PRESENTED BY KERN MEDICAL Summer 2017



Bariatric Surgery

A New Beginning

Valley Fever

Fact Check

It Takes a Village

Caring for Our Own





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SUMMER 2017

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We hope you enjoy this edition of Health for Life. Comments about the publication can be directed to the Marketing & Communications Department:

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150 years and beyond

As Kern Medical marks its 150th anniversary, I've been thinking a lot about our place in history. We're proud of our legacy serving as our county's public hospital. Our organization's predecessors built a solid reputation of quality and compassionate care for all, with trauma, specialists, and physician training programs second to none in the region.

But healthcare has changed a great deal over these past 150 years. Technology has brought us new ways to provide care – from penicillin, to X-rays, to the latest in robotic surgery. The economic basis of care also changed, with Medicare, MediCal, the Affordable Care Act (ACA) and whatever may come next. And we've changed, moving from being a county entity to providing care under a hospital authority.

Perhaps the most important change for the community is healthcare providers' shift in thinking from being a reactive supplier of acute treatment to becoming a proactive advocate for, and provider of our population's whole health.

As part of that philosophy shift, Kern Medical is becoming more active and more visible. You'll see us more frequently at community events, providing education and offering health screenings. We'll be speaking to groups at various functions. And, we'll update the community on what's happening at Kern Medical.

One of our recent exciting steps is the creation of the Safe Home, Safe Baby program. It grows out of our ongoing commitment to our youngest residents. Last year, we provided education to nearly 3,000 new mothers at our hospital and throughout the community about safe sleeping for their newborns. We gave away hundreds of cribs to those who needed them, to better ensure those babies are sleeping in safe environments, with an eye toward reducing the incidence of Sudden Unexplained Infant Deaths (SUIDs). This year, the Bakersfield Firefighters Burn Foundation joined us to add fire and scald prevention programs to our SUIDs program under the umbrella of Safe Home, Safe Baby.

We believe the best is yet to come for Kern Medical and the residents of Kern County. Great doctors, great technology and great care in new specialties are arriving almost daily it seems. We look forward with excitement to the next 150 years of serving our community's healthcare needs.

Russell Judd

Lending a Helping Hand



Kern Medical was busy this summer in events that showcased its commitment to the people it serves - and the community's commitment back. From participating in the Relay for Life and helping school kids get pumped for the upcoming sports season, to honoring its medical residents and helping a Girl Scout achieve an award, Kern Medical went the distance.

Pictured clockwise from top left:

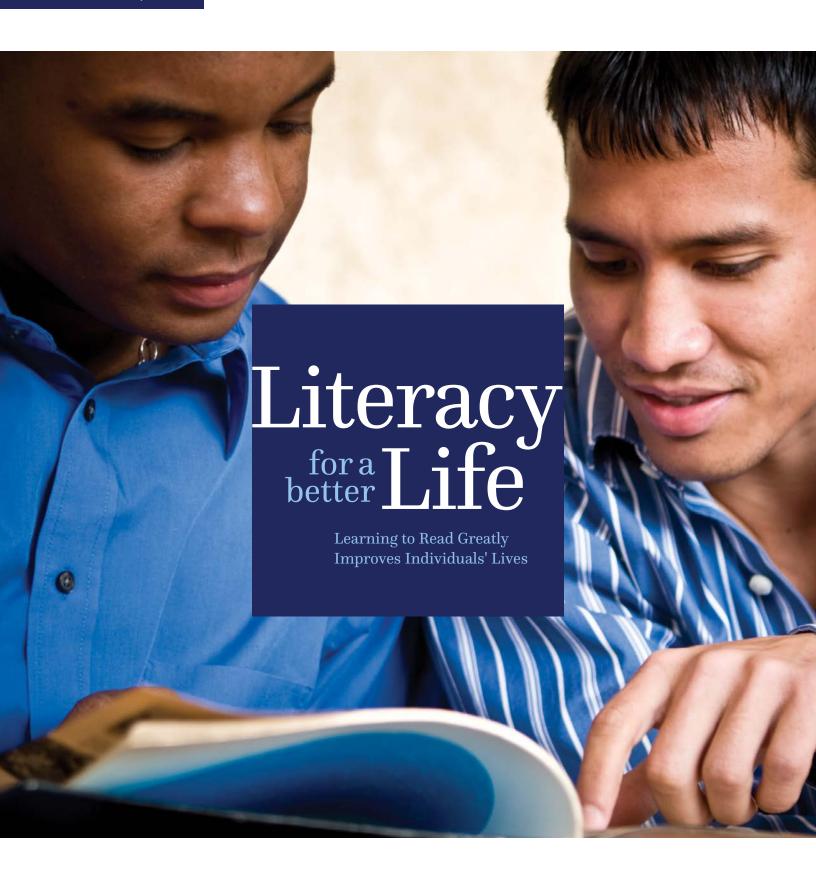
A) Addison Eckard, left, presents her completed Girl Scout Silver Award to the Kern Medical Pediatric Inpatient Unit including a 36-inch television, cart and blu-ray player with more than 300 DVDs and a DVD storage center. B) High school students are enthusiastic as they get ready for sports physicals conducted free by Kern Medical staff. C) Dr. Everado Cobos, right, chair of the department of medicine, leads the Kern Medical team at the American Cancer Society's Relay for Life. D) Dr. Garth Olango of Kern Medical's Department of Psychiatry presents Dr. Naser Ahmadi, center, a certificate marking completion of his two-year fellowship program in child/ adolescent psychiatry. At right is Russell Judd, CEO of Kern Medical. E) Amy Alonso of the American Heart Association presents a Heart Check Mark award honoring Kern Medical for achieving the highest standards in both safety and quality of stroke care.













Literacy and Good Health

Literacy is important in a healthcare setting because patients need to be able to understand their provider's instructions, particularly dosage instructions and side effects of medications.

But there's help for those who struggle with English. Jay Joson, associate director of pharmacy at Kern Medical, points out that since 2016, California pharmacists have been required to provide instructions in English plus any of five other languages - Spanish, Korean, Vietnamese, Chinese and Russian.

That helps, but, Joson points out, more can be done if a care provider has doubts that the patient understands the instructions. He tells his team of pharmacists to keep instructions simple, for example writing 'high blood pressure' instead of 'hypertension.'

One of the most effective steps, he says, is having the care provider ask the patient to repeat the instructions. That way, both parties can be sure they're on the same page.

Following physician instructions is an important step in getting well. And removing barriers to that understanding is a step in the right direction.

heir stories are unique, told in many languages, yet all have come to the same conclusion - their lives would be better if they could read.

There's the man who is losing out on jobs because he can't understand the employment application. There's the woman eager for a promotion, but being held back because she lacks a high school diploma. There's the grandmother who is embarrassed that she can't help her grandson with his homework.

They've all come to the Kern Literacy Council for free help. Here they are paired with volunteers who work on whatever skills are needed - reading and speaking English, preparation for GED or citizenship testing, even computer literacy. All volunteers receive training in working with adult learners.

The 51-year-old council is a nonprofit with a mission to empower

Reading just 15 minutes a day can be life-changing."

individuals to improve their quality of life through literacy education. We view our success stories with pride. But we know there's much more work to be done in a community where 15 percent - more than one in seven adults – lack basic English literacy skills, and a quarter of adults over 25 do not have a high school diploma.

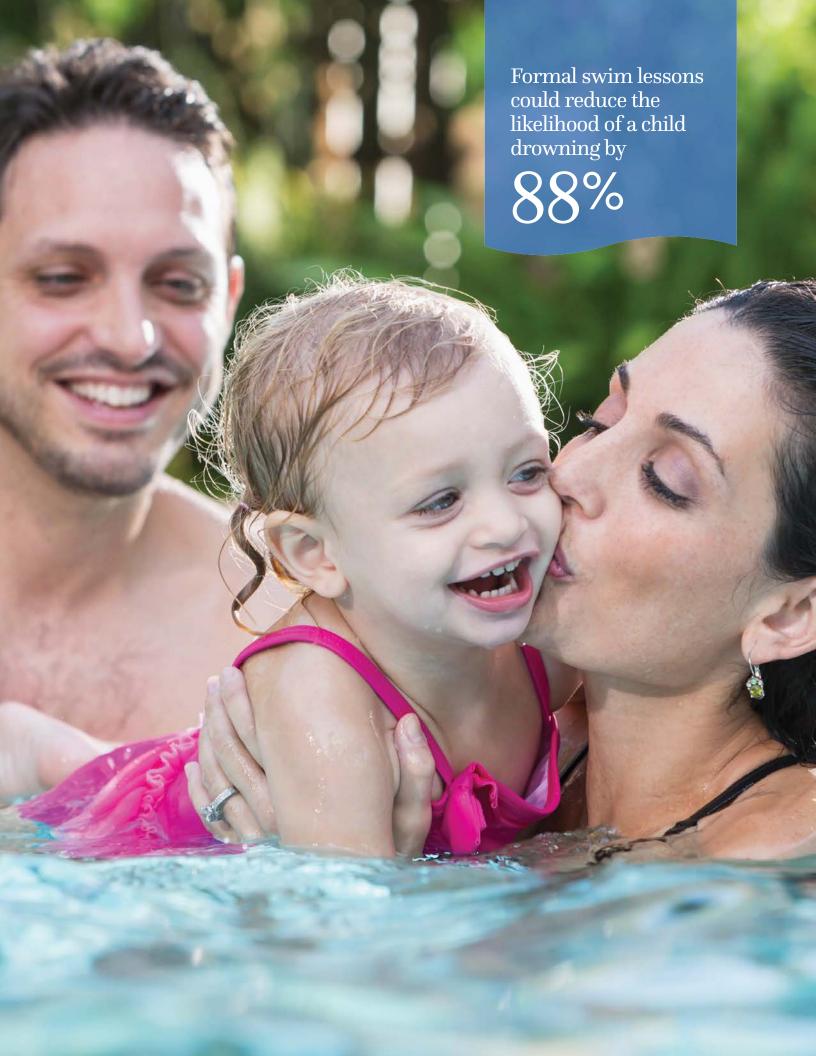
A team of 100-120 volunteers puts in 14,000-17,000 hours each year conducting free lessons. Some are done in the council's office on 18th Street; some are done in coffee shops, libraries or other public settings. While the normal relationship is one-on-one, a new program offers group classes in schools with the goal of improving communication

between parents and teachers.

Reading just 15 minutes a day can be life-changing.



Laura Wolfe is the executive director of the Kern Literary Council. For more information, visit kernliteracy.org. To enroll as a student, volunteer as a teacher or to donate, call 661-324-3213.



Simple steps to prevent drowning the leading cause of toddler deaths

[]]]]]

Contributed Content by Christine Lollar

taying cool during Kern County's hot summer months often involves taking a swim. Whether it's a backyard pool, a city pool or a nearby lake or river, our area has some great recreation spots. We must keep in mind that drowning is the nation's leading cause of death for children ages 1-4 (most often in pools); 75 percent of those tragedies occur during the summer.

Right here in Kern County, drowning is the second leading cause of accidental death among all children. A total of 120 children were hospitalized and 49 died from drowning between 2003 and 2013.

Prevention is key. Most child drowning victims were not expected to be in or near the water, but slipped away unnoticed while adults were distracted by routine activities; many victims were missing only a few minutes before being discovered in a pool.

Drowning prevention steps are simple and help is available:

Adult Supervision

An adult must supervise children when they swim staying within an arm's reach of inexperienced swimmers. Keep a constant eye on children in or near any water including bathtubs, buckets, toilets, ponds, spas, pools, lakes and open waterways, e.g., lakes and the ocean. Drowning happens quickly and silently - there are no warning sounds or splashing. Brain damage or death can occur within two to five minutes and often victims are out of sight for less than five minutes. Don't let kids swim alone.

Keep Things Clear

Make sure your pool isn't a safety hazard. Fence pools with a self-latching, self-closing gate as required by local codes. Install alarms on house doors, windows and gates leading to the pool area. By not leaving pool toys out and draining baby pools immediately after use, you can eliminate the lure of unsupervised water play for children. Remove any barriers that could block your view of the entire pool area. Make sure drain covers are secure and up to code. If you're at someone else's home, assess the area so you know the risks - especially if your child isn't used to a pool. If you have a pool and have visitors who don't swim, inform them of drowning prevention safe practices.

Wear Life Vests

Children and any inexperienced swimmers should wear U.S. Coast Guardapproved life vests in open water areas (and learn how to fit them appropriately). Inflatable toys can be fun, but they are not a substitute for a life jacket. It's important to understand the difference. In public areas (pools, lakes, beaches) lifeguards are not babysitters. Stay close and keep your eyes on your children constantly.

Learn CPR

Learn CPR (and ask grandparents, babysitters and any caregivers to do the same). The technique can be learned in a few hours and can save a life. The sooner CPR is started in an emergency, the better the chance for recovery. First 5 Kern funds two water safety programs locally: A) The City of Bakersfield's Make a Splash program makes CPR and First Aid classes available free to parents of children under age 5 through the Department of Recreation and Parks. The next session is Sept. 9, at the McMurtrey Aquatic Center. Registration is required; check the Bakersfieldswim.us website for details. B) Kern Valley Aquatics Program provides families with children five and under with certified American Red Cross water safety, injury prevention and swim lessons.

Teach Everyone to Swim

Teach everyone to swim. The website USAswimming.org estimates that formal swim lessons could reduce the likelihood of a child drowning by 88 percent. Red Cross Learn to Swim classes are offered at six levels of instruction and are available throughout the summer at the city's four pools. Check the website Bakersfieldparks.us for details.

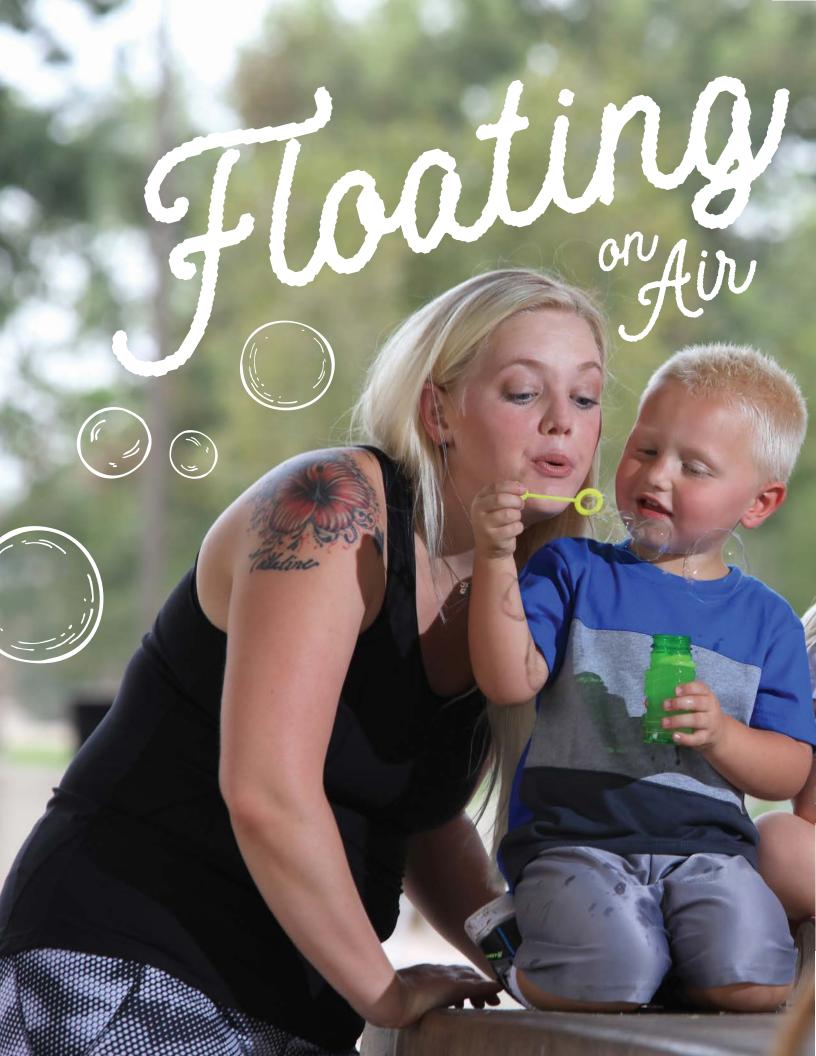
Check the kvap.org website for details.

Get Help

If trouble strikes, call 911 immediately.



Christine Lollar is a communications specialist with First 5 Kern. The organization's funds are generated from the Proposition 10 tobacco tax promoting early childhood development for children under the age of 5 in the areas of health and wellness, early childcare, parent and early childhood education, and support services. Visit First5Kern.org for water safety tips, videos, activity pages, even sing-a-long videos about water safety and more.







hortly after her scale moved past 300 pounds, Lily Johnson looked in the mirror and told herself her life had to change.

"I wasn't comfortable in my own skin," she recalled.

Now, two years after bariatric surgery, she's nearing her goal weight of 150 pounds and is busily recommending the approach that worked so well for her.

Lily had weighed about 160 at the start of her first pregnancy. Her significant weight gain was just water, her doctors told her, and it would be easy enough to shed. It wasn't.

She actually lost a few pounds during her second pregnancy. After the birth of her son, she'd hit the gym five days a week and counted calories, but in hindsight, her eating habits were sending her on a dangerous spiral.

One of the classic weight-loss strategies involves writing down everything a person eats – solid and liquid – during the course of a day. When Lily starting writing, she saw the problem.

"It was an eye-opening experience," Lily recalled. "I saw why I wasn't losing weight. Starbucks, sodas.... Some days I was consuming 8,000-12,000 calories, 4,000 in liquids,"Lily said.

She slipped into what she described as a "slight depression" over her weight. She consulted her husband, her mother and her family doctor about courses of action. And she talked to Dr. Andrea

Lily with her husband Kevin and children Madaline and Jett.



Pakula, a general surgeon and associate director of the surgical critical care unit at Kern Medical.

Lily, a surgical technologist at Kern Medical, had worked with Dr. Pakula and had taken note of her success in bariatric surgery.

BARIATRIC SURGERY

Bariatric surgery "is the only durable cure for obesity," Dr. Pakula said.

Since the arrival last year of the daVinci Robotic Surgery System, she has overhauled her bariatric practice to take full advantage of the advanced technology. The daVinci system allows the surgeon to see in 3-D, she explained. The result is more precision in a less invasive procedure.

Installing the gastric sleeve that shrinks the stomach takes about an hour and fewer than two percent of patients experience complications, Dr. Pakula said. She expects to do about 150 such operations this year. She also performs other surgeries with the daVinci.

Bariatric surgeons across the country have shifted to using the gastric sleeve rather than the once-popular lap band technique. The reason is simple: Better results.

And a new gastric bypass technique being used in Europe could be even better, although it may be at least five years before it's cleared for use in the U.S.

But even with the technology advances, weight loss surgery isn't a guaranteed answer.

Dr. Pakula estimated that 40-50 percent of patients will reach their target goal, 30-45 percent will lose but not

reach goal, and 15-20 percent will fail.

Even with surgical intervention, losing weight is hard work and takes discipline, she explained.

CHANGE IN LIFE

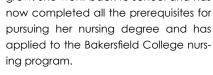
Lily's surgery, in July 2015, went smoothly. While she was off work for six weeks, the biggest issue for Lily was a restriction on lifting, a tough one for the mom of a two-year-old.

By that Christmas, her life was changing, even if she didn't realize it at the time.

It was Christmas morning and Lily was on the floor opening presents with her children. "My husband was looking at me funny and I asked him what was up. 'I've never seen you get on the floor with the kids before,' he said."

Her weight continued to melt away in 2016, but then she hit a plateau. At one point, she said, she'd actually gained a few pounds. "I didn't think that was possible with the sleeve but it is. I rededicated myself to eating right and exercising. I'm not at my goal, but I'll get there."

Her energy levels continued to grow. She went back to school and has

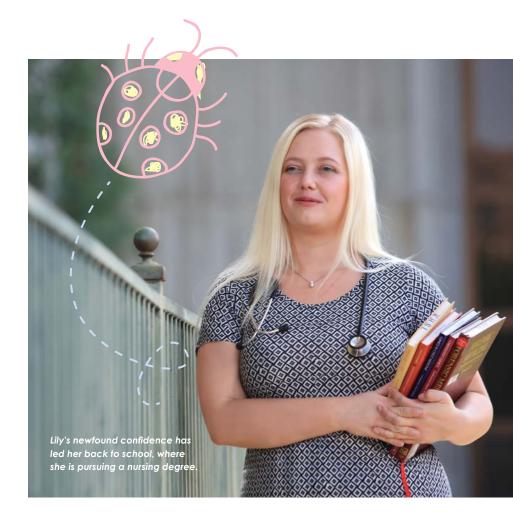


A FAMILY AFFAIR

Her progress hasn't gone unnoticed among her family. A cousin had the gastric sleeve surgery earlier this year. Her husband has begun the required six-month regimen of evaluation and documenting weight-loss efforts before surgery. And then there's her

When Lily announced she was going to go for the bariatric surgery, mom was dubious, Lily recalled. "She said: 'We'll see how it goes.' I'm competitive by nature and that just made me want to prove I could do it."

Now her mother, who has Type II diabetes, has started that long sixmonth process that leads to her own bariatric surgery.









LOOKING BACK + MOVING FORWARD



A HISTORY BUILT ON healingforall Through changing times, Kern Medical remains

committed to the health of all in Kern County

Today's Kern Medical is the result of 150 years of proud public service. It hasn't been easy; it hasn't been without controversy or crisis.

With the perspective of time, three unique Kern County events shaped its development - the 1930's battle over care for all, the 1952 earthquake and the 2016 move to a hospital authority.

Kern Medical traces its history to 1867, when the county purchased a one-room house in Havilah, mainly to quarantine patients with communicable diseases. But population growth forced changes, a recurring theme.

In 1875, the hospital moved to Bakersfield. The one-story building was on G Street on the current site of Bakersfield High School.

In 1894, a new county hospital, supported by a bond issue, was established at 19th and Oak streets. That two-story facility had room for 40 beds, an operating room, a kitchen and offices.

By 1922, Bakersfield was booming and the county supervisors approved the purchase of 27.5 acres of land on Flower Street. The price: \$500 an acre. But the original construction estimate of \$500,000 swelled to \$1 million in pursuit of what The Bakersfield Californian said, "will be the last word and the best that money can buy."

The new facility opened in grand style on Sept. 27, 1925. A total of 66 patients were moved from the Oak Street hospital.



Perhaps of even greater long-term significance was the emergence of the Kern County Plan, a new approach to healthcare that recognized the at least 80 percent of the populace could not pay for an extended hospitalization. The premise was that medical care, like education, should be available to all. And at public expense, if necessary.

That was before the stock market crash of 1929 and the Great Depression. By 1931, private physicians and hospitals had grown tired of seeing 'middle-class' patients unable to pay their bills and moving to the county hospital under a loose definition of indigence. There were charges of favoritism in who would be found in need. In an acrimonious

meeting June 17, 1931, the complaints were laid before the supervisors.

A 1940 county report offered an extensive section on what happened next.

One supervisor was having trouble paying a private hospital's bill for treatment of a family member. Another had just been released after a stay at Kern General. "Neither was in a humor to hear the institution criticized and bitter exchanges at this meeting resulted in a dramatic announcement.... flinging the doors of the hospital wide open to depression-depressed citizens."

The concept of 'indigent' access was replaced with a \$3 a day basic fee plus a sliding scale of costs based on ability to pay.

Physicians and private hospitals were enraged. They mounted legal and political opposition that lasted almost five years. The battle raged in dueling newspaper advertisements and spirited radio broadcasts. Depression-weary residents rallied to the hospital cause and were joined by labor groups and the Farm Bureau.

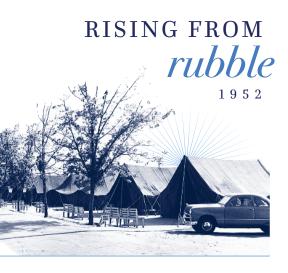
Meanwhile, the hospital was setting new admission records each month. Patient beds were lining the halls while a lawsuit by opponents succeeded in delaying any new construction.

One important step wasn't derailed. In 1934, the hospital opened its residency program and the training of the next generation of doctors would grow into an important facet of Kern Medical's program.

It wasn't until 1936, when the Fourth District Court of Appeals supported Kern County's authority to treat 'non-paupers' in the county hospital, that that issue cooled.

In that 1940 report, Dr. Joe Smith, the medical director and a lightning rod of the policy fight, summed it up this way:

"We have been forced to meet the needs of a tremendously increasing population and one crisis after another by emergency measures for which little time has been allowed for planning and consolidation of organization. In spite of these considerations, we of the Kern General Hospital are very proud of the fact that all of us in Kern County, working together, have visioned, defended and developed an idea so liberal as to be almost unique in the world today."



A little before 5 a.m. on July 21, 1952, an earthquake struck along the White Wolf Fault near Wheeler Ridge, southeast of Bakersfield. It measured 7.3

on the Richter scale, making it the worst earthquake in California since the 1906 quake that devastated San Francisco.

The initial quake left 12 dead and caused an estimated \$60 million in property damage. But Mother Nature wasn't through. Five aftershocks rocked the area later that day and aftershocks continued to rumble for weeks. One, on Aug. 22, measured 5.6. It killed two and caused an additional \$10 million in property damage.

Kern General Hospital's 1925-era masonry was no match for the earth-quake's destructive power. Hospital buildings and the administration building suffered extensive damage, forcing some medical care outside.

The Marine detachment at Yermo arrived with large tents. But even performing medicine in the shade of a tent

was no picnic in Bakersfield's summer heat

When the immediate crisis passed, evaluation revealed an estimated \$20 million in damage that would necessitate demolishing several structures.

Community support was broad and the county moved quickly to approve construction of the B and C wings, which opened in 1956.

But growth continued to accelerate – both for Bakersfield and its hospital.

In 1982, D wing was completed and a decade later work would begin on the Emergency Care Unit.

In 2001, Kern Medical Center, as it was known then, was designated a Level II Trauma Center, the only advanced trauma center between Fresno and Los Angeles.

a new 2016 BEGINNING



Call it a perfect storm. Healthcare costs and the number of uninsured Californians were climbing at alarming rates. The ability of the county to cover the costs was exhausted. Something had to give.

In 2014, the county launched the creation of a hospital authority which would take over ownership of – and financial responsibility for – the hospital. The idea was modeled on Alameda County and the Alameda Health System.

For two years, Kern County worked through the details, including winning approval from the state legislature, to begin the transition. On June 13, 2016, the hospital authority took control.

The new entity – rebranded Kern Medical in January 2016 – provides a variety of services to the entire community. Along with the change in ownership, the swing from red ink to black has been impressive.

Supervisor Zack Scrivner, speaking at a ceremony marking the authority's debut, said that Kern Medical had moved from losing millions of dollars a month to making an average profit of \$800,000 a month.

The non-profit authority wasted no time in investing in upgrades. New technology, new specialties, new physician office locations, new staff and building improvements signified a new day for Kern Medical.

EVOLUTION of Care

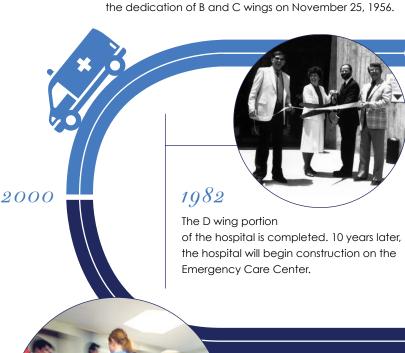
1867

Kern Medical is founded as a one-room adobe hut in Havilah (about an hour east of Bakersfield).



1952

An earthquake destroys portions of the hospital with the administration building hit hardest. Subsequent renovations expand Kern Medical into a modern accredited facility, with the dedication of B and C wings on November 25, 1956.



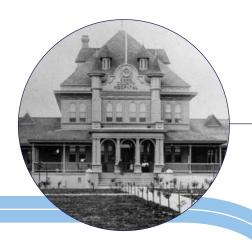


Kern Medical is designated a Level II Trauma Center. To date, we continue to be the only advanced trauma care center between Fresno and Los Angeles.

1875

The first hospital building is established on G Street by William McFarland at a cost of \$1,400 and doubles as a morgue. Henry S. Bachman serves as the sole doctor for the community that numbers fewer than 1,000.





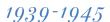
1895

A new two-story hospital opens. Constructed on six acres at 19th and Oak streets, it is equipped with 40 beds, staffed by five doctors and eight nurses, and is noted for its up-to-date surgery.

1922

Growing health needs of the community necessitates the construction of a new facility. Planning and construction began on that facility, located at Flower St. and Mt. Vernon Ave., where we remain today. The first 66 patients were transferred from the Oak Street building to the new facility on September 27, 1925.

1900



The war years see our operating budget surpass \$1 million for the first time. About 500 employees work at the hospital, and the patient count averages just over 600 per day.



A physician residency program debuts, quickly becoming an integral part of our mission.





2017

2016

Kern Medical transitions from county ownership to a Hospital Authority, enabling us to better serve our patients as a safety net provider, academic training center, and leader in trauma and specialty services. We also expand to the west side of Bakersfield with new Stockdale and Truxtun physician offices.



Today, Kern Medical remains committed to serving the people of our community. Our care, while sophisticated, comes with compassion, respect and kindness in a community of diverse needs.

THE BEST

and brightest

As Kern Medical looks ahead to its next 150 years, it's clear that its medical professionals are key to serving the entire community

It was the career opportunity that brought Dr. Everardo Cobos to Bakersfield. The oncology specialist was director of hematology and hematologic malignancies at Grace Health System's Blood Disorders and Cancer Therapeutics Center in Lubbock, Texas and he had previously served for 20 years as division director at Texas Tech.

Now, he felt ready for a larger role and a larger challenge. Kern Medical agreed and named him chair of medicine.

Dr. Cobos called it a unique opportunity to take part in rebuilding and growing both the teaching and clinical programs.

His background includes a fellowship at Letterman Army Medical Center

"I want to grow with Kern Medical."

in San Francisco; time as chief of hematology at Madigan Army Medical Center in Tacoma, Wash.; and specialized training in bone marrow transplantation at the Fred Hutchinson Cancer Center in Seattle.

Now he's busy recruiting new full-time faculty in the department and expanding the residency program. The key is "developing critical mass" among the medical teaching professionals, he said.

And it's all being done with an eye toward delivering the highest quality of care.

One of the specialists he recruited is Dr. Sabitha Eppanapally, who in April became Kern Medical's first full-time faculty member in nephrology. She received her medical education in her native India and is fellowship-trained at both Harvard and Yale. The kidney specialist had been in private practice in Kern County, but wanted to teach and to help create a specialty practice within a hospital environment.

For a nephrologist, Kern County is a fertile field, with the area's large number of diabetics at high risk for developing chronic kidney disease. And Dr. Eppanapally recognizes that the need for a nephrology specialty is acute.

"I want to grow with Kern Medical," she said.

Dr. Ruby Skinner, Kern Medical's chief of trauma services, shares that sentiment.

After residency and a fellowship at UC Davis-East Bay plus a fellowship at the University of Pennsylvania Medical Center, Dr. Skinner was working as a trau-



Dr. Everardo
Cobos
Chair of Medicine



Dr. Sabitha Eppanapally Nephrology

ma surgeon in Los Angeles when a Bakersfield vacancy came to her attention.

"I missed teaching and Kern needed a trauma surgeon," Dr. Skinner recalled. It seemed like a fit in 2009 and it still does today.

Recent changes have been good for Kern Medical, she said, pointing to a major investment in robotic surgery technology that is expanding her department's ability to offer additional minimally-invasive surgical options.

She also pointed to Kern Medical's effort to engage with the community on programs as varied as Safe Home, Safe Baby and Stop the Bleed as a sign that better days are at hand.

Dr. Royce Johnson, who has been working on Valley Fever since coming to Kern Medical in 1975, concurs, saying "It's increasingly fun to work here." The hospital authority has "allowed us to get our financial legs under us," he

said, and that means increased support for research.

Dr. Johnson, who did fellowship work in both infectious disease and virology at UC Irvine Orange County Medical Center, said his interest in Valley Fever came with the job. "It's what they had and it's what was needed."

Kern County has the highest per capita incidence of the pneumonia variation in California and rivals Tucson for the highest in the nation.

Over his 42 years at Kern Medical, Dr. Johnson has become one of the na"farm labor family" in Mexico and said he identified with the patients he was seeing in the Bakersfield clinic.

"The patients are so grateful and treating them is gratifying. They are humble and underserved," he said. "Sometimes they bring me grapes as gifts."

He was the first in his family to go to college and he understands the importance of education. That's one reason he values the opportunity to teach surgical techniques to the next generation of doctors. "I hope to end my career here," he said.

far as "positive" and pointed to the strategy of expanding specialty expertise so many Kern County patients would no longer need to be sent to Los Angeles for treatment of complex cases.

That push to expand specialty care is what closed the deal for Dr. Andrew Cassidenti, a uroaynecologist.

Dr. Cassidenti called Kern Medical CEO Russell Judd and Chief Strategy Officer Scott Thygerson "true partners" who want to work with doctors to create a center of excellence.

Their approach is "physician- and



Dr. Ruby Skinner Chair of Trauma



Dr. Royce Johnson Chief of Infectious Diseases



Dr. Juan Lopez Chairman OB-GYN



Dr. Amir Berjis Director of Medical Education



Dr. Andrew Cassidenti *Urogynecologis*

tion's leading experts on Valley Fever.

He still finds the research work compelling and is sure he has more to contribute in the field. But he acknowledged he is working to assure than Kern Medical remains the leader in Valley Fever research once he retires. His team is capable and eager to carry on the work, he said, adding that Kern Medical has provided the necessary resources.

While Dr. Johnson's 42 years of service are going to be hard to match, some dedicated Kern Medical students turned doctors are positioned to challenge that longevity.

Back in 1998, Juan Lopez was a medical student at Kern Medical and stayed on as a resident. Now he's Dr. Lopez, chair of Kern Medical's department of obstetrics and gynecology.

Dr. Lopez explained that he immediately connected with the community. He described his youth growing in a

Dr. Amir Berjis is another Kern Medical-trained doctor who came back. He carries the dual titles of director of thoracic surgery and director of medical education.

After nine years in private practice, he said he felt "obligated" to accept a teaching role and train the next generation of surgeons.

He said he's encouraged by recent changes and is especially pleased with the investment in expanding the residency programs. As director of medical education, he's focused on the intertwined goal of recruiting the best students and then retaining them after they graduate for the benefit of the Kern County community.

Dr. Berjis has a unique perspective on changes at Kern Medical: he's a member of the hospital authority's board.

He characterized the changes so

patient-centric," he said. "That's something I've been waiting for my whole life."

Dr. Cassidenti was in private practice in Orange County but wanted more. At age 60, he wanted to teach, to share what he'd learned with new doctors. He described it as a desire to be "more impactful."

In Kern Medical, he found the teaching role and the chance to become the only urogynecologist in the region, rather than one of several in Orange County. "It was a very exciting opportunity," he said.

Taking the job involved some difficult choices, but he bought a house and dug into the Bakersfield community.

On balance, "It's the best decision of my life," he said.

With committed medical professionals like these, it's easy to see why the future is bright for Kern Medical.



KernMedical.com



PICIURING

Ultrasound Technology Better Prepares Physicians in Training to Detect Abnormalities

Kern Medical is embracing new technology in the training of its OB-GYN resident physicians in the use of ultrasound.

The SonoSim Ultrasound Trainina Solution allows students to connect via computer and access thousands of ultrasound images from the SonoSim database. These images give students a look at normal and pathological sonographic conditions that would be difficult to replicate in the real world.

A HEALTHIER FUTURE

Dr. Randolph Fok, chief of the division of maternal fetal medicine, said the SonoSim technology is a valuable tool in teaching physicians about normal and abnormal conditions both of the fetus and the mother-to-be. Students use the transducer to perform ultrasound testing on various parts of the body and the database returns an image, just as it would in real life.

Before SonoSim, Dr. Fok explained, training was limited by the pool of pregnant women being cared for. That meant rare conditions were rarely seen by the residents, limiting their educational development. Through SonoSim, residents will be exposed to a wider range of situations as they learn to distinguish abnormal from normal.

A study published by the University of California found SonoSim yielded a 121 percent improvement in basic scanning procedures and a 545 percent improvement in diagnostic interpretation.

The SonoSim package also includes an online training course that helps prepare the physicians to pass national licensing exams.

Kern Medical has 12 OB-GYN residents at a time in its four-year OB-GYN program. All will become proficient in





or all of its 150-year history, Kern Medical has enjoyed broad community support. It's come from elected officials, in the use of its services and in the donation of time, talent and treasure by individuals and organizations.

To function at its best, it takes a village to support its healthcare system. A few examples show what happens when Kern County reaches out.

Meet Jeff Hill. He's a retired nurse, a key member of the Outlawz Car Club and a seasonal Santa Claus.

When Hill worked in Kern Medical's neonatal intensive care unit (NICU), he saw first-hand the challenges faced by the fragile newborns, by their families and by all children who found themselves hospitalized over the holidays. In retirement, he still works some per diem shifts in the NICU and shares his experiences with his friends at the Outlawz Car Club.

"It's important for us to partner with people on the frontlines."





The club is a tight-knit band of about a dozen families who share a common interest in pre-1969 classic cars and in helping their community. They came up with the idea of a toy drive, which debuted in 2006 and culminates each year in Hill playing Santa.

Since then, the toy drive has grown and grown. The 40-50 area car clubs that take part in Outlawz shows have gotten involved. Vendors donate in lieu of an entry fee.

Come the first Saturday in December, the Outlaws will set up at Crest Bar and RV Resort to collect the goods. The following weekend, there's a reunion at the hospital and then the toys are distributed.

But it's not all fun and games. The Outlawz have seen the effects of the financial problems that often come with having an ill child. They've responded with gift cards to help the families, particularly those who have had to travel to be with their child, to defray the costs of food and travel.

The Outlawz are just one organization among many supporting programs at Kern Medical. The Junior League of Bakersfield has been involved in a number of programs over the years. For 2017, the League's focus has been on helping children and that led to providing the financial support that is allowing Kern Medical to launch its first lactation training program for about 30 new moms.

It's an important program, said Kathryn Drewry, community research chair. "Our vision is to impact our community through voluntarism and to contribute to the well-being of individuals in our community, with a focus on the welfare of women and children... Educating women about the benefits of breastfeeding, while giving them the equipment and tools needed, will impact both the mother and children's lives."

Similarly, when Kern Medical took a leadership role in combating Sudden Unexpected Infant Death (SUID), one of the groups eager to help was Bridge Bible Church.

"It's important for us to partner with people on the frontlines," said Carrie Beahm, who handles community outreach at the church. "We were pre-



The Junior League of Bakersfield educates women about the importance of breastfeeding, while giving them the equipment and tools needed.

pared to provide full-size cribs, but the folks on the front lines said pack 'n play were a better fit for the community's needs. So that's what we did."

Individuals also are having a big impact. Consider the experience of Robbin Weege and her friend Constance Berg. They became fast friends in Bakersfield and stayed close even after Berg moved to Long Beach. Their bond is their faith and their similar experiences doing missionary work in Central America.

Weege was telling Berg about the joy she was feeling as a volunteer in Kern Medical's "cuddle program." Once a week, she goes in to the NICU and holds babies, changes them, nurtures and loves them.

Berg, a quilter, asked what she could do to help and the idea of quilting baby blankets was born. Berg put out word in her Long Beach community and asked if anyone had some excess fabric to donate. Soon the fabric was rolling in and other quilters were getting involved. The pastor of her church offered a room and the ladies went to work. On Mother's Day, the pastor blessed 104 blankets. Berg drove the cargo and handed the blankets to Weege.

The staff at Kern Medical was so moved by the gift from Long Beach they've decided to frame one of the blankets as both a tribute to the generosity and a reminder of the power of community involvement.

The blankets are colorful and brighten the look and feel of the high-tech NICU setting, Weege pointed out.

Meanwhile, back in Long Beach, Berg and her friends are at work quilting blankets for a NICU in their city.

Good ideas spread, Weege said. "It only takes a conversation."





SPECIALIZED EXPERISE

Renowned Urogynecologist comes to Kern Medical

Norm Bell STAFF WRITER

hen Dr. Andrew Cassidenti decided to move his urogynecology practice from Orange County to Bakersfield, there was one overriding consideration.

"I wanted to be more impactful," he said, explaining that while Orange County has an ample supply of urogynecologists, Kern County had none.

Little did he know just how far his new practice area would extend.

Patient Kathleen Lemke showed that even some of the specialty surgeries that Dr. Cassidenti performs aren't even available in places like the San Francisco Peninsula.

For more than a decade, Lemke, a Salinas resident, had experienced problems from a prolapsed bladder. Two surgeries had failed to produce a lasting solution.

Her gynecologist – Dr. Jim Ross – was recommending a specialized vaginal surgery performed by only a few urogynecologists. Lemke consulted Stanford University, but the surgery isn't offered there. Her doctor recommended Dr. Cassidenti in Bakersfield.

So, Lemke made the long drive south and consulted Dr. Cassidenti. Dr. Ross drove down and observed the surgery.

To say the results were favorable would be an understatement. Just 21 days after surgery, Lemke said she was aboard a plane to Paris and on to Morocco for a long-planned vacation.

Recommended recovery time is six weeks.

"No problems at all," she said, adding that she did skip some of the side trips that required climbing.

The specialized vaginal surgery that is helping Lemke is just part of the repertoire of a urogynecologist, Dr. Cassidenti said.

Urogynecology is one of four sub-specialties recognized by the Col-





"I wanted to be more impactful." Physicians seeking the designation must present evidence of experience in procedures and treatments as well as pass a stringent exam.

Urogynecologists specialize in diagnosing and treating a wide range of pelvic floor disorders such as urinary incontinence, overactive bladder, genital prolapse, and neurological dysfunction of the bladder and pelvic floor.

The pelvic floor can be damaged by childbirth, repeated heavy lifting, chronic disease or surgery.

In Dr. Cassidenti's case, proving experience was the easy part. He'd been treating women with pelvic floor disorder for years in his Orange County practice. The exam prep did require some extra study, he acknowledged.

His interest in the subject started early as he watched his mother suffer from pelvic floor disease. "Women who gave us life suffered the rest of their lives," he said.

In becoming Kern County's first ur-

expertise in handling complex cases that require specialized surgery.

For years, such cases have been referred to specialists in Los Angeles, but that long drive is no longer necessary.

"Kern Medical has allowed us to develop a program, really an enhanced experiment, that combines excellent customer experience and excellent medical care," he explained.

Our process is all designed to make the patient feel comfortable, even pampered, while undergoing complex surgery. Most patients are headed home the next day.

Dr. Cassidenti, who is board certified and fellowship trained, sees patients by appointment at Kern Medical's west side campus, 9300 Stockdale Highway.

He also is a member of the teaching faculty at Kern Medical. The opportunity to train the next generation of urogynecologists is all part of his goal of expanding his impact, Dr. Cassidenti explained.

OPTIMIZING

Fitness & Health



For professional football players like Bakersfield's AJ Jefferson, staying in shape is a year-round business.

Half the year, the former Fresno State defensive back is working under the direction of team trainers. But the other half of the year – the half he spends in his home town – he's largely on his own.

This season, Jefferson is playing for the Ottawa Redblacks of the Canadian Football League. Since leaving Fresno State in 2010, he has also played for the Toronto Argonauts of the CFL as well as the Arizona Cardinals and the Minnesota Vikings of the NFI

He's a speedy pass defender who excels in man-to-man coverage. Yet all those hits – he's credited with almost 200 tackles – take a toll on his body.

Jefferson acknowledged spending time in the cold tub to ease the pains during the season. Recovery time is important in the CFL, where teams often play two games in a week. And fitness is the key.

However, in the off-season, CFL team trainers provide only general guidelines, Jefferson explained, and the rest is up to the player.

That's why Jefferson turned to Athletes' Advantage Academy (A3). He's been with the A3 performance team for two years and calls the experience "phenomenal" and "ideal for athletes."

He said he met with Ryan Beckwith and Tyler Saso, co-owners and neuro sport performance coaches, to discuss goals. In his case, it wasn't about getting bigger or stronger, but rather about conditioning and enhancing his functional skills. He has worked on stretching and stability, hand-



eye coordination and improving his jump.

They developed an exercise regimen and the result was just what Jefferson wanted. "I felt great coming into camp this year." he said.

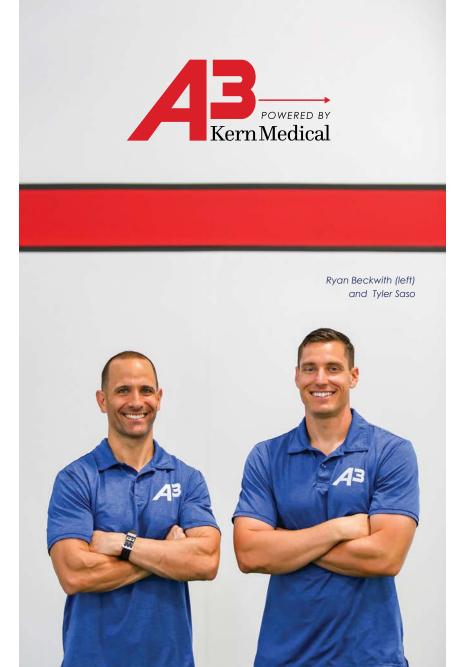
Beckwith said A3's new facility at 5203 Young St., on the city's southwest side, provides a special environment for athletes – pros like Jefferson and prep players aspiring to get better. There's 13,000 square feet inside and lots more outside. There are basketball and volleyball courts under a roof; a 110-meter track; long jump and high jump pits; two baseball pitching tunnels as well as cardio equipment, weights and much more.

"Being human means being competitive"

"Being human means being competitive." Beckwith said.

But there's a lot at A3 for those who are interested in fitness and health, aside from competition. Beckwith said eating right, staying fit and staying active will benefit everyone. Classes emphasize the themes and teach techniques.

A3 defines itself as a non-profit 501 (c) (3)



"...we can create a holistic brand of care to cover every part of life"

organization that offers programs and services in athletic performance, health management, and physical fitness through research, education, and services for people of all ages and abilities.

Its mission statement sets a high bar: "Athletes' Advantage Academy is dedicated to radically optimizing human health, physical fitness, and athletic performance through research, education, and services for people of all ages and abilities. Our mission is delivered through youth development programs, sustainable health management solutions, and recreational, club and team sports."

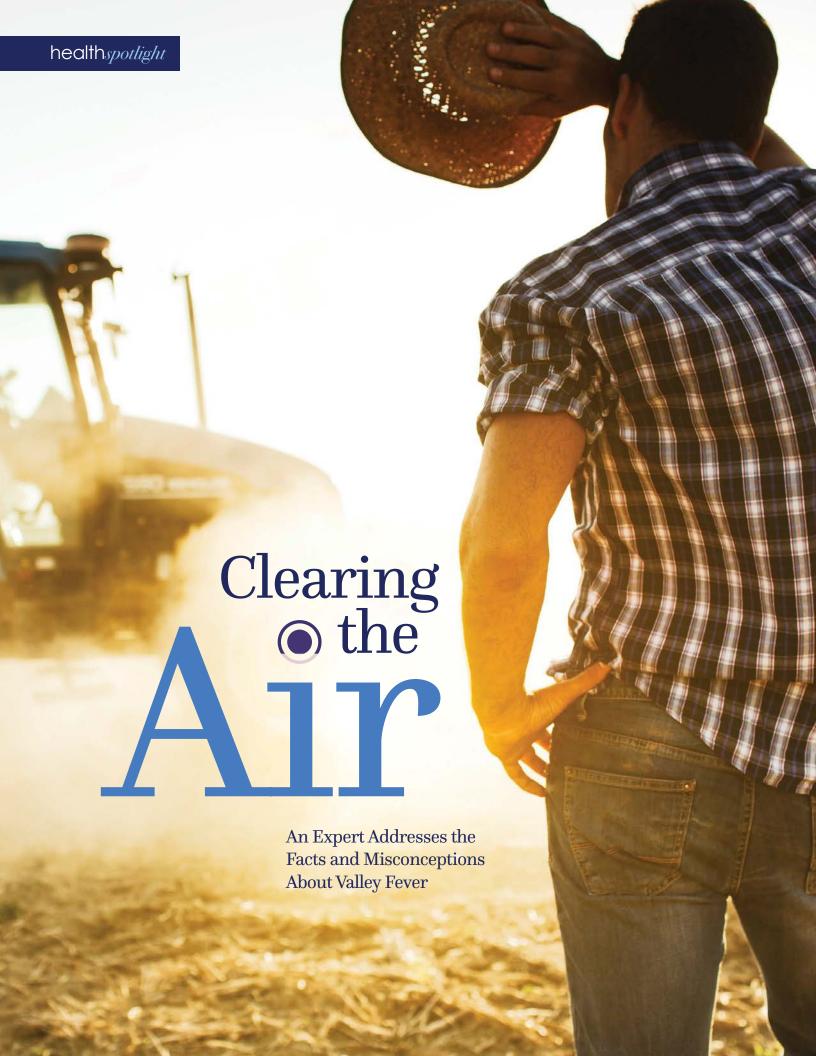
That resonates with officials at

Kern Medical, which has signed a partnership agreement that gives A3 clients access to Kern Medical's orthopedic team including surgeons and sports medicine specialists. Kern Medical clients and staff get special access to A3 facilities and programs as well as pre- and post-procedure "non-clinical" care.

"Part of the reason this is such a wonderful partnership is how we can create a holistic brand of care to cover every part of life – health and wellness education, fitness improvement, injury prevention, comprehensive healthcare etc.," Beckwith said. "It really is exciting for Bakersfield. We hope we can truly change the landscape of Bakersfield from a health outcomes perspective."

Beckwith stressed that A3 is not equipped to handle medical rehabilitation. At least not yet. He said A3 plans to add a physical therapist who can provide that service in the months ahead.

And A3's vision for the future also sets a high bar: "To become the premier Athletic Development training center on the West Coast, as well as to provide the city of Bakersfield with a comprehensive facility that will allow the community of Bakersfield to be the destination spot for local, national and international educational and sporting events."



h, summertime in Kern County. Residents are accustomed to the heat, but the winds and dust could kill you, quite literally.

Our area is one of the nation's leaders in incidences of Valley Fever, a fungal infection that can be life-threatening. And Kern Medical is home to one of the best-known Valley Fever experts – Dr. Royce Johnson.

Health for Life asked Dr. Johnson to share some thoughts on avoiding Valley Fever:

What is Valley Fever?

It is a fungal infection that presents as one of the hundreds of strains of pneumonia. The fungal spores are in the soil across a wide swath of the southwest. Bakersfield and Tucson have the largest per capita rate of infection, although Phoenix has more cases because of its population size. No single facility handles more cases than Kern Medical. The spores are stirred up by the wind and can be carried up to 75 miles. Even sea otters have developed Valley Fever.

What are the Symptoms?

That's tricky. In about 60 percent of cases, there is no perceived illness. In about 30 percent of cases, it's a self-limiting illness that resolves in less than two weeks. But in about 10 percent of cases, patients experience cough, fever, chest pain and loss of appetite. Those are the patients who need to see a doctor because Valley Fever can spread beyond the lungs, to the brain, the joints, the skin, really any part of the body. We're currently treating 156 cases of meningitis from this.

What Can We do to Prevent Exposure?

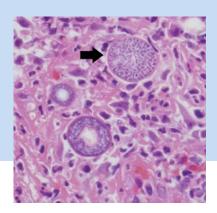
Sadly, not much, short of wearing an M-95 mask. Those are uncomfortable and are practical only for construction workers whose activities stir up dust. Certainly, avoiding dust devils is a good idea. But even staying inside isn't much protection. The spores are fine and are

Valley Fever Research Study

Kern Medical is one of six sites selected for an important national research study to determine if early treatment with the drug fluconazole helps those who may have contracted Valley Fever.

To qualify for the study, patients must be diagnosed with "community acquired pneumonia," a broad term that covers most of the 100 or so forms of pneumonia, including Valley Fever. Those who join the study will be given the normal treatment for pneumonia, but 50 percent of the test subjects also will receive a fluconazole regimen. After six weeks, they'll be examined again.

The study is the idea of the National Institutes of Health. The goal is to enroll more than 500 patients over the span of five years. Two Kaiser hospitals in California and three Banner Health facilities in Arizona are also taking part.



Valley Fever (Coccidioidomycosis)

not caught in home or office air filters. We've had cases where motorists traveling I-5 have been infected. I once interviewed a candidate for a residency here at Kern Medical. He was in Bakersfield a matter of hours and became infected. Luckily, infectious disease was his specialty and he joined us anyway.

How do We Confirm a Diagnosis of Valley Fever and What's the Treatment?

Valley Fever is easily confused with more common pneumonia. There are both skin and blood tests available that help identify Valley Fever. A blood test is the most common, although it results in a high level of false positives. The normal treatment involves fluconazole tablets for 3-12 months. It doesn't kill the fungal infection, rather it wounds it so the body's immune system can handle it.

What Else Should Readers Know About Valley Fever?

It's not communicable. It spreads in the air, not from person to person. And it's seasonal. Valley Fever cases peak in September and October and are fewest in December and January.



Dr. Johnson is active in the area of Valley Fever research. His latest work involves the hunt for a gene that could be the key to who is most seriously affected by Valley Fever and could guide doctors in personalizing treatment. Health for Life will report on that research later this year.



Build for the Future





Erica Easton

Executive Director of

Kern Medical Foundation

Summer is an especially exciting time at Kern Medical as we celebrated all of our graduating residents and welcome new members to our Kern Medical team.

At Kern Medical, both healing and education are a way of life. However the Medical Student and Resident Education program remains a hidden gem in Kern County, with many in our community unaware of our academic pursuits. A significant portion of our local physicians are Kern Medical alumni who have chosen to practice in – and serve – the Kern County community.

Academic programs are led by committed faculty who often describe Kern Medical as a learning institution, not a teaching institution. That perspective is part of what makes an engaging and exciting environment for the more than 110 residents and 120 medical students at Kern Medical each day. This special environment that combines

education with compassionate healing continues to attract world-class physicians to Kern Medical.

When Dr. Drew Cassidenti decided to leave a thriving practice in Orange County for the chance to educate future surgeons, he chose to do so at Kern Medical. Now, we are able to offer urogynecological services that were previously unavailable in Kern County, as well as educate doctors in this relatively young sub-specialty for the future.

Having a faculty dedicated to lifelong learning with the desire to provide the highest quality care for our patients and their families, all while educating our healthcare force, is what makes Kern Medical special.

Over the past year, philanthropy has played a key role in providing state of the art technology and on-going education with the most recent advances for our future physicians. The Kern Medical Foundation is also helping connect our local caregivers with each other to network and share the latest on treatments for Valley Fever, diabetes and

other conditions relevant to the Southern San Joaquin Valley.

Some highlights that show the impact of Foundation funding include:

- The opening of a Student Union for our medical students, which was funded by a gift from the Ross University, School of Medicine;
- The inaugural Kern Medical Foundation Scholarship was awarded to a student from Shafter High School;
- The 17th annual Resident Research Forum featured 36 entries with awards for the top four projects;
- SonoSim Fetal Monitoring software was supplied to all of our OB-GYN residents. This state of the art technology is part of Kern County's only hospital-based High-Risk Pregnancy Program, led by Dr. Randolph Fok;
- Laproscopic training equipment and suturing materials were provided for surgical simulations;
- A fun and educational training video was developed for our Stroke Program, led by graduating resident Dr. Sage Wexner. View it at bit.ly/kernmedicalstroke.

For more information about how you can support academic programs at Kern Medical, please contact us at (66) 489-5253 or visit us at Kern Medical Foundation is a 501(c)(3) nonprofit. Contributions are tax deductible in accordance with state and federal regulations.







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commitment to the health
of Kern County.



