



**Jastram family**  
leans into pediatric care

[PAGE 2](#)

**Your health:**  
Beyond the doctor's office

[PAGE 4](#)

**Su salud:**  
Más allá del consultorio  
del médico

[PAGE 6](#)

**Rhea Miller**  
finds there's no  
cure like home

[PAGE 8](#)

**Evan Pak**  
discovers . . .  
carbon monoxide

[PAGE 10](#)





# Jastram family leans into pediatric care

## Liam and Casey Jastram were the little (little) brothers.

Liam and Casey were born four weeks early. They spent several days in NICU before coming home to big sisters Charlie, Ellie, and Rylie.

The twins were still learning to suck and swallow. The family needed a pediatrician who could handle a crowd, and handle twins who needed extra care.

Parents Cassandra and Mike chose pediatric nurse practitioner Niki Feran, APRN, PNP in the Lakeville Clinic, close to the family's Lakeville home.



**Niki Feran, APRN, PNP**

"We hit it off with her right away," Cassandra says. "With two kids, you're dealing with both at the same time. Niki is able to take in all the information we're spewing at her and address each thing separately."

"Niki listens really well, and gives us options – what to look for, and what to look into," Cassandra says.

"She's pretty thorough," Mike adds. "We're very satisfied with Niki."



"Niki is able to take in all the information we're spewing at her and address each thing separately."

**Cassandra Jastram, Lakeville**

Mike likes that when they check in for an appointment, clinic staff rooms them right away "so we're not sitting in the waiting room, especially with twins."

And Niki is easy to reach outside the clinic, too: "When I use the MyHealth Info app to message her, she gets back to me within five minutes," Cassandra says. "With five kids, that's really helpful and important."

MyHealth Info is a big help to coordinating all their kids' care, Mike says: Clinic staff make sure during appointments that information is updated in MyHealth Info so it's easily accessible right away. Plus, having a single account for all their kids is really convenient.

The family shifted from another clinic shortly after the babies came home. Niki cares for all five siblings

now. (Past visits to the Lakeville and Farmington clinics made it an easy choice: "We've liked the care there from the get-go," Mike says.)

Liam and Casey are doing very well these days: "They can eat and eat and eat," Cassandra laughs.

They're meeting developmental milestones, too. At their six-month checkup, Casey and Liam were both

at 90% for weight.

Cassandra's advice for other parents? "Align the care you are looking to receive with your values," she says. "Don't settle – it's your children, their bodies, and your needs."

Just right for a big, happy family.





# Your health beyond the doctor's office

**Health is connected to where we live, work, and play.  
Your clinic can help with factors in your life that can affect your health.**

A new national program helps healthcare providers identify non-medical needs – and offer resources to patients and their families to meet those needs, for better health overall.

The program focuses on five “social drivers of health”:

- Food security
- Housing stability
- Transportation needs
- Utilities access (electric, gas, water)
- Interpersonal safety (such as exposure to violence, social isolation)

The process starts with a “social history” questionnaire during a clinic appointment (or hospital stay). Questions are designed to help your provider understand your environment and living situation, so we can connect you to resources that might benefit you.

They seem like personal questions that go beyond medical care. Your answers are confidential; they’re part of your medical record, between you and your doctor. You don’t have to answer them. If you choose to answer them, we’ll help you in any way you tell us about challenges where we can help.

We can connect people with resources for help with:

- Housing
- Medical insurance
- Substance treatment
- Transportation
- Employment programs
- Wellness education
- Emergency financial assistance
- Food support
- Mental health care
- Dental care
- Utilities



See a list of Community Resources here:



The program is led by Centers for Medicare and Medicaid (CMS), the federal government division that licenses hospitals and clinics. The goal is to connect patients with local organizations that can help individuals, families, or neighborhoods. On a broad scale, CMS and community leaders can spot trends to identify areas of need that the community can address.

Hospital patients are asked to complete the questionnaire during their stay. Clinic patients are given the questionnaire once a year, usually during an annual physical, wellness visit, or medication check.

*You will be given this questionnaire during a clinic visit.*

## SOCIAL HISTORY QUESTIONNAIRE

Problems in any of these areas can affect your health. We may be able to provide assistance, so we hope you will answer the following questions. You do not have to answer any questions you do not want to. Anything you write will be kept confidential in your medical record.

### What is your current living situation?

- I presently have a place to live
- I have a place to live at present, but am concerned about the future
- I presently do not have a place to live

### Do you experience any of these problems where you live:

- Pests, such as bugs, ants, or mice
- Mold
- Lack of heat
- Smoke detectors not working or missing
- Water leaks
- Unsafe flooring or stairs
- Lead paint or pipes
- Oven or stove not working
- Carbon monoxide detectors missing or not working

### In the past 12 months...

- did your electric, gas, or water company threaten to shut off services to your home?
- did a lack of transportation keep you from meetings, work, medical appointments or getting things needed for daily living?
- were you worried that your food would run out before you got money to buy more?
- the food you bought just didn't last and you didn't have money buy more

### How often does anyone, including family, friends and others...

- physically hurt you?
- insult or talk down to you?
- threaten you with harm?
- scream or curse at you?



# Su salud más allá del consultorio del médico

## La salud está relacionada con el lugar donde vivimos, trabajamos y jugamos. Su clínica puede ayudar con los factores de su vida que pueden afectar su salud.

Un nuevo programa nacional ayuda a los proveedores de atención médica a detectar necesidades no médicas y ofrecer recursos a los pacientes y a sus familias para satisfacer esas necesidades, para una mejor salud en general.

El programa se centra en cinco "motores sociales de la salud":

- Seguridad alimentaria
- Estabilidad de la vivienda
- Necesidades de transporte
- Acceso a los servicios públicos (electricidad, gas, agua)
- Seguridad interpersonal (exposición a la violencia, aislamiento social, etc.)

El proceso comienza con un cuestionario de "historia social" durante una cita clínica (o estadía hospitalaria). Las preguntas están diseñadas para ayudar a su proveedor a comprender su entorno y su situación de vivienda, de modo que podamos conectarlo con recursos que podrían beneficiarlo.

Parecen preguntas personales que van más allá de la atención médica. Sus respuestas son confidenciales; forman parte de su historial médico, entre usted y su médico. No tiene que responderlas. Si decide responderlas, lo ayudaremos de cualquier manera que nos informe sobre las dificultades donde podamos apoyarlo.

Podemos conectar a las personas con recursos para obtener ayuda con::

- Vivienda
- Apoyo alimentario
- Programas de empleo
- Cuidado de salud mental
- Tratamiento de sustancias
- Asistencia financiera de emergencia
- Educación para el bienestar
- Cuidado dental
- Transporte
- Utilidades
- Seguro médico



Consulte aquí la lista de Recursos Comunitarios:



El programa está dirigido por los Centros de Medicare y Medicaid (CMS) la división del gobierno federal que otorga licencias a hospitales y clínicas. El objetivo es conectar a los pacientes con organizaciones locales que puedan ayudar a individuos, familias o vecindarios. A gran escala, [los líderes comunitarios/CMS] pueden detectar tendencias para identificar áreas de necesidad que la comunidad puede abordar.

Se le entregará este cuestionario durante una visita a la clínica.

## CUESTIONARIO DE HISTORIA SOCIAL

La salud empieza donde trabajamos, jugamos, aprendemos, comemos y dormimos. Los problemas en cualquiera de estas áreas pueden afectar su salud. Es posible que podamos brindarle asistencia, por lo que esperamos que responda las siguientes preguntas. No tiene que responder a ninguna pregunta que no desee. Todo lo que escriba se mantendrá confidencial en su expediente médico.

### ¿En qué situación vive actualmente?

- Actualmente tengo un lugar donde vivir
- Actualmente tengo un lugar donde vivir, pero me preocupa el futuro
- Actualmente no tengo donde vivir

### ¿Experimenta alguno de estos problemas en su lugar de residencia?

- Plagas, como insectos, hormigas o ratones
- Moho
- Pintura o tuberías con plomo
- Falta de calefacción
- El horno o la estufa no funcionan
- Faltan detectores de humo o no funcionan
- Faltan detectores de monóxido de carbono o no funcionan
- Fugas de agua
- Pisos/escaleras inseguras

### En los últimos 12 meses...

¿Su compañía de electricidad, gas o agua amenazó con cortar los servicios a su hogar?

¿Por la falta de transporte le impidió acudir a citas médicas, reuniones, al trabajo u obtener las cosas necesarias para la vida diaria?

¿Le preocupaba que su comida acabará antes de tener dinero para comprar más?

¿La comida que compró no le duró y no tenía dinero para comprar más?

### ¿Con qué frecuencia alguien, incluidos familiares, amigos y otras personas:

- ¿le hirieron físicamente?
- ¿le insultaron o le hablaron con desprecio?
- ¿le amenazaron con hacerle daño?
- ¿le gritaron o le maldijeron?





# Rhea Miller finds there's no cure like home

Rhea and Dave Miller were at their cabin in Wisconsin when Rhea got sick.

"I was so miserable and thought, 'If I can just get home I'll feel better,'" Rhea says. "But I knew I couldn't just go home; I needed some care."

It was a two-hour drive home to Northfield. They went directly to the Emergency Department at Northfield Hospital.

"It was the middle of the day, and the waiting room was full," Rhea recalls. "We were told it would be a while. I was so weak and sick I couldn't sit up in the chair in waiting room. My husband told the receptionist I'd wait in the car, and they could call me when they were ready to see me."

Instead, a nurse brought Rhea into the department, where there were no exam rooms open but there was a gurney where Rhea could lie down.

Dr. Jennifer Fischer checked on Rhea there; she was dehydrated. The team started an IV.

Rhea was in the ED for seven hours. She was far from alone: It was the busiest day on record for Northfield Hospital's ED. And the hospital was full, too. "Dr. Fischer said she wanted to admit me, but they had no bed available," Rhea says.

It was November; respiratory illness was widespread, staffing was tight, and hospitals across Minnesota were stretched thin.

But the care never wavered.

"The care was just exceptional," Rhea says. "As busy as they were, I never felt like I was a bother or I was rushed, or they didn't have time to give me proper care."

Dr. Fischer "was amazing," Rhea adds. After consulting with metro-area physicians, Dr. Fischer crafted a plan for Rhea to recuperate at home – and return to the ED if her symptoms got worse.

They did. Two days later, Rhea came back. Dr. David Ries "was intent on figuring out what was going on with me, and how he could help me," Rhea says. "He and Dr. Fischer both did a lot of testing to figure it out."

"They were always so patient with me, and made me feel like my care was important."



Jennifer Fischer, MD

They dealt with my immediate symptoms and also wanted to get to the root of the problem and help me get better. [That dedication to my wellness was really impressive.](#)

That second visit took another seven hours: CAT scans, x-rays, blood tests, consults. "The attitude of everyone from CT technician and lab tech to doctors and nurses – everyone was so caring and so understanding," Rhea says. "They were always so patient with me, and made me feel like my care was important."

Carol Schrader, RN was Rhea's nurse. "It was comforting to see a familiar face, to be cared for by someone I know."

The team "tried different things, and we made a plan. My husband was always included in the plan and decision-making," Rhea adds. "He was treated with just as much respect and care as I was. Sometimes when medical people are focused on the patient they don't think about the family. Here, they really did include him."

In the end, Rhea recovered without needing to be hospitalized.

Her advice for neighbors and friends: "Sometimes we think we need to be in a big metro hospital, but we're so fortunate to have such good care right here at home. They made me feel better, and then get better. I have no reservation about going back to Northfield Hospital."

No matter how long the drive.





# Evan Pak discovers...carbon monoxide

## Evan Pak and Kaitlyn Nordling had a mystery to solve.

Evan and Kaitlyn were hanging out in their Northfield apartment when Evan started feeling sick with nausea and chills. He took a nap, but woke up feeling worse – vomiting, racing heart, trouble breathing. Kaitlyn, a medical assistant studying to become a physician assistant, checked Evan’s resting heart rate: 130 beats per minute, more than double his usual rate. Kaitlyn’s heart rate was up too, plus shortness of breath and a nasty headache. “We realized it was pretty serious,” Evan says.

They went to the Emergency Department. Several tests – ECG, chest x-rays, blood tests, urine tests, nasal swabs for COVID and flu – helped the care team rule out possible causes, and home in on the culprit: carbon monoxide poisoning.

Their blood tests showed an imbalance in their white blood cells, plus heightened levels of carboxyhemoglobin, which forms when carbon monoxide binds to hemoglobin in the blood and prevents blood from carrying oxygen throughout the body. “It was really high, but it tends to flush from your bloodstream pretty quickly once you start breathing fresh air,” Evan says. Plus, they both got sick within 30 minutes of each other: “It’s unlikely that any other illness would set in that quickly, that severely, and that simultaneously.”

Evan and Kaitlyn were put on high-flow oxygen for about an hour. Once their vital signs returned to normal, they were discharged. But they weren’t sent home: “They told us not to go back to the apartment that night,” Evan says. “We went to my family’s house instead.”

Later, the city building inspector told Evan and Kaitlyn they could go into the apartment for just 15 minutes at a time. Their carbon monoxide detector was up to Minnesota state code; the problem may have been caused by cold weather. Kaitlyn’s dad is a commercial architect, and Evan’s uncle is the head of the national 911 system. Each of them separately suggested that something on the outside of the building may have iced up, and caused exhaust to back up into the apartment.

“It seems like an intermittent issue,” says Evan, because a few months earlier, he and Kaitlyn had similar symptoms. That time, they went to the clinic to get tested for flu. “The wait time was long, and we started to feel so much better that we just went home.” Both times, it was a very cold day – and they turned up the heat when they started feeling sick. Of course, that made it worse.

Evan’s advice: “Make sure you have carbon monoxide detectors that are in good working order. And trust your body if something feels wrong. If you feel sick, get checked out. It can make a big difference in the final outcome.”

Mystery solved.



## UNLOCKING THE MYSTERY: CARBON MONOXIDE OR FLU?

Carbon monoxide is an odorless, colorless gas that’s produced whenever any fuel is burned: natural gas, propane, gasoline, oil, kerosene, wood, charcoal. Cars, boats, gas engines, stoves and heating systems produce carbon monoxide; it can build up in enclosed (or semi-enclosed) spaces. When people inhale carbon monoxide, the toxic gas enters the bloodstream and blocks oxygen from being absorbed into the body, which can damage tissues and cause death.

### Symptoms of carbon monoxide poisoning

- Often feels like flu
- Headache
- Dizziness
- Weakness
- Upset stomach
- Vomiting
- Chest pain
- Confusion

### Is it carbon monoxide poisoning or flu?

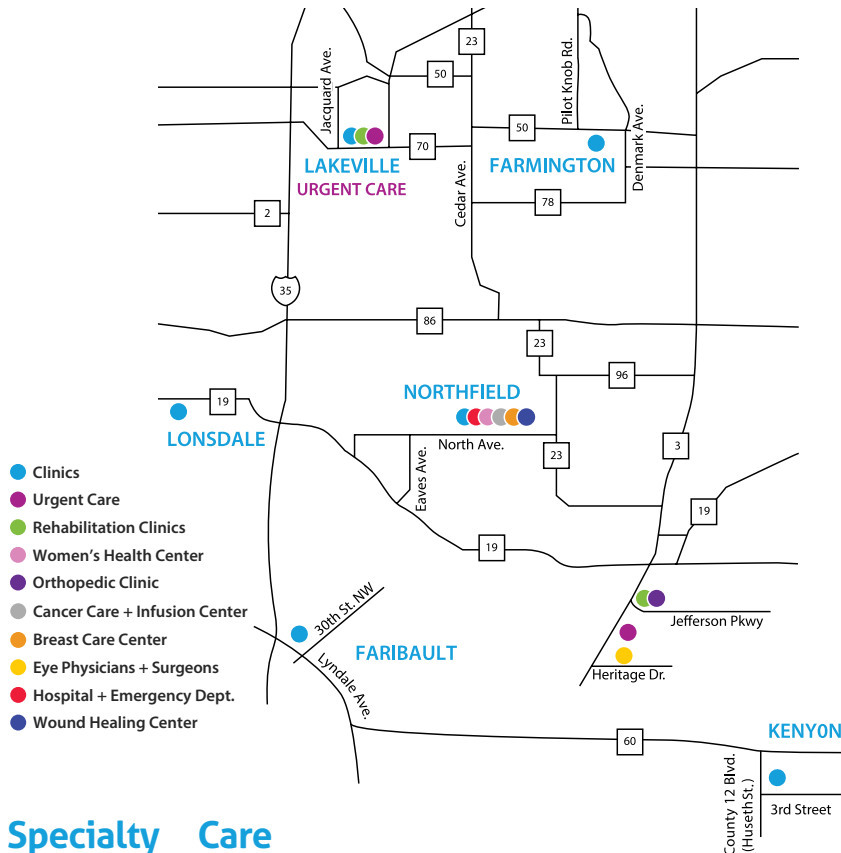
It could be carbon monoxide if:

- You feel better when you’re away from home
- More than one person in the home gets sick at the same time (it usually takes several days for the flu to pass from person to person)
- Indoor pets seem sick too – drowsy, lethargic (human flu viruses don’t spread to pets)



2000 North Avenue  
Northfield, MN 55057

## Clinics, Hospital + Specialty Care close to you



### Hospital + Emergency

#### Northfield Hospital + Emergency

2000 North Avenue, Tel: 507-646-1000

### Clinics + Urgent Care

#### Faribault Clinic

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

#### Farmington Clinic

4645 Knutsen Drive, Tel: 651-460-2300

#### Kenyon Clinic

225 Huseth Street, Tel: 507-623-0123

#### Lakeville Clinic + URGENT CARE

9974 214th Street W., Tel: 952-469-0500

#### Lonsdale Clinic

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

#### Northfield Clinic

2000 North Avenue, Tel: 507-646-1494

#### Northfield URGENT CARE

2014 Jefferson Road (Hwy 3), Tel: 507-646-6700

*Specialty care available at multiple clinic locations*

## Specialty Care

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

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

**Endoscopy – Northfield**  
2000 North Avenue, Tel: 507-646-1201

**Northfield Eye Physicians + Surgeons**  
2019 Jefferson Road, Tel: 507-645-9202

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

**Rehabilitation Clinics**  
Northfield: 1381 Jefferson Road  
Tel: 507-646-8800  
Lakeville: 9913 – 214th Street West  
Tel: 952-985-2020

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

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

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



This magazine is published as a community service for households served by Northfield Hospital + Clinics. Additional copies are available by calling Community Relations, 507-646-1034. Information comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your health care provider. Contents copyrighted. All rights reserved.

**Steve Underdahl** - President and CEO  
**Sarah Carlsen** - Chair, Board of Trustees  
**Jeff Meland, MD** - Chief Medical Director  
**Betsy Spethmann** - Editor  
Cover and page 3 photo by Dan Iverson, theanthologie.com

WE'RE ONLINE

