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healthcares

Pomona Valley Hospital Medical Center Foundation



AMAZING!

A SAFE & SWIFT PANDEMIC **BIRTH**

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Some photos in this issue were taken
prior to the requirement of masks

Featured on the cover:
Angelita & Jesús Gamez

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Fueling our Associates, their families and local businesses with the **Generous Gift of Food**

Early in the COVID-19 pandemic, Gordon and Susan DesCombes recognized the numerous impacts the public health crisis was having on our community – from the toll battling this new virus was taking on our Associates to the economic impact it was having on our local businesses.

The DesCombes family found a way to support our frontline healthcare workers and local restaurants by providing several thousand take and bake pizzas, enchiladas, pasta and salad from area restaurants – Pizza N’ Such, Cheese Cave and Espiau’s – for our Associates to take home and enjoy with their families. After working long, strenuous shifts providing compassionate care for our patients with COVID-19, it was truly a blessing for our Associates to have quick, easy, nourishing meals to prepare for their families.

Pomona Valley Hospital Medical Center (PVHMC) and the DesCombes family truly appreciated the tremendous support from these restaurants and how they were able to pivot from their typical menu offerings to prepare take and bake meals for our Associates.

“We were inspired by the Hospital’s frontline healthcare workers who faithfully went to work each day when there were so many unknowns about this new virus,” said Gordon DesCombes. “At the same time, we were saddened to see how local businesses were struggling during the shut-down and we wanted to find a way to support them also. The idea to provide meals for the Hospital’s dedicated Associates from local restaurants allowed us to combine our desire to support both.”

More recently, the DesCombes family stepped up again to support our Associates and local businesses by purchasing gift cards for 2,000 of our Associates to use at area restaurants and coffee shops including Pizza N’ Such, Cheese Cave, Espiau’s, The Reverse Orangutan, Nuno’s Bistro and Bar and The Euro Cafe. Being able to get a boost from their favorite coffee beverage or pick up a delicious meal has been a welcomed treat for our Associates.

DesCombes family members joined by President/CEO Richard E. Yochum, FACHE, restaurant owners, and PVHMC Associates



“We are incredibly grateful to the DesCombes family for the extraordinary gifts given to our Associates during the pandemic, said Leigh Cornell, FACHE, Vice President of Administration. “We saw the smiles and comfort their many gifts brought to our Associates and their families.” Gordon and Susan DesCombes’ generous gifts to support our Associates and Claremont businesses during the COVID-19 pandemic came at such a critical time for the Hospital and the small businesses in our community.

The DesCombes family has a long-standing relationship with the Hospital that began many years ago with Gordon’s parents. Susan’s parents were also passionate about providing philanthropy within Pomona, where they ran a small business and were pillars of the community. Gordon is now carrying on the family tradition by serving on the Hospital’s board of directors. ●

CHAIRPERSON'S *message*

At Pomona Valley Hospital Medical Center (PVHMC), we are incredibly grateful to be at the forefront of providing the latest COVID-19 treatments, while meeting all the other healthcare needs you and your family might require. As our caregivers continue to work around the clock, words cannot express our gratitude to each and every donor whose gifts have helped us address the extraordinary challenges of this pandemic.

Now, we need our community's incredible capacity for generosity more than ever.

Throughout the Hospital, we're being asked to do more with less, even as demand for our services increases. We've implemented numerous new programs and policies to help keep our community, Associates and Physicians safe during this public health crisis. We're bringing in outside resources to continue meeting the needs of the community. Our Associates have been filling the gaps left by our Volunteers, who had been staying safely at home. We're using more personal protective equipment than ever before and administering COVID-19 tests for every patient admitted to the Hospital or brought in for an outpatient procedure. We carried out a successful vaccination program for our staff. Now, we continue to use every means possible to bolster morale and support our Associates, who are still feeling the effects of stress yet showing tremendous courage. These efforts have required an unprecedented level of financial expenditure.

Our Associates and Physicians continue to maintain the excellent care for which our Hospital is known. They carefully clean and prepare rooms for patients. They hold hands and provide emotional support to patients. Our Associates stay as positive as possible and celebrate every good moment.

Just as our Associates are showing resilience during this challenging time, we ask you to sustain your support for our Hospital. Your philanthropy is particularly critical as we emerge from this crisis. Having the best medical teams and facilities close to home has never been more important for our community. Our community needs our Hospital – and we need you.

We are thankful for gifts of any amount. Each one makes a difference. Thank you for doing what you can to help us continue to save lives and bring comfort to our patients and families.

After 32 years with Pomona Valley Hospital Medical Center Foundation, we say goodbye to Glenda Ferguson, Director of Development. She retired January 4, 2021 to begin a new chapter of her life. We appreciate her years of service and commitment to the Hospital. She will be missed. ●

To contribute to the PVHMC Foundation COVID-19 Fund, go to pvhmc.org/giving-support and click on *Make a Donation*. To donate supplies, call the Material Management Department at 909.630.7410.

Dr. M. Hellen Rodriguez



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The news was electrifying: the Los Angeles County Department of Public Health had received the Pfizer COVID-19 vaccine. The challenge was, Pomona Valley Hospital Medical Center (PVHMC) had to pick up its allotment in downtown Los Angeles and keep the precious serum about as cold as winter in Antarctica during the hour's drive back to the Hospital. "We didn't know how, but we were going to figure it out," said Leigh Cornell, PVHMC Vice President of Administration.

Even an ice truck wouldn't be cold enough to protect the integrity of the vaccine on its journey back to PVHMC. The Hospital's teams raced to find a solution. The Hospital had a freezer that was modified and would fit into the Hospital van. But it wasn't large enough to store PVHMC's entire vaccine allotment. No problem; the Facilities and Purchasing teams located another portable ultra-low temperature freezer in Central California and PVHMC Associates drove hours round-trip to procure it. Would the ultra-low temperature freezer they'd purchased to store the vaccine fit into a Hospital van? Yes! Then, the Associates securely fastened both freezers into the van and tested them. At 8 a.m. on December 17, 2021, with Security on board just in case, they set out for downtown L.A.

They were back with the vaccine by 10 a.m. Meanwhile, other teams at the Hospital put their plans into action and transformed Pitzer Patio into a temporary vaccination clinic. By 2 p.m. the same day, front-line PVHMC patient care Associates were receiving their first doses of the potentially life-saving fluid.

"It was an amazing demonstration of teamwork, determination and resourcefulness," Leigh said. "Nothing was going to stop us from distributing this vaccine as soon as we safely could."

The vaccine wasn't just for PVHMC Associates. In early January, the Hospital realized it had enough vaccines (now shipped directly from Pfizer) to reach out to healthcare professionals and first responders in the community under Phase 1a of L.A. County's vaccination roll-out plan.

"When the County gave us the okay, we contacted local community clinics, EMS agencies and other first responders," Leigh said. "And it just exploded. At one time, we had as many as 800 people in a line wrapped around the Hospital. At our height, we gave out 200 vaccines an hour; 1,400 doses in one day."

By the first week of June, PVHMC had administered over 24,000 first and second doses of the Pfizer vaccine at its clinics, with more than 3,000 of them going to community first responders and front-line healthcare workers. "They were so gracious and thankful they could receive the vaccine and we felt good that we were able to do our part to support our local community," Leigh added.

In February, a dozen PVHMC Associates volunteered their time at an L.A. County-run vaccination clinic at the Fairplex in Pomona. It's one more example of PVHMC Physicians' and Associates' commitment to the health and safety of our community. Additionally, PVHMC was approved by the County as a Point of Dispensing (POD) site as the vaccine roll-out continues. PODs are temporary distribution sites that use a combination of volunteers, county staff and others.

"We're so fortunate and so grateful to everyone who has enabled PVHMC's efforts to get us out of the darkness that is the COVID-19 pandemic," Leigh said. "We've had college volunteers helping our own teams of Nurses, Pharmacists, IT department, Materials Management and Environmental Services specialists. Anyone and everyone who could assist, did. It's been an incredible team effort." ●

PVHMC administers COVID-19 vaccine to Associates, first responders and the community



Infection prevention and control have always been top priorities at Pomona Valley Hospital Medical Center (PVHMC). During the COVID-19 pandemic, we've seen just how critical this work is. After more than a year on the front lines battling the virus, our Infection Prevention team continues to ensure that patients, visitors, Associates and Physicians at PVHMC are safe and protected.

"When the first alert about COVID-19 came to us from the Centers for Disease Control and Prevention (CDC), we communicated with leadership and affected departments immediately," said Mamta Desai, BS, CLS, MBA, CIC, Director of PVHMC's Epidemiology and Infection Prevention Department. "We activated a task force by the end of January 2020. By mid-February, we'd completed our risk assessment and had a plan of action for this emerging infectious disease."

Our Heroes:

THE PVHMC INFECTION PREVENTION TEAM

OUR INFECTION PREVENTION TEAM

(l to r): Jessica Legge, RN, Infection Preventionist; Mamta Desai, BS, CLS, MBA, CIC, Director of Epidemiology & Infection Prevention; Daniel Gluckstein, MD, Medical Director of Infectious Diseases; Darlene Scaffidi, MSN, RN, NEA-BC, Executive Vice President of Patient Care Services; Donna Lira, RN, CIC, Infection Preventionist and Yesenia Khattak, CIC, Infection Preventionist. Not Pictured: Donna Okamoto, Data Analyst.



The strategic action plan involves the entire Hospital. It includes securing sufficient supplies of personal protective equipment (PPE); maximizing COVID-19 testing capabilities; ensuring patient rooms and public areas were sanitized; maintaining the Hospital's heating, ventilation and air conditioning (HVAC) systems; and using our COVID-19 portal to communicate rapidly changing recommendations from the CDC and public health agencies to Associates who are safely caring for patients. Every Hospital Associate has a role in keeping each other safe.

The Infection Prevention team rallied together to stay on top of the rapidly evolving information about the virus and provide ongoing guidance to the Hospital and the community. Daniel Gluckstein, MD, Medical Director of Infectious Diseases, stays current with the latest guidance from the CDC and local health agencies. He was first to sign up with the Mayo Clinic's National Clinical Trial of convalescent plasma for patients with COVID-19 who might benefit from this treatment. He and the team have been instrumental in keeping Physicians apprised on the most effective treatments for COVID-19.

"It's hard to imagine how much we've learned since the first reports came in from China in January 2020 and we saw our first COVID-19 patient in March," said Dr. Gluckstein – the Dr. Fauci of PVHMC. "As the data and recommendations have changed, we've revised our policies and procedures, educated staff and made it happen. We have a steering committee that meets regularly to discuss new information and then funnels it down to the appropriate task forces. We've also done an incredible amount of work collecting data, reporting cases to public health authorities, and tracking treatments and outcomes."

Whenever the evolving guidelines from the CDC and local public health agencies caused confusion, the Infection Prevention team is the definitive source of information for PVHMC.

"Darlene Scaffidi, RN, MSN, NEA-BC, Executive Vice President of Patient Care Services, is very supportive," Mamta said. "She tells people 'if you have a conflicting message, go to the Infection Prevention Department and ask the team.' Hospital Leadership trusts that we are providing the right information to our Associates."

One of the greatest early successes was securing enough supplies so Associates felt safe coming to work and taking care of patients. "Our Hospital is a safe place for patients to come if they need healthcare," Dr. Gluckstein said. "People with health issues do not need to put off treatment because of concern for acquiring COVID-19 at PVHMC."

Mamta, whose global thinking about how to empower Associates and Physicians with COVID-19 knowledge has been instrumental, is inspired by how the Hospital has risen to the challenge. "I'm so proud of the organization I work for, and the great, competent team in my department," she said. "We can depend on each other."

"It's been amazing," Dr. Gluckstein agreed. "Seeing everybody pull together as a team has been really satisfying. I couldn't be prouder of PVHMC and the amount of effort, teamwork, consistency and understanding that I've seen throughout the entire organization." ●

To support the exceptional patient care at PVHMC, please contact James Dale, Vice President of Development at james.dale@pvhmc.org, call 909.469.9408 or go online at pvhmc.org/giving-support.



We activated a task force by the end of January 2020. By mid-February, we'd completed our risk assessment and had a plan of action for this emerging infectious disease.



MAMTA DESAI, BS, CLS,
MBA, CIC

DIRECTOR OF PVHMC'S
EPIDEMIOLOGY AND
INFECTION PREVENTION
DEPARTMENT



ELI KAMREKIAN
is the Laboratory
Director for the internal
laboratory that tests
every person admitted
to the Hospital, or
undergoes
outpatient surgery

FAST TURN



PVHMC'S **RAPID, COVID-19 TESTING** AIDS PATIENT CARE

In the early days of the pandemic, Pomona Valley Hospital Medical Center (PVHMC) was **one of the only hospitals in the region** to do all of its COVID-19 testing in-house, resulting in fast turnaround times that help caregivers quickly provide the most appropriate care to patients.

"Every person admitted to the Hospital or who undergoes outpatient surgery is tested for the virus whether they have symptoms or not. The ability to get the results in one to three hours allows our Physicians to make faster and better decisions about delivering the best care," said William Hall, MBA, RRT, RCP, PVHMC's Executive Director of Ancillary Services.

The Hospital purchased three additional analyzers, reconfigured part of its internal Laboratory and hired additional staff so that it could do all of its own COVID-19 testing, according to Eli Kamrekian, CLS, MT (ASCP), MBA, Laboratory Director.

"We provide FDA-authorized rapid testing that is of very high quality and ensures that our patients are quickly taken care of," he said.

When the pandemic first hit, PVHMC had only one instrument to do COVID-19 testing and sent many of its tests to outside labs. The Hospital had to wait anywhere from two to eight days to get the results back.

AROUND!

"Until we know the results of their test, caregivers don't know the best way to treat them," Eli said. "With the support of many other departments in the Hospital, we're on the cutting edge of having the most appropriate, accurate COVID-19 testing."

The Lab also performs COVID-19 antibody testing and receives convalescent plasma from the Red Cross, through a program at the Mayo Clinic, as one tool for treating patients with COVID-19. "Antibody testing lets you know if you've been exposed to COVID-19 and probably had it in the past," Eli said. "Last spring, we thought it was a promising way to tell if you were immune, but unfortunately that's not the case."

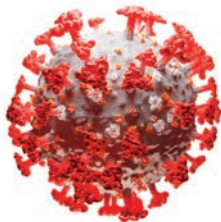
Convalescent plasma uses blood from people who've recovered from COVID-19 to help others fighting the virus. The plasma may help lessen the severity or shorten the duration of COVID-19.

"We have been putting the pedal to the metal to care for our patients in these unusual times," Eli said. "Our Associates understand that their work matters and that the patients they're treating are members of their community. They're putting 100 percent effort in to meet the needs of the patients who depend on us for care." ●

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POST-COVID RECOVERY

HELPS "LONG HAULERS"



Some people who have had COVID-19 are finding their symptoms related to the virus continuing for many months. Shortness of breath, persistent fatigue, cognitive "brain fog" issues, difficulty eating and drinking, speech and language problems, cardiac issues, plus the anxiety or depression that can often be associated with the lengthy recovery from this new virus that we still have so much to learn about. It can affect almost every aspect of life and make resuming previous activities harder than expected.

To combat the complicated, multi-layered process of post-COVID-19 recovery, Pomona Valley Hospital Medical Center (PVHMC) now offers a comprehensive "Post-COVID Recovery" program designed to help COVID-19 "long haulers."

Pulmonary Rehabilitation-certified Respiratory Therapist, Tammy Magill, RRT, leads a highly skilled multidisciplinary therapy team who carefully evaluates symptoms, tests each patient's underlying physiologic impairments, and individualizes a specific treatment plan based on the findings. The goal is to help patients recover from the continuing effects of the disease through specialized therapies and progressive exercise programs designed to improve lingering symptoms and restore functional independence as quickly and safely as possible.

"Interestingly, many of our Post-COVID Recovery patients were not necessarily the most ill, or those hospitalized the longest," says Magill. "They managed their initial symptoms at home and, either never got over them completely, or got over them originally and symptoms returned months later."

Alta Loma resident, Denalonor Bustamante, came to our Emergency Department on December 9, 2021, where she was diagnosed with COVID-19, pneumonia and a sinus infection. She was admitted to the hospital, placed on high-flow oxygen and began her 22 day-stay in the Telemetry unit. She was discharged on New Year's Eve and began the new year continuing her recovery at home.

"The first couple of weeks at home, I was weak and slept all the time. My head and body ached – and I would cough nonstop for periods ranging from 45 minutes to 2 hours," said Denalonor. "I had developed pulmonary thrombosis – my doctor described it as 'taking shards of glass and spreading it on my lungs.'"

Denalonor's pulmonologist, Dr. Rakesh Sinha, soon referred her to PVHMC's Post-COVID Recovery where she began twice weekly sessions on February 18, 2021. At her first appointment, they conducted an assessment – she could only walk on the treadmill with no resistance for five minutes. She continued this five-minute rehab for the next 2–3 weeks and would come home so exhausted that she would sleep for 2–3 hours. A few months later and Denalonor can now walk on the treadmill with some resistance for more than 20 minutes.

"I'm not as exhausted. My stamina is picking up and I am not coughing as much – I can have a conversation now without gasping at every other word," said Denalonor. "I fought long and hard in the hospital and had some dark days, but with the help of the amazing Post-COVID Recovery Associates, I'm working on strengthening my lungs – and I am hopeful."

Patients who have completed the program say they are happy to be getting "back to normal" and report positive outcomes such as better breathing, improved oxygen levels, reduced anxiety levels, less fatigue, longer walk times, resuming previous recreational activities and returning to work. ●



DENALONOR BUSTAMONTE
DURING REHAB TREADMILL WITH
TAMMY MAGILL, RRT, RCT



AND BEING MONITORED BY
PHYSICAL THERAPIST ASSISTANT
JUSTIN OGAWA



PVHMC's
Rehabilitation Services
Department has
delivered more than
1,000 treatments to
patients suffering
post-COVID-19 long-
hauler symptoms,
which include short
and/or long-term
difficulties in the
following areas:

**Pulmonary
Rehabilitation**

- Shortness of breath
- Decreased lung function
- Oxygen management

Physical Therapy

- General weakness and deconditioning
- Loss of mobility
- Loss of balance
- Increased risk of falling
- General fatigue
- Muscle aches

**Cardiac
Rehabilitation**

- Postural orthostatic tachycardial syndrome
- Irregular heart rate response
- Lowered cardiac capacity

**Speech and
Language Therapy**

- Cognitive "brain fog"
- Swallowing
- Communication

Occupational Therapy

- Difficulties with activities of daily living

SOMETIMES **AMAZING GRACE** IS JUST A PHONE CALL AWAY

When Tom Dimas, Long Beach resident, found out that he had tested positive for COVID-19 in late December, fear started to creep over him. Within the span of a few days, his symptoms progressed from mild to somewhat worrisome and he began to panic about the possibility of being hospitalized during the surge.

Without much guidance on how to care for himself, besides staying home and monitoring for severe symptoms, Tom was at a loss on how to help his recovery. In early January, he saw a video of Dr. Drew Pinsky, a media personality, detailing his COVID-19 experience and monoclonal antibody infusion (MAB) treatment. MAB is an intravenous antibody “cocktail” used to treat mild to moderate symptoms of COVID-19. By helping to limit the amount of virus in the body, the patient’s symptoms improve sooner and they may be less likely to require hospitalization. Dr. Pinsky attributed the infusion to preventing him from having more serious complications.

Tom and his daughters immediately began calling hospitals throughout Southern California to find one with a MAB infusion center. He even reached out to one of the manufacturers of MAB, Eli Lilly, which gave him the names of three hospitals – all of which were out of product. In a stroke of luck, he was then contacted by a friend, who shared the phone number for Lisa Grace, DNP, RN, CNS, CEN, the monoclonal antibody infusion program coordinator at Pomona Valley Hospital Medical Center (PVHMC).

MAB therapy, which received FDA Emergency Use Authorization on November 23, 2020, was made available to patients at PVHMC beginning December 9, 2020.

He anxiously left a voicemail for Lisa on January 14, at 4 pm. Just ten minutes later, Tom was relieved to get a callback and hear Lisa’s voice. After assessing his symptoms and risk for severe illness from COVID-19, Lisa approved Tom for the therapy and his appointment was made for 9 am the next day. After a hopeful drive from Long Beach, and just a few hours spent in a recliner for the infusion, Tom completed his journey for MAB therapy. “Following my infusion, Lisa called me daily for about a week for a well-being and symptom check,” said Tom. “And every time I talked to her, I called her my ‘Amazing Grace,’ because that’s what she is.”

INFUSION

While he had worsening symptoms the day after the infusion, his recovery quickly progressed until he soon had no symptoms at all. On March 3, 2021, Tom returned to PVHMC to “pay it forward” by donating 2,500 surgical masks. “I believe this infusion kept me out of the hospital,” said Tom. “It is a blessing to be back to normal life and be playing golf with no long-term symptoms of COVID-19.”

PVHMC will continue offering MAB therapy for patients with COVID-19 experiencing mild-to-moderate symptoms, as long as there is a need for it. ●

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THERAPY

LISA GRACE, DNP,
RN, CNS, CEN, THE
MONOCLONAL ANTIBODY
INFUSION PROGRAM
COORDINATOR
(AKA "AMAZING GRACE")
AND TOM DIMAS

.....

**GIVING BIRTH DURING
THE COVID-19 PANDEMIC**

“I felt completely safe”

.....

for Angelita Gamez, 24, giving birth at Pomona Valley Hospital Medical Center (PVHMC) during the COVID-19 pandemic was both a strange and wonderful experience. Wonderful because of the amazing care she received and the joy she and her husband Jesús share over the birth of Pedro, their second son. But strange because everything was so different than when she delivered her first baby, Jaime, at PVHMC in 2018.

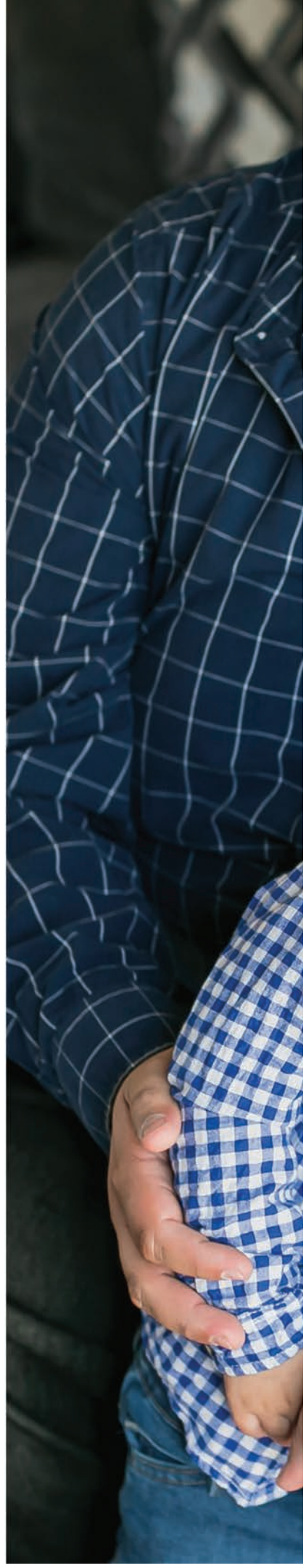
Angelita, who lives in Fullerton, knows PVHMC well. Her mother is a nurse in the Women’s Center and Angelita has walked the hallways since she was three years old. Many of the nurses she got to know as a child still work at the Hospital. Angelita chose to have Jaime at PVHMC because it was so familiar. She returned for Pedro’s delivery because she had such a good first experience.

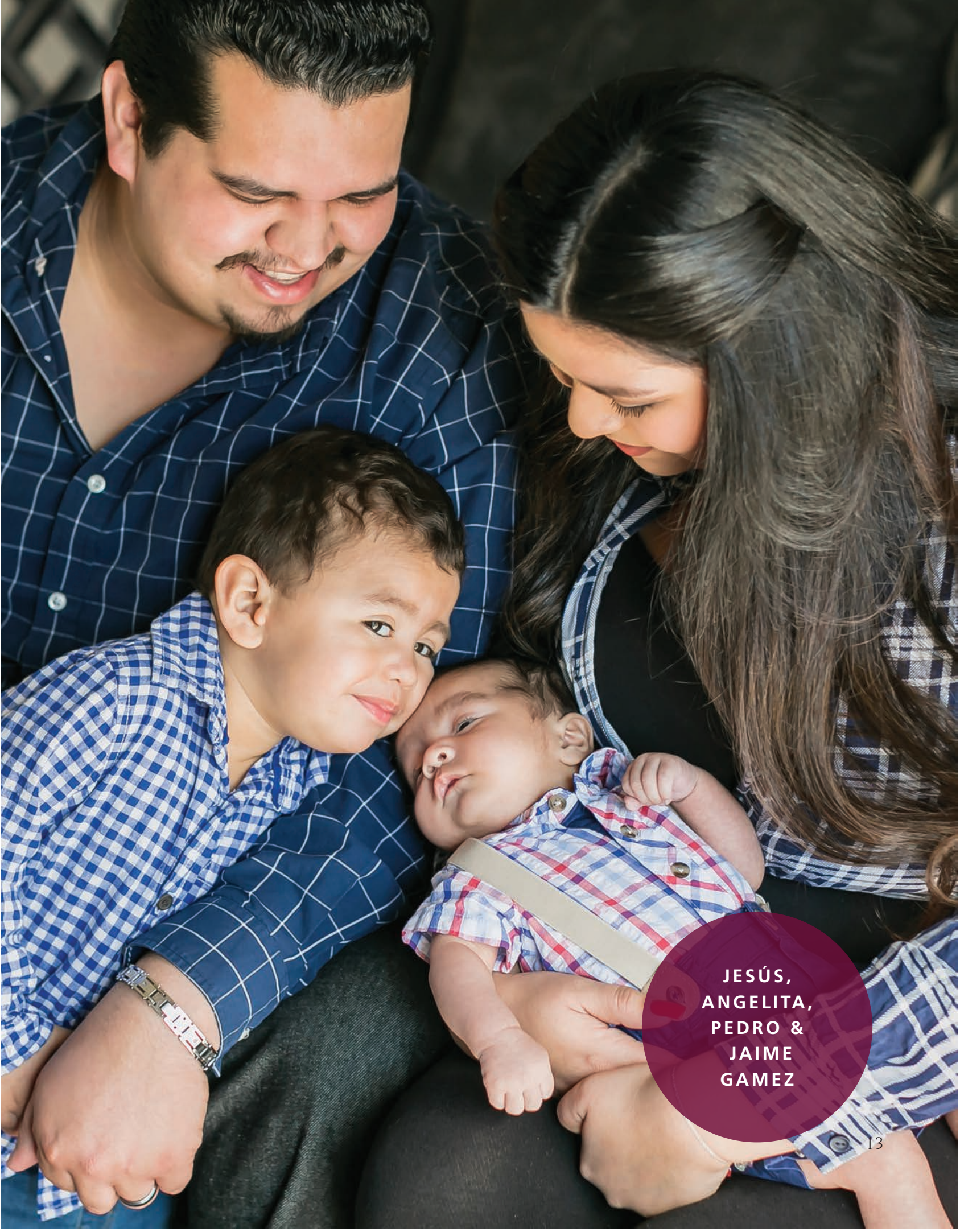
But this time, the deadly virus meant Angelita felt almost alone in the delivery room.

“The first time, with Jaime, I had so many friendly faces with me while I was in labor; my husband, my mom, my doctor and two of the nurses who watched me grow up,” Angelita said. “Other people I knew at the Hospital would drop by to give me words of encouragement. The nurses took pictures that my husband and I have as happy memories. This time, with Pedro, it was just my husband and one nurse. Everyone else could only text message me. Not being able to have my mom in the room with me, even though she works right there, was the hardest. I had mentally prepared myself for it, but it was really hard.”

Pedro’s birth itself, on December 12, 2020, was also very different.

“It happened so fast,” Angelita said. “This time, I don’t have any pictures. The nurse checked me and I was only dilated four centimeters. But just an hour and a half later, I was so uncomfortable, the nurse checked me again and said ‘okay, I feel the baby.’ After she called my doctor, I told the nurse I was going to be sick. I didn’t feel it because I’d had an epidural, but the pressure of me being sick pushed the baby. Suddenly, I felt something and when the nurse looked, she said ‘oh, the baby’s here.’ My doctor wasn’t there yet and my husband and I started freaking out.”





JESÚS,
ANGELITA,
PEDRO &
JAIME
GAMEZ

Then, as Pedro emerged, Jesús saw the cord was wrapped twice around the baby's neck. Angelita's OB/GYN physician was still on his way to the Hospital. "We were scared, but the nurse just had me stop pushing and she slipped the cord off," Angelita said. "Dr. Pinto (James Pinto, MD, PVHMC's Laborist) came in just after that but Pedro was already here! And he was fine."

Adding to the surreal experience was the COVID-19 virus itself. "I felt completely safe delivering my baby in the Hospital in the middle of a pandemic," Angelita said. "From the moment I got there, it was temperature checking and sanitizing and every precaution you can think of."

What Angelita didn't know is that she was COVID-19 positive. "I had gotten exposed in late October or early November," she said. "I don't know exactly how. My doctor just told us to quarantine and we pretty much stayed home until I had the baby. After the birth, the Hospital gave me the option to get tested and I came out positive. I was shocked. My first reaction was fear for my baby."

Pedro, however, tested negative, as did Jesús. Angelita had no symptoms.

"It was just a crazy experience," Angelita says of giving birth during the pandemic. "But the care at PVHMC is still amazing. They go above and beyond." ●

“
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hundreds of people rolled down their windows and rolled up their sleeves to get a flu shot during three free, drive-through flu shot clinics hosted by Pomona Valley Hospital Medical Center (PVHMC) between October and December 2020.

“The drive-through clinics allowed PVHMC to give flu shots to a high volume of community members while adhering to social distancing and masking guidelines,” said Leigh Cornell, FACHE, Vice President of Administration.

Exactly 516 community members received free shots from PVHMC “Flu Fighters” at the first clinic, held at the Fairplex on Saturday, October 17. Participants were given a free cloth face mask and the first 200 flu shot recipients also received a complimentary reusable cloth tote bag emblazoned with “I love PVHMC.”

At the second clinic, held on the PVHMC campus on Saturday, November 14, 444 additional community members, including infants six months or older, received free flu shots. PVHMC also provided hundreds of free boxes of fresh produce from Sunrise Produce Company, along with cloth masks. The produce boxes were supplied through the United States Department of Agriculture’s (USDA) Farmers to Families program, which is part of the USDA’s effort to distribute agricultural products to those in need during the COVID-19 pandemic.

PVHMC GIVES FREE FLU SHOTS

AT THREE DRIVE-THROUGH CLINICS

The third clinic, held on Saturday, December 12, immunized 137 adults and infants six months and older.

Many thanks go to the PVHMC volunteers and partners who helped with both events, including pharmacy students from Keck Graduate Institute and Western University of Health Sciences and the Los Angeles County Department of Public Health. ●

To support the exceptional patient care at PVHMC, please contact James Dale, Vice President of Development at james.dale@pvhmc.org, call 909.469.9408 or go online at pvhmc.org/giving-support.



Nitrous Oxide

FOR PAIN AND ANXIETY RELIEF DURING LABOR

Pomona Valley Hospital Medical Center (PVHMC) announced that it is the **first hospital in the region to begin offering women the option of nitrous oxide for pain and anxiety relief during labor.** Nitrous oxide, commonly known as laughing gas, is a tasteless, odorless gas that has significant medical uses because of its pain and anxiety-reducing effects.

Nitrous oxide has been used around the world for labor and delivery for decades. The 50/50 mixture of nitrous oxide and oxygen has been shown to safely deliver pain relief during procedures. Studies have shown that it is non-addictive and even decreases the need for other pain medication. This pain management alternative has also been used by dentists, as well as hospitals and surgery centers for orthopedics, plastic surgery, urology and dermatology.

"Nitrous oxide is an excellent option for women who want to control their pain during labor without the use of narcotics," said M. Hellen Rodriguez, MD, Medical Director of Maternal-Fetal Medicine. "It does not limit mobility, slow labor or cause risk to the baby. It has a quick onset after it is inhaled and leaves the system quickly once its use is discontinued."

Nitrous oxide is self-administered by holding a small mask to the mouth to inhale the gas, so patients feel more control over pain relief. The effects are typically felt within just a few breaths, offering immediate relief of pain and anxiety. No needles are necessary. Once the mask is removed, the effects of the nitrous oxide quickly wear off.

"From my first breath, the nitrous oxide helped me to manage and cope with my pain," said Jessica Avila, Chino resident and one of PVHMC's first patients to utilize nitrous oxide. "I had an epidural with my first child and didn't like the numbing sensation in my legs, so the nitrous oxide was an easy decision for me. I wasn't nervous or apprehensive because I knew that it wouldn't affect my baby."

"Nitrous oxide will not completely eliminate pain, but it can help dull pain and lessen anxiety during labor," said Rodriguez. "Epidurals will also continue to be available."

Nitrous Oxide can be used at any point during labor or immediately after delivery if there is a need for repair. Some women prefer to use nitrous oxide during contractions, while others prefer to use it to help relax between contractions. If you've used nitrous oxide, you can safely breastfeed right after delivery. ●

“
Nitrous oxide is an excellent option for women who want to control their pain during labor without the use of narcotics.
”

M. HELLEN
RODRIGUEZ, MD

MEDICAL DIRECTOR
OF MATERNAL-FETAL
MEDICINE

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“

FROM MY FIRST
BREATH, THE NITROUS
OXIDE HELPED ME TO
MANAGE AND COPE
WITH MY PAIN.

”



**PREGNANT
IN A
PANDEMIC**

**KELSIE &
ERIK LEE**

ONE WOMAN'S STRUGGLE

For Kelsie Lee, being pregnant in the midst of a global pandemic was a breeze physically; but the strain of limiting contact with friends and family challenged her more than she ever could have imagined.

Kelsie, 31 and her husband Erik, 41, who live in Chino, decided early in 2020 that they didn't want to wait any longer to start their family. Kelsie got pregnant in June. By then, Kelsie, a social person who gets her energy from being around people, was already struggling with isolating.

"To live differently than normal was extremely hard," she said. "The ups and downs of being able to visit people, then not being able to visit, and the fear of possibly getting sick if I did visit felt like Russian roulette. But it was important to me not to contract COVID-19 because I was both pregnant and overweight. The virus could have made me extremely sick and potentially have killed me and my unborn child."

Kelsie, who is studying to be a nurse, and Erik, who is engaged in clinical pharmaceutical research, were careful about wearing masks and social distancing. Still, to keep from going crazy, they took some calculated risks.

"There were times when we would go visit a friend or have dinner with family," Kelsie said. "We always had our masks on, never visited more than one friend or family at a time, and we wouldn't see anyone else for two weeks after each visit to make sure we were healthy and not spreading the virus unknowingly."

The Christmas holidays were the hardest. Kelsie and Erik declined numerous invitations to parties and gatherings hosted by friends and family. "I was itching for face-to-face social interaction and I love to celebrate the holidays," Kelsie said. "I have a large family. At Christmas, we usually gather for a gift exchange, potluck dinner, and games and the kids run around and watch TV. They did a gingerbread house making competition and it grieved me not to attend.

"I was doing things to keep my mood up, like meditating, listening to uplifting music, going for walks and trying to stay busy," Kelsie continued. "It helped but it was still really hard mentally."

Then, after gathering for Christmas, all but five of the 23 members of Kelsie's family caught COVID-19. Kelsie and Erik were terrified. While they hadn't attended the festivities, Kelsie had visited every day to walk outdoors with her father – who tested positive. Kelsie had been exposed.

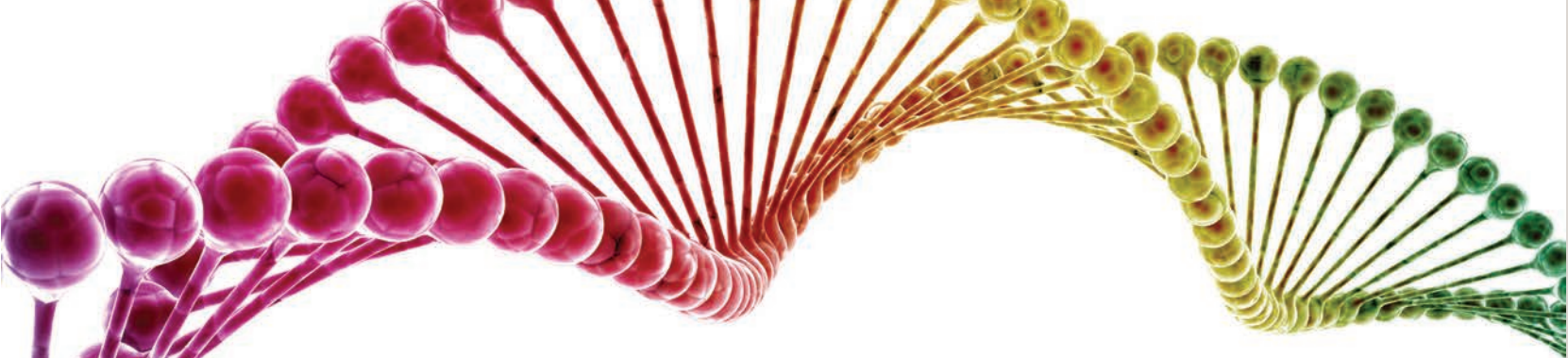
"My husband and I got tested and when our results were negative, I was so relieved and thankful," Kelsie said. "And thankful, too, that none of my family got extremely ill or died."

Until her daughter Alyssa was born on March 8, 2021, at PVHMC's Women's Center, Kelsie stopped visiting and switched to curbside grocery and take-out pickup only. She was disappointed that she couldn't have a baby shower. And she sometimes had nightmares in which she caught COVID-19.

But there have been positive aspects, too. "I had a lot of time to feel and get to know the baby growing inside me," Kelsie said. "I felt very in tune with my body while I was pregnant. And of course, I had plenty of time to get the baby's room ready."

Now, with the COVID-19 vaccine, life is slowly beginning to return to normal. Since Alyssa's birth, Kelsie has focused on the ins and outs of being a first-time mom, and relishes the strong bond she's developing with her daughter. "I feel the attachment with her more than ever before, and I'm looking forward to watching her grow." ●

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James Dale, Vice President of Development at james.dale@pvhmc.org,
call 909.469.9408 or go online at pvhmc.org/giving-support.*



PVHMC EXPANDS

GENETIC COUNSELING SERVICES

The recent popularity of consumer DNA tests has raised awareness of genetic testing like never before. Now, Pomona Valley Hospital Medical Center (PVHMC) has expanded its genetic counseling services with a new in-house genetic counselor, Breann Reinsch, MS, CGC. Breann is here as a joint project between Keck Graduate Institute (KGI) and PVHMC. Besides being the genetic counselor for PVHMC at The Robert and Beverly Lewis Family Cancer Care Center, she is also an Associate Professor of Genetics at KGI.

"Genetic counselors are trained genetic experts who also support a patient's psycho-social well-being," said Breann, who goes by Bre. "My goal is to help patients understand what genetic tests can and cannot tell them about their health risks and what it could mean for them and their families, and walk them through the testing process."

Bre is currently working with cancer patients and will expand to pre-natal and cardiac genetic counseling later on. Patients come to her through a referral from their physician.

"I first go over their medical history and talk to them about their family," she said. "I draw a pedigree, which looks like a family tree. For cancer, I ask them which of their relatives had cancer, what type of cancer, how old they were when they were diagnosed and so on. Then, I assess that family to determine if hereditary cancer is likely. Next, I talk to the patient about what I've found and their options for genetic testing. If they choose to be tested, I meet with them again afterwards and go over the results."

The genetic testing offered through PVHMC is different from home-based consumer DNA tests, which have limitations and can be hard to interpret. There are many different types of genetic tests, and they're individualized based on your medical and family history and what condition you're being tested for. Genetic testing for hereditary cancer conditions is often based on criteria from the National Comprehensive Cancer Network, according to Bre, who emphasized that someone

who develops cancer later in life is usually not suspected of having a genetic condition. "But if someone has family members who were diagnosed with, for example, breast or colon cancer at a young age, they might ask their doctor to talk to me about genetic testing," she said. "For people already diagnosed with cancer, genetic testing may help them make decisions about treatment and understand their risk for other cancers."

Pre-natal genetic testing can identify a woman's chance of having a child with Down syndrome or hereditary conditions like cystic fibrosis, sickle cell anemia and others. Genetic testing can also help identify a person's chance of developing conditions that affect the heart muscle, called inherited cardiomyopathies. Bre emphasized that genetic testing for hereditary cancer conditions typically won't tell someone if they're going to develop cancer. "Genetic testing identifies risk," she said.

The "counseling" part of genetic counseling is a large part of what Bre does. "For example, sometimes when parents know they passed down a genetic condition to their children, they have a lot of guilt," she said. "I help them cope with that. I also provide patients and families with resources such as support groups and additional research studies.

"Counseling is one of the most rewarding parts of my job," she continued. "It's wonderful when patients tell me 'I joined that support group you mentioned and I can't tell you how much it's changed my outlook' or 'I was connected with a cancer survivor and being able to talk to somebody who's gone through it has been so helpful.' That's just incredible to hear." ●



**BREANN
REINSCH, MS,
CGC**

To support the Genetics Counseling Services at PVHMC, please contact James Dale, Vice President of Development at james.dale@pvhmc.org, call 909.469.9408 or go online at pvhmc.org/giving-support.

NATIONAL RECOGNITION

for **CLINICAL EXCELLENCE**



Pomona Valley Hospital Medical Center (PVHMC) was recognized as a Healthgrades Patient Safety Excellence Award recipient (2020) – among the top 10 percent in the nation for patient safety – for the second consecutive year. PVHMC also earned multiple Five-Star ratings for cardiac, pulmonary and gastrointestinal clinical quality excellence from Healthgrades, the leading online resource for comprehensive information about physicians and hospitals.

In Healthgrades' 2021 Report to the Nation, which researches health outcomes for previous years, PVHMC was recognized as:

- A Five-Star recipient for pacemaker procedures
- A Five-Star recipient for treatment of pneumonia
- A Five-Star recipient for gallbladder removal surgery

"These recognitions give our patients and families confidence in the superior quality care that PVHMC's skilled Physicians and Associates provide," said PVHMC President/CEO Richard E. Yochum, FACHE. "They are a clear demonstration of our dedication to patient safety, investment in state-of-the-art technology, and commitment to innovation."

Each year, Healthgrades evaluates hospital performance at nearly 4,500 hospitals nationwide for 32 of the most common inpatient procedures and conditions using Medicare data.

"Hospital quality is top of mind for consumers," said Brad Bowman, MD, Healthgrades Chief Medical Officer. "They can feel confident knowing hospitals are recognized for providing high quality care and superior outcomes."

The complete Healthgrades 2021 Report to the Nation and its detailed study methodology can be found online at [healthgrades.com/quality/Healthgrades-2021-report-to-the-nation](https://www.healthgrades.com/quality/Healthgrades-2021-report-to-the-nation). ●

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A CHANCE ENCOUNTER BECOMES
A TRUSTED
PATIENT-PHYSICIAN
BOND



RICK & HEDIE'S CARE TEAM >

r

ick Foss, who spent most of his career working with cobalt-60 units, never dreamed that one day he and his wife would both need to be undergoing radiation therapy, or that it would be provided by a Pomona Valley Hospital Medical Center (PVHMC) Physician Rick first met in Chicago almost 40 years ago.

Before linear accelerators, cobalt-60 was widely used to deliver radiation therapy to those with cancer. The Canadian government first pioneered the use of cobalt-60 therapy for treating cancer in the late 1940s and early 1950s. Rick, 73, began working for the government in 1978 after he was honorably discharged from the U.S. Marine Corps. He installed and maintained cobalt-60 units throughout the United States and Canada.

In the early 1980s, while he was doing this work and he and his wife Hedio were living in Illinois, Rick met Radiation Oncologist Y.S. Ram Rao, MD, at an industry conference in Chicago. "I'd see him at that conference every year," Rick said. "He was on staff at UCI Medical Center and after Hedio and I moved to Rancho Cucamonga a few years later, I ran into him there through my work. I saw how knowledgeable he was and developed a great respect for him."

When Hedio was diagnosed with breast cancer in 2009, it was only natural that Rick recommended she see Dr. Rao, who was now at PVHMC. "I went to Dr. Rao for radiation therapy five days a week for six weeks," Hedio said. "I've been cancer free since my treatment ended 12 years ago, but I still see Dr. Rao once a year for a checkup. I have so much trust in him."

Then in March 2020, just before the worldwide COVID-19 pandemic was declared, Rick awoke one morning with a sore throat, chills and shortness of breath. He was diagnosed not with COVID-19, but with pneumonia and was treated with antibiotics. But after weeks of treatment from two separate doctors, Rick's symptoms kept worsening. On April 16, Rick woke up without a voice. "I couldn't even whisper. There was no sound at all," he said.

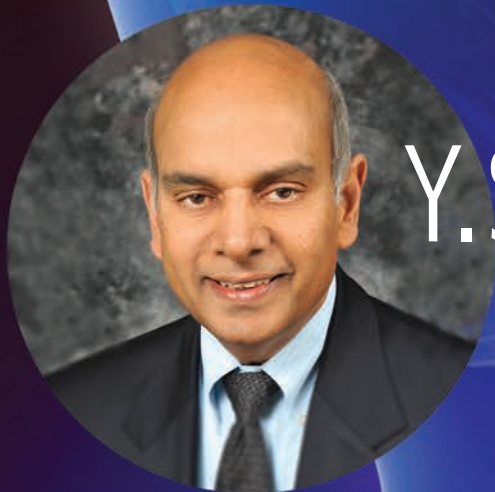
Rick was finally sent to an ear, nose and throat specialist for a biopsy – and then a CT scan and second biopsy. After weeks of symptoms and waiting for appointments and tests, Rick received another diagnosis in July. He had throat cancer caused not by his exposure to radioactive cobalt-60, but by 50 years of heavy smoking. Now it was Rick's turn to seek care from Dr. Rao, 39 years after their first meeting. In addition to radiation therapy, Rick also received chemotherapy with Medical Oncologist Ben Ebrahimi, MD. "Never in my wildest imagination did I ever think I'd be undergoing radiation therapy, lying underneath one of those machines that I serviced for 40 years," Rick said.

Still, Rick is upbeat about getting back to the activities he loves. "I was recently elected Commandant of the local Marine Corps League. The League is a Congressionally chartered veterans organization that supports Marines and their families, and we do a lot for the community. We delivered Christmas gifts for 250 local families and donated \$2,000 to a local food bank in 2020," he said.

Rick also hopes to get back into roller skating, a sport he has enjoyed since youth. He started as a child and skated competitively until just before he got married. One year, he came in second in the nation in the amateur freestyle competition.

Rick and Hedio have nothing but good things to say about the care they've received at PVHMC. "There's a personal touch you get at PVHMC and it's not just because I know Dr. Rao," Rick said. "It's the same for every patient that I've seen go through treatment. Every person is an individual and they really care. You become family there." ●

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Q & A WITH Y.S. Ram Rao, MD

Radiation Oncologist at
Pomona Valley Hospital Medical Center

Q: When is radiation therapy used to treat throat cancer?

A: Throat cancer is a nonspecific term that can apply to cancer in the tonsils, larynx, back of the tongue and other areas of the neck. Treatment depends on several factors, including the type of cancer, its size and stage, its location and the patient's overall health. Some sites are treated with radiation and chemotherapy but not surgery. In some cancers, radiation therapy is done either before or after surgery. And sometimes we use radiation therapy only.

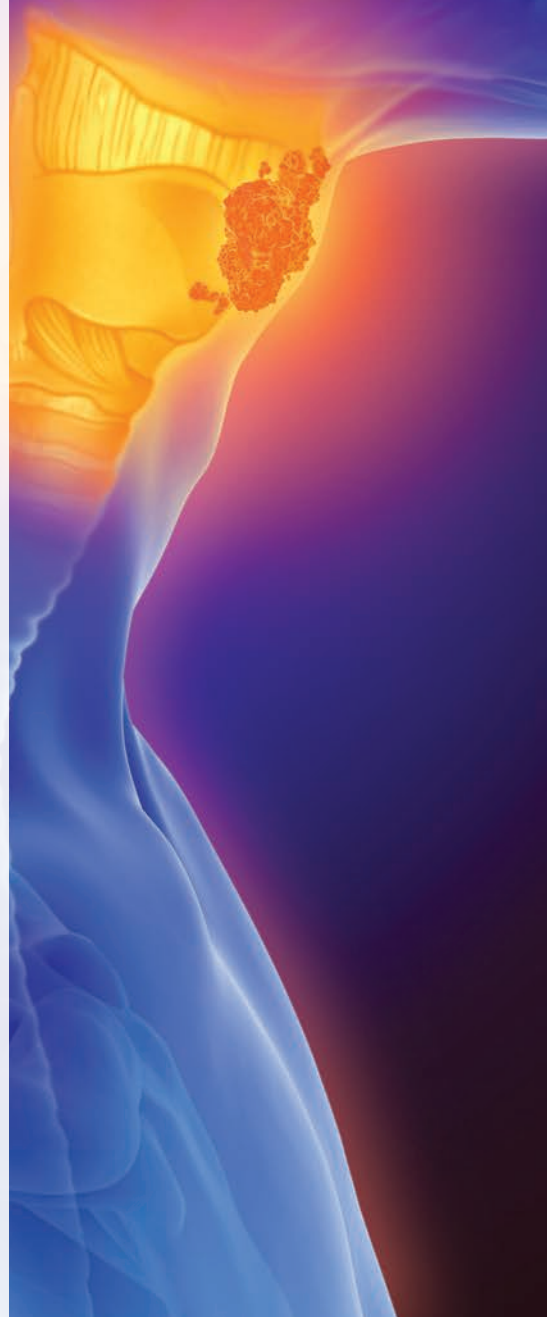
Q: What type of radiation therapy is used to treat throat cancer?

A: We use different, targeted treatments that depend on the type and location of the tumor. Three-dimensional conformal radiotherapy (3D-CRT) combines multiple radiation fields to deliver precise doses of radiation to the affected area. Intensity modulated radiation therapy (IMRT) is a form of 3D-CRT that further modifies the radiation by varying the intensity of each radiation beam. We use both Trilogy and Tomotherapy technologies for IMRT delivery. Trilogy and Tomotherapy give us the added advantage of image-guided radiation therapy (IGRT).

Q: What else should throat cancer patients know about radiation therapy treatment?

A: An important part of treatment is organ preservation. This approach, when indicated, uses radiation and sometimes chemotherapy to shrink or eliminate the tumor. This allows some patients to avoid surgery.

We also emphasize patient support in our Cancer Center. Throat cancer patients can have severe soreness in the throat and difficulty swallowing, which can result in losing a lot of weight. Our dietitians counsel them on how to keep their nutrition status good, and they get additional support and counseling to help them handle the temporary side effects of their treatment. ●



LEGACY GIFT OF
\$1,150,000
HELPS CANCER PATIENTS

Long-time Pomona Valley Hospital Medical Center (PVHMC) Volunteer and benefactor Lucy Hyde, who passed away in September 2019, bequeathed \$1,150,000 to The Robert and Beverly Lewis Family Cancer Care Center Endowment Fund to continue supporting those to whom she dedicated much of her life.

The Endowment Fund provides vital resources that allow the Cancer Care Center to offer patients access to wigs, nurse navigator services, social worker assistance, educational and wellness information and more, all at no cost.

“Lucy was drawn to help and support cancer patients and their families, and listing PVHMC Foundation in her Estate was her way of keeping her legacy alive,” said Richard E. Yochum, FACHE, PVHMC’s President/CEO, who worked with Lucy for many years.

Lucy, who volunteered until 2012, earned the title Chairman of Oncology Volunteers early on. She spent many hours listening to and supporting cancer patients and their families. Additionally, she trained new Volunteers and mentored those at the Cancer Care Center, the Loving Care Gift Shop, the Wig Program and the Community Library who enjoyed assisting cancer patients just as she did. Lucy also coordinated the Volunteers who assisted at special events and cancer screenings.

Lucy’s financial contributions to cancer services at PVHMC spanned many decades and included a major gift to the Capital Campaign for The Robert and Beverly Lewis Family Cancer Care Center, which opened in 1993. ●

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CARDIAC CARE



A HEART ATTACK

**PROMPTS JONATHAN VELEZ
TO TURN HIS LIFE AROUND**

It was July 23, 2020 and COVID-19 cases and deaths had reached its first peak in Los Angeles County. Jonathan Velez, 37, who lives alone in Montclair, was enjoying a socially distanced walk in his neighborhood when he suddenly felt a crushing pain in his chest.

"It felt like somebody was sitting on me and they wouldn't get up," Jonathan said. "When the pain didn't go away, I called my sister and her husband." They took Jonathan to a nearby hospital where caregivers told him he was having a heart attack and immediately transferred him by ambulance to Pomona Valley Hospital Medical Center (PVHMC).

"We were ready and waiting for him in the Emergency Department (ED) when he arrived," said Tamera Freehling, RN, PVHMC's Chest Pain Coordinator. "We were covered from top to bottom in personal protective equipment because Jonathan's COVID-19 test was positive."

This was a shock to Jonathan, who had no COVID-19 symptoms and no idea he had the virus. But his immediate concern was his heart. The team in the ED isolated Jonathan, ran more tests and then took him to the Cardiac Catheterization Lab. There, interventional cardiologist Sundararajan Srikanth, MD, found a minor blockage in one of Jonathan's arteries but also determined that Jonathan had probably suffered his first heart attack a day or so before.

"There was a lesion in the larger part of the blood vessel," he said. "This indicated a previous blockage that likely opened up on its own, which is not uncommon. At this point, inserting a stent wouldn't help and might create more problems so we administered medication to treat the minor blockage. But that area of his heart had suffered some permanent damage."

Jonathan was admitted to a special COVID-19 area of the Hospital and then received another blow; he had serious, uncontrolled diabetes. "I knew my blood pressure was a little high and my blood sugar was high, but I didn't know I had diabetes," Jonathan said. "No one was telling me to diet or stop eating sweets or fast food, so I was eating fast food three times a day. I weighed close to 300 pounds when I had my heart attack."

Jonathan remained at PVHMC for about a week while caregivers worked to get his diabetes under control, monitored his heart and watched for COVID-19 symptoms. Except for some sweating and chills, he didn't experience many symptoms. "He was one of those who barely had any symptoms from COVID-19," Dr. Srikanth said. "That was very surprising because of his diabetes. He dodged a bullet."

While in the Hospital, Jonathan vowed to turn his life around. "To have a heart attack as a young man really scared me," he said. "I told myself 'that's it. I'm done with fast food'." By the end of September, Jonathan had lost 71 pounds by rigorously following the nutritional guidance he's received from PVHMC and incorporating more exercise into his lifestyle. "I ride a bike when I can and walk a lot," he said. "I'm also taking Zoom jazz dance, hip-hop, yoga and health and fitness classes. I shop at Trader Joe's and eat things like salmon and grilled chicken instead of fast food, sugar and soda. I'm wearing smaller clothes and I look and feel a lot better."

While he still has coronary artery disease and must continue with medications for his heart and diabetes, Jonathan is thankful to PVHMC for providing care that likely saved his life. "Everyone was wonderful there," he said. "They really paid attention to what I needed and helped me know what to do to better myself. And the doctor I have now really listens. My family is really proud of me and I'm going to keep it up." ●



**JONATHAN
VELEZ**

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Q & A WITH

Sundararajan Srikanth, MD

Interventional Cardiologist at Pomona Valley Hospital Medical Center



“
Treating a heart
attack is treating
the end result of
a disease process
that's been going
on for a long time.
”

Q: What's the most important lifestyle change someone can make to help prevent a heart attack?

A: If they smoke, to stop smoking. This is the most significant change you can make to help protect your heart. Diet and exercise are also very important. Exercise depends on your health and what you're capable of; even if you can do just a small amount of activity it will help.

The other aspect is controlling high blood pressure and cholesterol. You should know if these need to be addressed and whether your doctor recommends medication. If someone has already had one heart attack, we always prescribe medication to help control cholesterol, no matter what the cholesterol level is.

Q: With all the medical technology and interventions that are available today to treat cardiac conditions, why is lifestyle change still so important?

A: Treating a heart attack is treating the end result of a disease process that's been going on for a long time. Instead, you want to take steps well in advance to prevent it from ever occurring. That's where lifestyle changes come in.

Q: What do you say to someone who thinks they might be having a heart attack but is afraid to come to the Hospital out of fear of contracting COVID-19?

A: First, we are taking extra steps to keep our patients safe, so they should come to the Hospital without delay. Some people who have delayed care out of fear have had heart attacks and died in their homes or came to the Hospital too late and have had poor outcomes. If you come too late, your heart muscle is damaged and nothing can be done to reverse that damage. We can only try to help you function with whatever heart muscle is left. You end up with heart failure. We can manage heart failure with medication, but it's like working with half the energy and half the muscle power than you had. For example, if you could walk a block or a mile before, now maybe you can only walk from your bedroom to your bathroom before you're short of breath. And once you have heart failure, your longevity definitely goes down.

Q: What else should people know about managing heart conditions in the time of COVID-19?

A: If you have an underlying cardiac condition, be extra careful about strictly adhering to COVID-19 precautions. But you also don't want to get cooped up in your house completely afraid of everything. That has a downside psychologically. You at least want to try to go out for a walk a day to maintain some level of activity. ●

The time to plan your 2021 gifting strategy is now. Recent legislation did not waive your 2021 Required Minimum Distribution (RMD) from a traditional or “rollover” Individual Retirement Account (IRA). If you are of retirement age, you must take an RMD in 2021.

By now, you probably know how much you will need to take as your 2021 RMD. This can help you plan charitable giving while taking advantage of a Qualified Charitable Distribution (QCD). With a QCD, your IRA custodian can make direct payments of any amount from your IRA to your charities of choice, including Pomona Valley Hospital Medical Center (PVHMC) Foundation. Every dollar you gift reduces your RMD by that same dollar amount. If the total is equal to or greater than your RMD, you do not need to take any RMD taxable income. Every dollar you gift lowers your tax liability and could put you in a lower tax bracket. There is no minimum amount, but there is a \$100,000 annual ceiling. You also need to be age 70.5 or older.

Now is the time to consult your tax preparer and/or financial advisor. Pocketing distributions and making a donation later does not provide the benefits of a QCD. Your IRA custodian can send you the proper forms needed for your QCD direct payment. Make your giving go further!

PVHMC needs your support now more than ever. For more information about the benefits of a QCD and the powerful impact it can have on PVHMC’s mission, please contact James Dale, Vice President of Development at james.dale@pvhmc.org or 909.469.9408.



PLAN NOW
for 2021 TAX SAVINGS

PVHMC RECEIVES \$15 MILLION GRANT FOR NEW PEDIATRIC UNIT

Pomona Valley Hospital Medical Center (PVHMC) has been awarded a \$15 million grant from the California Health Facilities Financing Authority (CHFFA) to build a new Pediatric Unit that will provide vital care to children throughout the region.

The state-of-the-art Pediatric Unit is expected to be completed in December 2022. The 15-bed unit will replace the Hospital's current 34-bed unit. "While the new unit will hold fewer beds, its layout and advanced technology will allow caregivers to provide a higher level of care more efficiently," said Michele Atkins-Young, MBA, BSN, RN, NE-BC, Director of Children's Services.

"We'll be able to provide an intermediate level of care, more than what is found in a typical pediatric unit, so the child doesn't need to be transferred out of the community," she said. "This will include high-tech equipment such as remote telemetry, which will allow us to monitor a child's heart or respiration at every moment from a centralized location."

The new unit will feature:

- Nine private rooms, each with a section especially designed for the comfort of parents who stay overnight
- Three semi-private rooms that can accommodate large families
- Outdoor and indoor playrooms
- Additional nursing stations with direct line of sight into all patient rooms
- A telemedicine program that allows immediate, remote access to pediatric subspecialists

Everything in the new unit is designed to support family-centered care, which is active family involvement in the child's care.

"Having their family with them decreases a child's stress and their anxiety of the unknown," Michele said. "When the family can have dinner together like they do at home or when a family member can hold the child when we're doing procedures, like starting an IV, it's an enormous comfort to the child and this helps with healing."

Pediatric Hospitalist Scott Nichols, MD, who provides services through PVHMC's affiliation with CHOC, said the new unit will provide many benefits to children and families.

"I see the new unit as a great reflection of PVHMC's commitment to our pediatric patients," Dr. Nichols said. "Child friendly, family-centered care, and high-quality medical capabilities are the objectives guiding the design of the unit from the ground up. This is most evident in the indoor and outdoor play areas, patient rooms, and overall layout. Most patient rooms will be private, with some sibling rooms, to allow for family members to stay together and more comfortably."

“
Having their family with them decreases a child's stress and their anxiety of the unknown. When the family can have dinner together like they do at home or when a family member can hold the child when we're doing procedures, like starting an IV, it's an enormous comfort to the child and this helps with healing.”

MICHELE ATKINS-YOUNG, MBA, BSN, RN, NE-BC

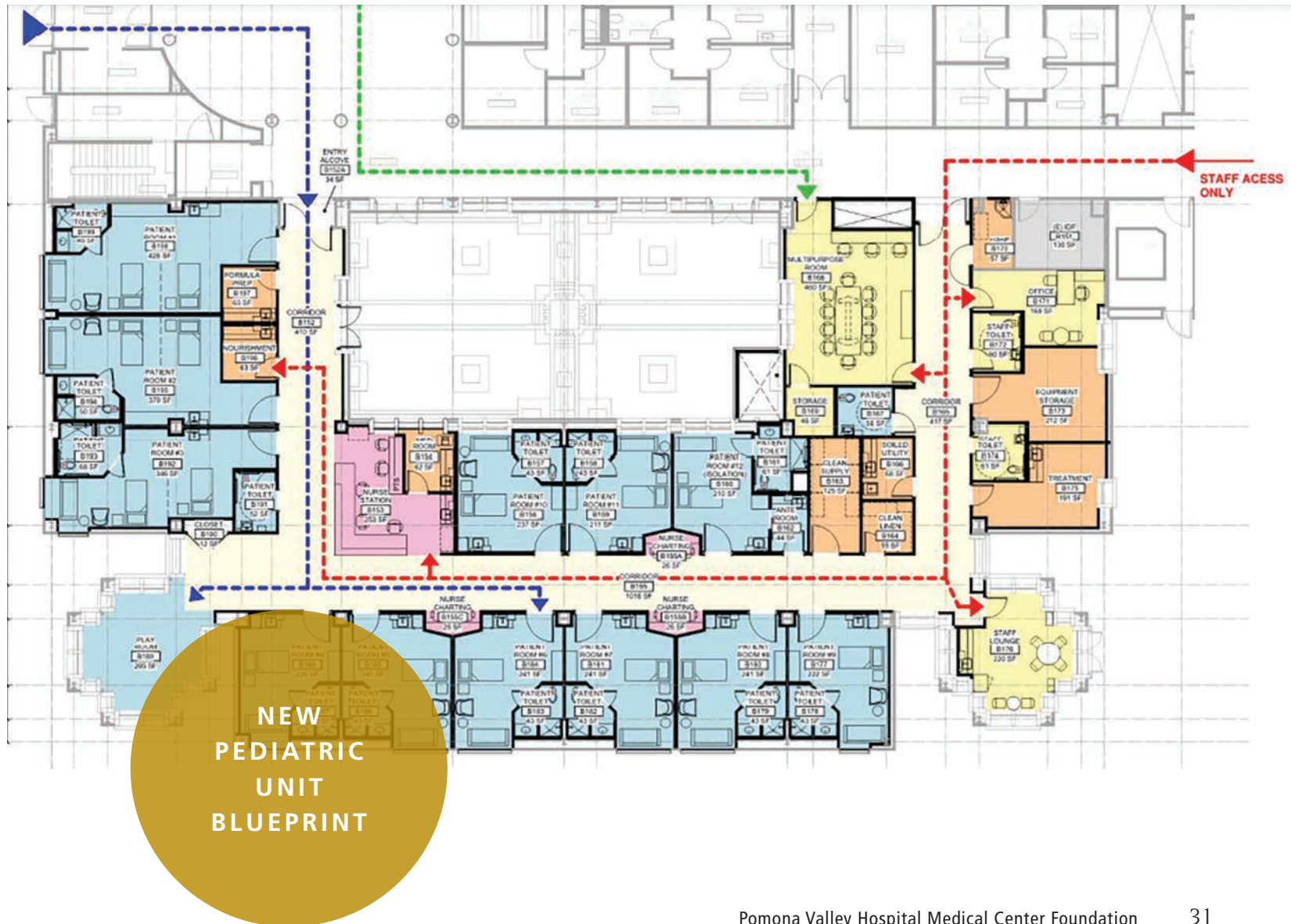
DIRECTOR OF CHILDREN'S SERVICES

The building currently housing PVHMC's Pediatric Unit will fall out of seismic compliance in 2029. The new unit will be constructed in a seismically compliant building in the Women's Center. Of the 11 hospitals serving approximately 1.5 million residents within a 15-mile radius of PVHMC, only three, including PVHMC, still offer inpatient pediatric care.

"We're proud to build on our commitment to provide vital healthcare for children by delivering an even higher level of care to pediatric patients," said Richard E. Yochum, FACHE, PVHMC's President/CEO. "Our new Pediatric Unit will continue to support our Hospital's mission to offer evidence-based, family-centered care close to home."

The grant funding was issued under the Children's Hospital Program of 2018, administered by the CHFFA. In November 2018, California voters approved Proposition 4, the Children's Hospital Bond Act of 2018, enabling California to issue \$1.5 billion in general obligation bonds to fund the Children's Hospital Program of 2018. Public or private nonprofit hospitals that provide pediatric services for children receiving California Children's Services (CCS) were eligible to apply for construction, renovation, furnishings, equipment, and information technology grants. PVHMC was among 11 CCS hospitals to receive a grant award. ●

To support Pediatric care at PVHMC, please contact James Dale, Vice President of Development at james.dale@pvhmc.org, call 909.469.9408 or go online at pvhmc.org/giving-support.



DO YOU HAVE a Guardian Angel?

Honor a special Doctor, Nurse, Volunteer or Hospital Associate who became your Guardian Angel by providing exceptional care or service. Make a charitable donation to PVHMC Foundation in their name and they will be recognized with a special presentation, commemorative certificate, letter from the President/CEO, and a Guardian Angel lapel pin and badge holder. All donations support PVHMC Foundation. ●

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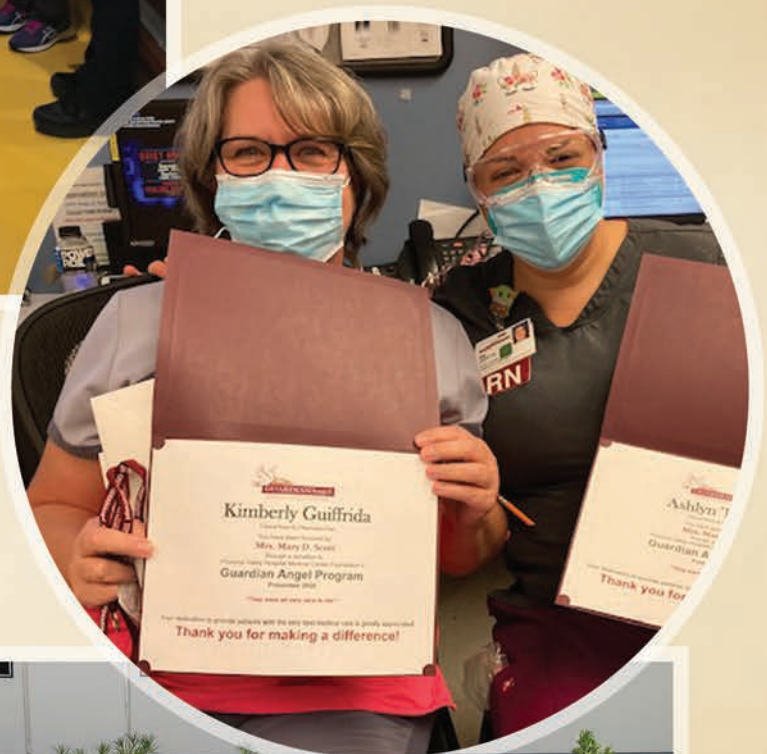
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recognized by Mr. Steve Requejo.

THE 5TH FLOOR
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THE TEAM IN NICU
were recognized by Ms. Marilyn Rhoads.

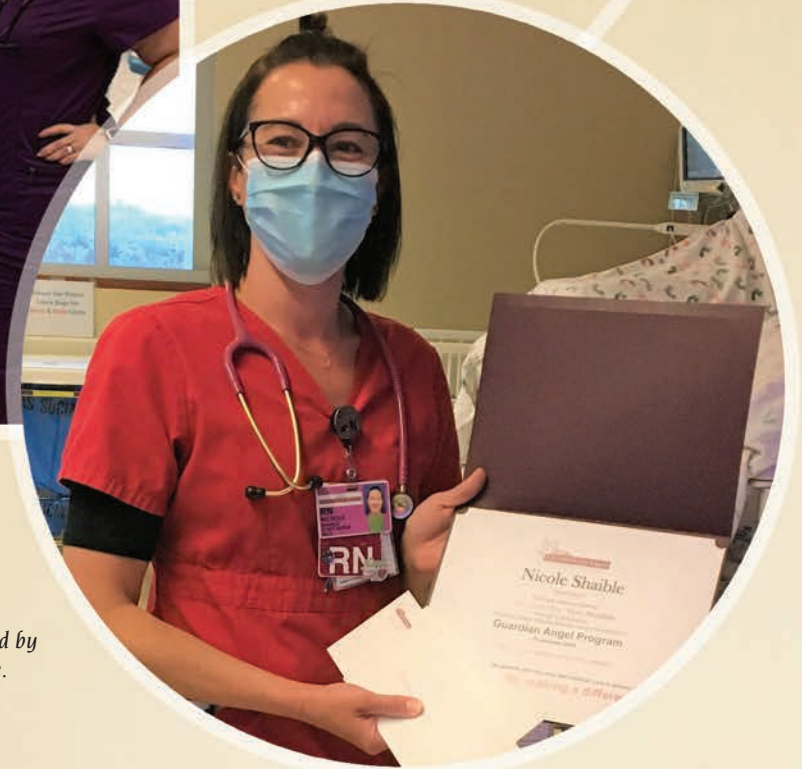


KIM GUIFFRIDA, RN;
ASHLYN TORCASO, BSN,
RN from Observation Care were
recognized by Mrs. Mary D. Scott.

OFFICER RUDY MONTEROS
from Security was recognized by
Ms. Harlean Estrada pictured
with (l) Derek Webster, Director
of Security; Michelle Walsh,
Security Manager; Willie
Morataya, Security Supervisor and
Tim Doonan, Security Manger.



THE TEAM OF CVICU was recognized by Mr. Danilo Sarmiento.



NICOLE SHAIBLE, RN in the NICU was recognized by Mr. And Mrs. Alan Shaible.

DR. ANTHONY GAN was recognized by Dr. Ken Nakamoto, Vice President of Medical Affairs.



DR. GAURAV PARIKH was recognized by Mr. and Mrs. Florian Giauque.



EDDA MENDEZ, BSN, RN, Patient Care Coordinator in the NICU was recognized by Mr. and Mrs. Joe Hahn.



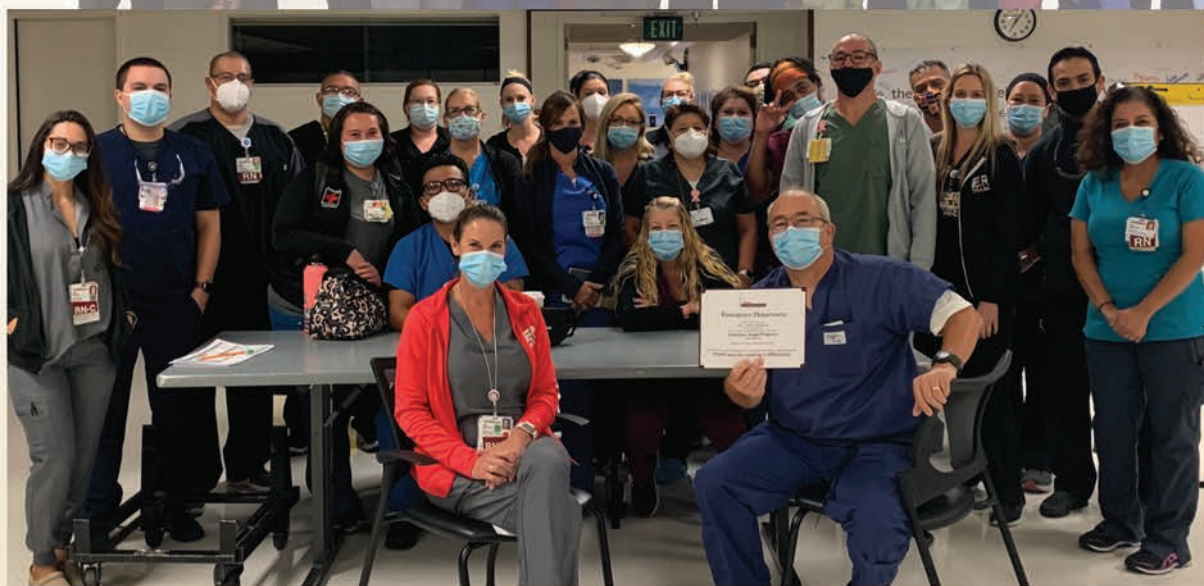
ERIC BAJUS, RN in ICU 3 was recognized by Mr. Hal Frederickson.

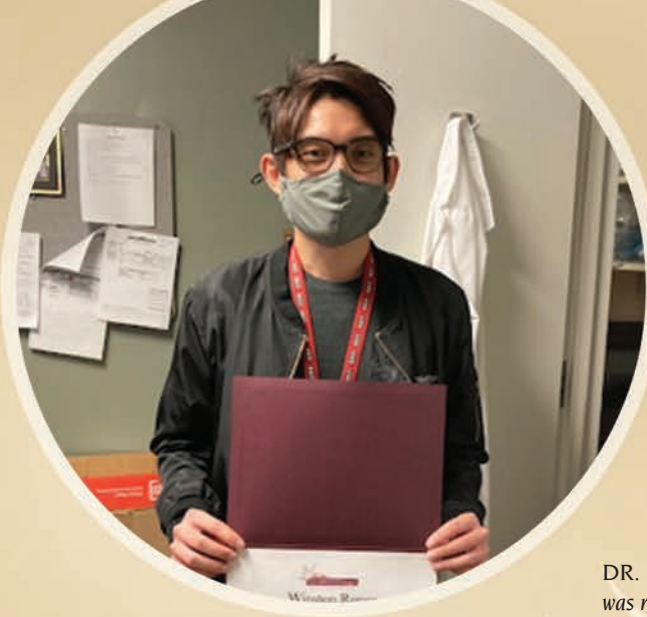


DR. RAKESH SINHA was recognized by Ms. Mary Mathias and Ms. Kathy Adkins.



THE ENTIRE EMERGENCY DEPARTMENT was recognized by Mr. Calvert Stephens.



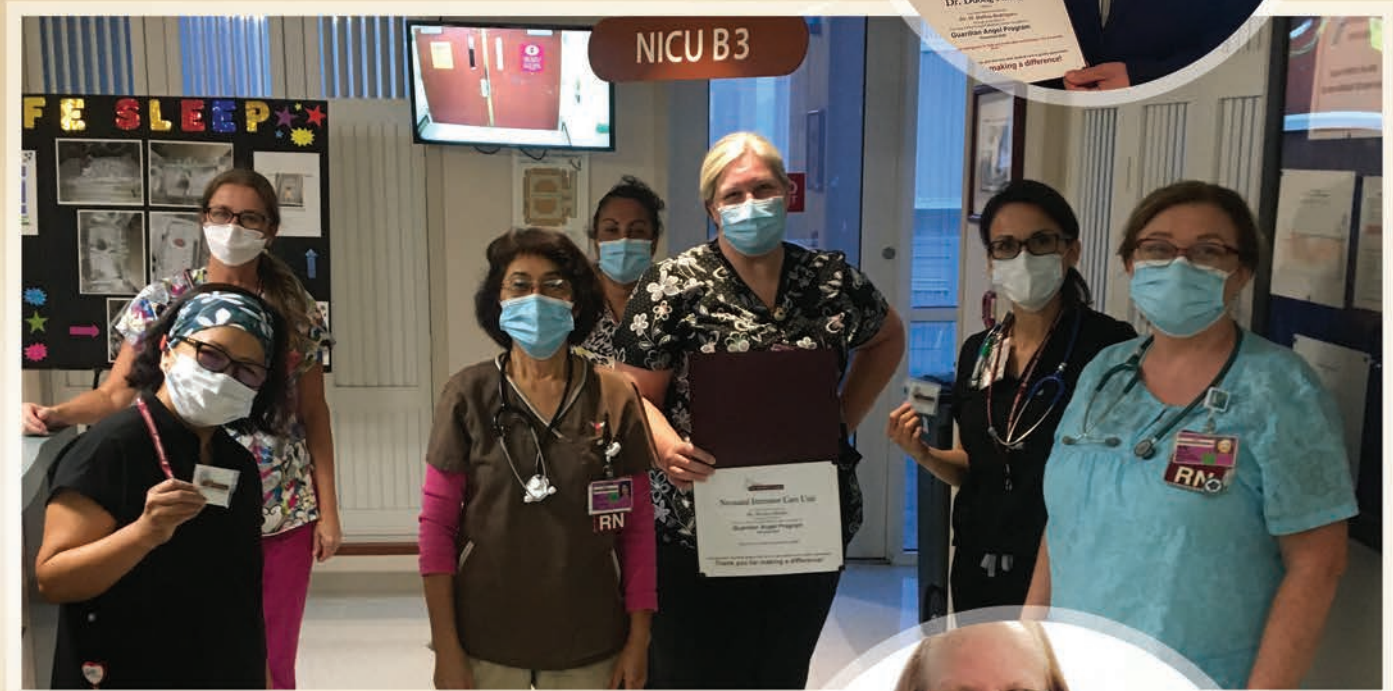


WINSTON RAMOS, BSN, RN
from Observation was recognized
by Mrs. Mary D. Scott.



DR. DUONG PHUNG
was recognized by
Dr. M. Hellen Rodriguez.

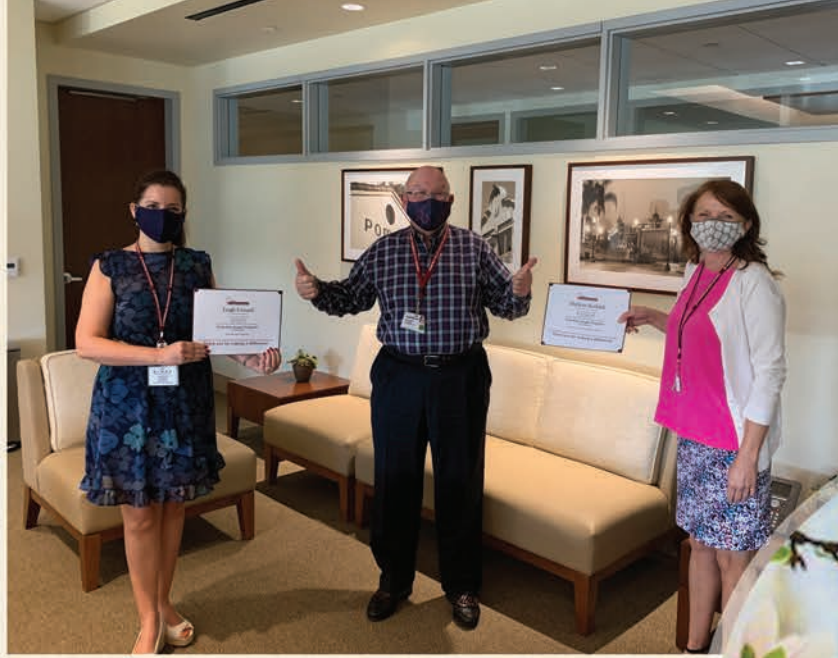
THE TEAM IN NICU
were recognized by Ms. Marilyn Rhodes.



NICOLE GENOVA, RN-C
from Tele 2 was recognized
by Ms. Pricilla Lerma.



CHRISTINE ABBOTT, RN
from the Resource Center was
recognized by Ms. Beverly Burton.



LEIGH CORNELL, FACHE was recognized by an anonymous donor and DARLENE SCAFIDDI, MSN, RN, NEA-BC, Executive Vice-President of Patient Care Services was recognized by Mr. and Mrs. George Daley. Pictured with Richard E. Yochum, FACHE, President/CEO.

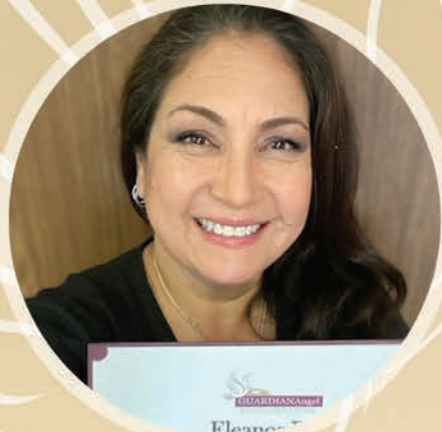


MINA ROJAS, Medical Assistant in Medical Oncology was recognized by Ms. Carie Baker.

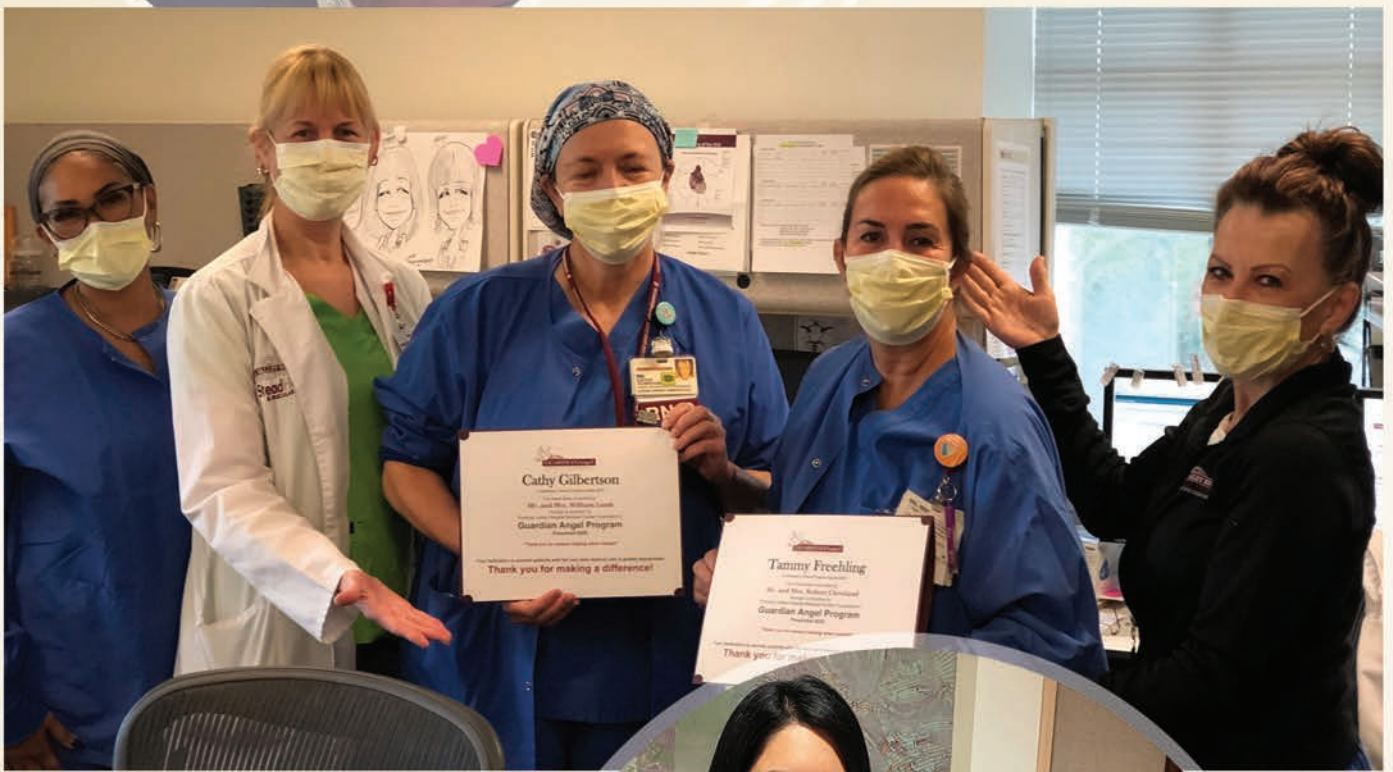
THE TEAM IN NICU were recognized by Ms. Marilyn Rhodes.



ELEANOR ROCHA, RN,
Associate Health Nurse was
recognized by Amy Hill, RN
in LDRP.



TIN NGUYEN, RESPIRATORY CARE PRACTITIONER was
recognized by Mr. Steve Requejo. Pictured with Tim Timora, RRT,
Critical Care Manager for Respiratory Services.



CATHY GILBERTSON, RN, CCRN
was recognized by Mrs. And Mrs. William
Lamb. TAMMY FREEHLING, BSN, RN,
CCRN was recognized by Mr. and Mrs.
Robert Cleveland. Pictured with (l-r) Katrina
Woolfolk, BSN, RN; Kathy Soderlund, BSN,
RN, CCRN and (on right) Peggy Mata,
Cardiac Services Coordinator.

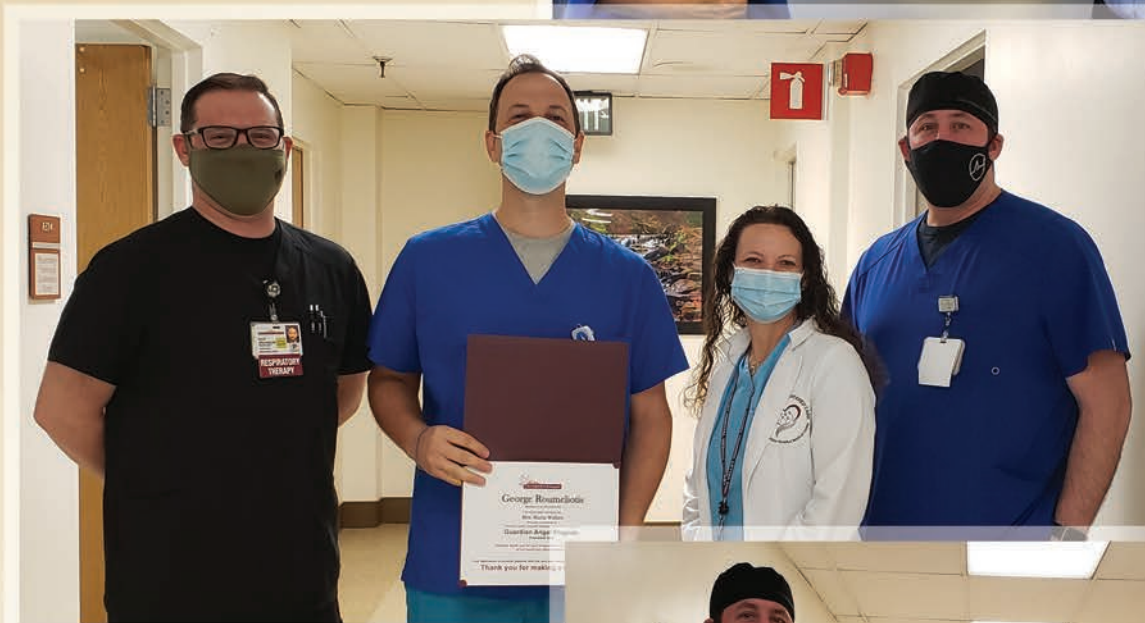
DESIREE BALDRIAS, RN from
Radiation Oncology was recognized by
Ms. Elaine Hughes.



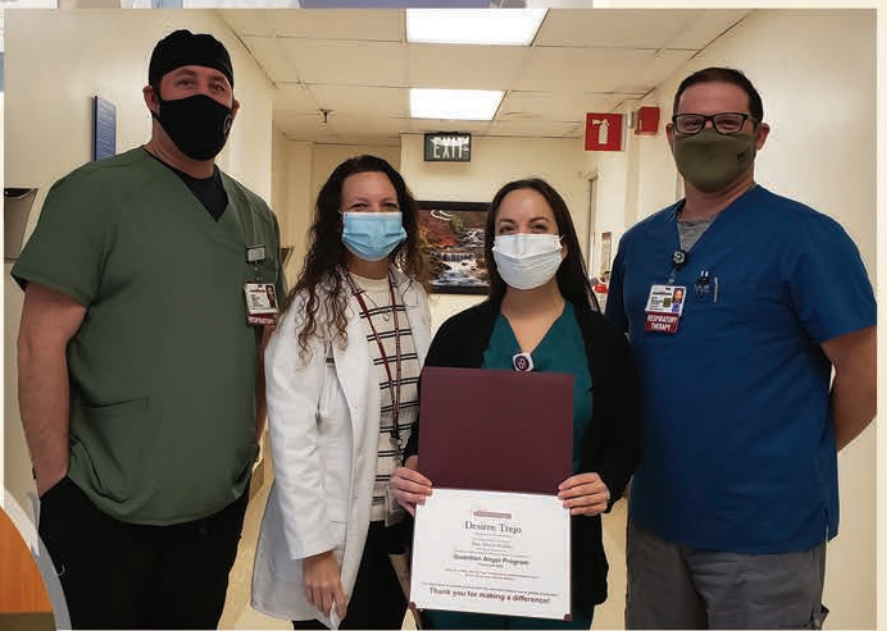
GLENDA FERGUSON, DIRECTOR OF DEVELOPMENT (RETIRED) was recognized by Mr. Michael Gregoryk.



GEORGE ROUMELIOTIS, RCP, RRT (SECOND FROM LEFT) was honored by Mrs. Maria Wallon. Pictured with (l-r) Brandon Sweeney, BSRC, RCP, RRT, Manager, Stacey Gaona, MSHCA, RRT-ACCS, NPS, Director of Cardio-Respiratory/Neurology and Tim Timora, BA, RCP, RRT, Manager.



DESIREE TREJO, RCP, RRT (second from right) was honored by Mrs. Maria Wallen. Pictured with her (l-r) are Tim Timora, BA, RCP, RRT, Manager; Stacey Gaona, MSHCA, RRT-ACCS, NPS, Director of Cardio-Respiratory/Neurology and Brandon Sweeney, BSRC, RCP, RRT, Manager.



MARIA MARTINEZ, RN in the Observation Unit was recognized by Mr. Gabriel Damico.

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