a ventilator before being transferred to the NICU for full-time monitoring. After a few more hours, she was stable.”

Tara, who spent months training in the NICU at Blank Children’s as a medical resident, was unprepared for the emotional highs and lows of seeing her own child connected to a breathing machine and intravenous lines, undergoing procedures, and battling brain bleeding, pneumonia, a blood infection and retinopathy of prematurity (a condition that can cause blindness).

“If you have a child in the Neonatal Intensive Care Unit [NICU], ensure you take care of yourself. As a mother of two, it was tough to think about myself first, but I needed to feel as rested and healthy as possible so I could be strong and full of hope for my daughter and maintain a fairly normal routine for my son.”

—Tara Federly, MD, whose daughter, Taylor, spent 141 days in the NICU at Blank Children’s Hospital from September 2013 to January 2014

Home and Whole

As months passed, Taylor slowly improved. On Jan. 20, 2014, after spending 141 days in the NICU, she finally went home with her parents. Her life today involves a steady stream of specialist appointments, but she’s breathing on her own without supplemental oxygen, bottle-feeding, gaining weight and meeting all of her developmental milestones. Her retinopathy of prematurity has completely resolved.

“I truly believe miracles happen every day in the Blank Children’s NICU,” Tara says. “Jeremiah and I knew Taylor was a fighter after she survived the first few days,” Tara says. “We appreciated the NICU’s family-centered approach and the opportunity to be intimately involved in the decisions her medical team made. Whenever we were conflicted about how to proceed or needed more details about a treatment plan, everyone was more than willing to meet with us at any time and answer every question we had. The support we received from the staff at Blank Children’s was exceptional and helped us through a very difficult time in our lives.”

A Haven for the Most Fragile

Forty years after the Neonatal Intensive Care Unit (NICU) at Blank Children’s Hospital opened, it achieved one of its most important distinctions: the highest newborn care designation offered by the American Academy of Pediatrics (AAP).

In late summer 2012, the AAP updated its 2004 NICU classifications. Rankings range from Level I—nurseries that care for low-risk infants born at 35 weeks’ gestation or later—to Level IV, facilities specializing in caring for babies born at 32 weeks’ gestation or earlier, as well as those with severe weight deficiencies or medical problems. Our 44-bed NICU is a regional Level IV referral destination with a dedicated air and ground transport team available around the clock.

“Our unit offers a variety of intensive therapies for micro-preemies and infants with defects of the brain, lungs, heart, bowels and kidneys, as well as those with genetic abnormalities and severe birth depression,” says Samir Alabsi, MD, neonatologist and medical director of the NICU at Blank Children’s. “Neonatologists, neonatal nurse practitioners, neonatal nurses, and board-certified pediatric and pediatric surgery specialists work together to give babies their best chance of survival when they’re most vulnerable.”

To take a virtual tour of the NICU at Blank Children’s, visit blankchildrens.org and search “NICU.”
One-on-one interaction is an integral part of patient care. Now, a new tool called iRound™ for Patient Experience is helping UnityPoint Health – Des Moines use those moments to improve your hospital stay.

Medical professionals at UnityPoint Health – Des Moines perform rounds every day. During rounds, we visit patients and ask questions to make sure all their needs are being met and learn how we can improve their experience.

“Rounding is a simple and effective way to hear directly from our patients,” says Christopher Kirschbaum, RN, MSN, manager of Nursing Services on Younker 7 Medical Surgical Inpatient department at UnityPoint Health – Des Moines. “In my department, our patients are with us anywhere from several days to more than a month. Each of them is seen regularly by the doctors and nursing staff, and each is part of our rounds at least once during his or her stay.”

A New Approach

In the past, Kirschbaum had to print out questions to go over with his patients, take handwritten notes during rounds and transcribe them into a database.

The iRound system streamlines that process. UnityPoint Health – Des Moines medical professionals collect data directly from the iRound application during rounds. Information is processed right away, and results can be compared, reviewed and acted on the same day.

“We’ve had a lot of great feedback about iRound from our patients and from the staff,” Kirschbaum says. “They can tell we take their comments seriously. I review iRound data every day, so it’s simple for me to address concerns and pass on feedback to our associates in real time. This helps us be proactive instead of reactive.”

Putting You First

The iRound tracker is just one of the ways we put patients first at UnityPoint Health – Des Moines.

Checking In at Your Bedside

At the change of every shift on Younker 7, the outgoing nurse and incoming nurse meet with each patient at the bedside to discuss the plan of care and goals. It’s called Bedside Reporting, and it helps make the transition as simple as possible and keep patients involved in their own care.

This Is a No Pass Zone

An alarm or call light is a priority for all hospital employees, from department heads to housekeeping staff. In fact, UnityPoint Health – Des Moines is a No Pass Zone. That means if there’s an alert, the first associate to pass your door will check in, even if it’s just to find out what you need and report it to the appropriate team.

Introducing iRound

“"The iRound system went live in December, and we are in the process of growing the program to include all departments. This system helps us continue giving patients the individual care and experience they deserve.”

—Paige Moore, MHA, marketing and planning information strategist at UnityPoint Health – Des Moines
The Food and Drug Administration is proposing several changes to the nutrition label on food packages—the first redesign in 20 years. Officials say the update is necessary to keep pace with the science of nutrition, the fight against obesity and an overall shift in consumer behavior.

Under the changes, serving sizes will be made easier to understand, calories will be featured more prominently and, for the first time, added sugars will be included. A recent study conducted by the U.S. Department of Agriculture found that the number of people who rely on nutrition labels when they’re grocery shopping is on the rise. About 42 percent of working-age adults and 57 percent of older adults now say they consider the nutrition label when they’re selecting their food.

Changes to the New Nutrition Facts Label

Some changes in the proposed labels include:

• A refreshed format that emphasizes certain elements, such as calories, serving sizes and percent daily value
• A label that displays, “added sugars.” On average, Americans eat 16 percent of their daily calories from sugars added during food production.
• Elimination of the listing “calories from fat.” Total, saturated and trans fat will still be required.
• A more prominent listing of the number of servings per package. In addition, “amount per serving” will now have the actual serving size listed instead of “amount per cup.” Many brands attempt to make their products look healthier by listing the nutrition facts for an artificially small serving size.
• Listing for levels of potassium and vitamin D, two nutrients many Americans need more of in their diets. Levels of vitamins A and C content will no longer be required on the label.

Did you know food labels in the United States are getting a makeover that aims to reduce the nation’s chronic health woes?

Eating a healthy and balanced diet is one of the best things you can do for your body.

The Nutrition Centre located at Iowa Methodist Medical Center and Iowa Lutheran Hospital offers a variety of services and programs from registered dietitians to keep you healthy.

With obesity and obesity-related illnesses on the rise, the Nutrition Centre understands the health care needs and problems that you face on a daily basis. Our registered dietitians can create a nutrition package developed specifically for you that will guide you to healthier living.

For a listing of classes and programs offered by the Nutrition Centre, visit unitypoint.org and search keyword “nutrition.”
Help for Troubled Tummies

When your child has a digestive disorder, our gastroenterology specialists have the expertise to help get things moving.

The Pediatric Gastroenterology (GI) Clinic at Blank Children’s Hospital offers specialized diagnostic testing and treatment for digestive disorders in children from infancy through adolescence. The GI Clinic provides children comprehensive care for diseases of the gastrointestinal tract (including the stomach, esophagus, small and large intestines, liver, and pancreas) in a warm and comforting environment.

“We understand that when your child is sick, you want to make him or her better as soon as possible,” says Eduardo Carlin, MD, pediatric gastroenterologist at Blank Children’s. “Because there are four gastroenterologists available to see patients in the GI Clinic, we can make a same-day appointment if the primary care provider thinks the patient needs it.”

Specialists at the GI Clinic provide advanced care for a wide variety of common pediatric gastrointestinal illnesses, as well as more complex conditions, including:

- Bile duct disease
- Celiac disease
- Chronic abdominal pain
- Chronic diarrhea
- Colon polyps
- Constipation
- Crohn’s disease
- Cyclic vomiting syndrome
- Encopresis (fecal incontinence)
- Eosinophilic esophagitis (EoE disease)
- Gastroesophageal reflux disease (GERD)
- Inflammatory bowel disease (IBD)
- Irritable bowel syndrome (IBS)
- Liver diseases, including hepatitis infections of the liver
- Pancreatic diseases
- Peptic ulcer disease
- Short bowel syndrome (intestinal failure)
- Ulcerative colitis

“We have the capability to perform a variety of different procedures to aid in the diagnosis of GI conditions,” Dr. Carlin says. “We also work in close contact with physicians in other subspecialties, and they are always available if we need any input from them.”

After performing a thorough evaluation, the GI Clinic develops a personalized treatment plan to fit your child’s and family’s needs. The staff of the GI Clinic also coordinate all aspects of your child’s care, connect you with resources to help you understand your child’s condition, and offer guidance and support throughout the entire treatment process.

The Blank Children’s GI Clinic is located at 1212 Pleasant St., Suite 204, in Des Moines. For more information or to schedule an appointment, call (515) 241-6542.