

FAMC & FOUNDATION  
Quarter 4, 2022



A NEWSLETTER FOR RURAL HEALTH CARE

Community Connection



## FAMC Announces Addition of MRI



The Faulkton Area Medical Center Board of Directors are excited to announce the decision to install a Magnetic Resonance Imaging (MRI) unit at the facility.

MRI uses a large magnet and radio waves to look at organs and structures inside the body to diagnose a variety of conditions. “This decision has been in the works for a while now and we are beyond excited to offer this on a more routine and available basis to the patients we serve,” states Gin Bray, Director of Radiology at FAMC. “Having this machine at our fingertips, will help the providers treat patients quicker and more accurately.”

After installing a new GE CT scanner last year, along with the increase in wait times for patients to have MRIs via the mobile service that FAMC provides or scheduled at alternate locations, Gin and Heather Bode, CEO started looking into what GE offered for MRI machines.

FAMC has purchased a 1.5T GE Voyageur MRI unit. “This equipment will help FAMC continue to provide quality healthcare and achieve the best health for our patients”, states Bode. With this machine comes the addition of state-of-the-art air coils which offer the patient a better experience and a more comfortable scan. The coils truly conform to the body like a blanket. “It is exciting to bring not only this service to FAMC, but also the new resources that GE offers in the AIR technology,” says Gin, “keeping patients close to home and onsite for diagnostic imaging is important to FAMC.”

With remodel expected to start soon, FAMC anticipates a February 2023 delivery of the MRI magnet and the electronics to deliver in March. We hope to be completely up and running by April 2023 with this new equipment.

## Health Benefits of Practicing Gratitude

**Jean Mitchell, OT**



The Thanksgiving holiday often provides us with an opportunity to acknowledge the people, things, and situations for which we are grateful. Did you know, however, that a regular practice of gratitude can have positive effects on both your physical and emotional health? Several research articles have noted that practicing gratitude leads to lower stress and better sleep. One study showed that teens who keep a gratitude journal three times a week tend to be less materialistic and more generous than their non-journaling peers. Journaling has been linked to decreased depression and anxiety, increased happiness, and better relationships. Gratitude may not be for everyone, and it cannot make injustice, loss, or pain disappear, but it can give us hope. Gratitude reminds us of what is going well. There are many ways to practice gratitude. Here are some suggestions for you to try to find one that works for you:

- Journal about a person, event, thing or experience for which you are grateful.
- At the end of each day count your blessing by writing down three things you are grateful for.
- Write thank you notes.
- Focus on the good that others have done on your behalf and thank them for it.
- At the beginning of the day think of one thing that you are looking forward to doing and when the time comes to do it, be mindful of the experience.



*“Gratitude unlocks the fullness of life. It turns what we have into enough, and more. It turns denial into acceptance, chaos to order, confusion to clarity. It can turn a meal into a feast, a house into a home, a stranger into a friend. Gratitude makes sense of our past, brings peace for today and creates a vision for tomorrow.” — Melody Beattie*



# How Can Therapy Help When Experiencing Loss

Angela Braaten, Licensed Clinical Social Worker

Grief is often ignored or pushed aside in our society. The reality is, we will all experience loss at some point in our life, creating a need to learn how to go through the grief process. Loss can wage an assault on our heart. The goal of grief work is to help us acknowledge and gain understanding about our individual loss. Therapy helps us learn to notice how loss has impacted and shaped our beliefs about self, God, and the world around us. It can help put words to the pain, identify roadblocks to grief, and fight the battle to reclaim our hearts. Grief work can help us in dealing with anger and unfinished business, teaching us to re-invest our hearts with a greater plan and purpose in mind. The list below is a gentle reminder to have compassion for yourself and others who are experiencing grief.

**Appropriate Expectations You Can Have for Yourself in GRIEF** by Therese Rando, PhD

*You Can Expect That:*

- Your grief will take longer than most people think.
- Your grief will take more energy than you would have ever imagined.
- Your grief will involve many changes and be continually developing.
- Your grief will show itself in all spheres of your life: psychological, social, physical and spiritual.
- Your grief will depend upon how you perceive the loss.
- You will grieve for many things both symbolic and tangible, not just the loss alone.
- You will grieve for what you have lost already and for what you have lost for the future.
- Your grief will entail mourning not only for the actual person you lost but also for all of the hopes, dreams and unfulfilled expectations you held for and with that person, and for the needs that will go unmet because of the death.
- Your grief will involve a wide variety of feelings and reactions, not solely those that are generally thought of as grief, such as depression and sadness.
- The loss will resurrect old issues, feelings, and unresolved conflicts from the past.
- You will have some identity confusion as a result of this major loss and the fact that you are experiencing reactions that may be quite different.
- You may have a combination of anger and depression, such as irritability, frustration, annoyance, or intolerance.
- You will feel some anger and guilt, or at least some manifestation of these emotions.
- You may have a lack of self-concern.
- You may experience grief spasms, acute upsurges of grief that occur suddenly with no warning.
- You will have trouble thinking (memory, organization and intellectual processing) and making decisions.
- You may feel like you are going crazy.
- You may be obsessed with the loss and preoccupied with the lost love/deceased.
- You may begin a search for meaning and may question your religion and/or philosophy of life.
- You may find yourself acting socially in ways that are different from before.
- You may find yourself having a number of physical reactions.
- You may find that there are certain dates, events, and stimuli that bring upsurges in grief.
- Society will have unrealistic expectations about your mourning and may respond inappropriately to you.
- Certain experiences later in life may resurrect intense grief for you temporarily.

**If grief has a hold on your life, consider scheduling a telehealth therapy visit with one of FAMC’s Integrated Health Centers (IHC) providers. 605-598-6262**

## Fall Prevention *Jean Mitchell, Occupational Therapist*



The National Coalition on Aging reports that ¼ of Americans aged 65+ report falling each year. Annually, this results in more than 3 million injuries treated in the Emergency Department, 800,000 hospitalizations, and 32,000 deaths.

South Dakotans are not immune to these statistics. In January 2022 the South Dakota Department of Health released a report regarding unintentional falls by older adults in South Dakota. South Dakota is ranked the 4<sup>th</sup> highest state for deaths related to unintentional falls. From 2001 through 2020 there were 1,494 unintentional fall-related deaths of older adults (65+). In that same time, the rate of falls in the 65+ age group increased 53%. South Dakota DOH data reveals that 43% of these falls occur at home and 47% occur at residential institutions. Reducing the risk for unintentional falls will not only reduce costs, but also improve quality of life for older adults.

Are your loved ones at risk of falling? Causes of falls can be categorized three ways: extrinsic, intrinsic, and behavioral. Extrinsic factors include issues in the home or community such as poor lighting, throw rugs, and icy or wet surfaces. Intrinsic factors are conditions specific to each person and their body or health conditions. Low vision, poor balance and taking multiple medications may be included in this category. Behavioral factors consider how older adults interact within their environments such as rushing, use of a step stool or wearing poor footwear.

Extrinsic factors can be identified and remediated by any member of the patient’s care team or family. Asking the individual if they feel safe at home or if they have fallen in the past year, are good starting questions. A home safety evaluation can be completed by occupational and physical therapists to identify fall risks and provide recommendations to improve safety at home. Changes may include use of motion-activated night lights, storing frequently used objects on shelves at heights between the knees and the shoulders, and removal of throw rugs.

Many intrinsic factors can be addressed by increasing activity levels or participation in an exercise program aimed at improving strength, flexibility and cardiovascular health. Skilled therapy services may be necessary prior to the person developing the capability and confidence to participate in an exercise class or activity. Providing guidance on healthy eating will assist with maintaining strength and endurance. Consultation with the pharmacist or primary care provider may be helpful to identify medications that may be contributing to falls.

Behavioral factors can be addressed by all members of the care team and family. Providing education and reinforcement to use recommended adaptive walking device, not rush, and wear shoes or anti-slip socks can help prevent falls. Changing habits/behaviors is difficult, but consistent messaging may help procure lasting change.



**HealtheLife is the FAMC Patient Portal.** HealtheLife helps individuals and families to stay informed, stay educated, and take a more active role in their health. Through the HealtheLife mobile app, you have real-time and easy access to your health care organization's online portal. This portal shows your latest health care information and provides services needed to plan, understand, and engage in your care.

**Sign up for access with the FAMC Patient Registration team or call 605-598-6262!**





## Ditch the Diet Mentality April Sorensen, RDN

So your doctor has suggested that you work with a dietitian to reach your health and weight loss goals, but you are hesitant to make that appointment. You may be thinking that you know what you “should” be doing to lose weight and that it seems silly to have a professional tell you what you already know. You may also assume that the dietitian is going to judge your current lifestyle and eating habits and take away all the foods you love. Some associate the word “restrictive” with “dietitian” and assume that you the only way to reach goals is to count calories and measure portions. This is a common misconception that people have about dietitians. Maybe it’s because the word “diet” is in our profession’s name and diet-culture has an intensive grip on society but rest assured, working with a dietitian can be an eye opening experience.

There is no one-size approach to weight-loss and what works for one person will fail miserably for the next. Some people do well with numbers - counting calories, journaling their food intake, and meeting their macros. Others do better following the plate method, intuitive eating or simply using meal replacement shakes or bars. One method is no more effective than the other. Instead, the one that will be most effective, is the one that you can sustain for a long period of time while still meeting your nutrition needs. Dietitians are trained to help you figure out which method will work best for you and empower you to make nutrition choices that make you feel better and reach your health goals.

Diet culture is everywhere, from the grocery store to the doctor’s office, and it’s loud enough to drown out your intuition about how to treat your body, even at the cost of mental or physical health. We all have food rules. “Eat this, not that,” “Don’t eat after 6pm,” “No desserts while on this meal plan”. Whether they are rules left over from various diets you’ve followed or longstanding habits from childhood, food rules can become so ingrained in your daily life that you may not even realize you follow them.

For some people, following some basic eating rules can be helpful with learning and instilling new behaviors that promote health; for example, aiming to consume a fruit or vegetable at every meal (if your diet typically lacks produce) or only drinking coffee before noon (because it seems to affect your sleep). But for others, food rules can become overly restrictive and lead to more harm than good.

Are your rules helping or hurting? A common example I give clients is: you are really craving a cookie but one of your food rules is to not eat sweets, so you open the fridge and get a cheese stick. You eat the cheese-stick but that doesn’t stop your craving for the cookie. You proceed to eat a few other items to fill the void and in the end, you are physically full but not satisfied, so you end up eating the cookie. Not only have you consumed the calories from the cookie, but you added calories from all the other snacks (possibly even a full meal or day’s worth). Then, because you couldn’t follow your food rules perfectly, you throw in the towel and proceeded to eat the whole bag of cookies and tell yourself that you will “start your diet again tomorrow.”

If the above scenario describes you—you are not alone. It is common to have this “all or nothing” mentality with food rules. Would it have been better to eat the cookie to begin with? For some people yes, for others it’s a bit more complicated.

To determine if your food rules are helpful or hurtful—you need to ask yourself *why* do you have that rule? For example, if you eat a salad every day for lunch, is it because you really love salads, or is it because that’s what a diet rule told you that’s what you should eat? To help you decipher whether a food rule is helping or hindering you, here are a few questions to ask yourself:

1. Are my rules affecting my social life? For example, if you don’t allow yourself to dine out during the week or only allow desserts on a weekend, but your friends want to go out on a Tuesday night for ice cream, you might miss out on valuable time with friends or family, and emotional or social well-being can suffer.
2. Do I avoid eating when I’m hungry because it’s outside of my designated mealtime? This can actually lead to overeating later at your next meal as well as reduced concentration and fatigue. Your body knows what you need better than any diet plan or rule does — listening to hunger and fullness cues is an important part of overall health.
3. Do I avoid certain foods altogether even if I really enjoy that food (outside of a food allergy, sensitivity, or true dislike of the food)? This can lead to intense cravings and subsequent binges.

People like to classify things as good or bad, healthy or unhealthy, and we judge what other people do against our own food rules, when in reality—it’s all just food, and all food has a place and purpose. It’s learning how to use that food to reach your health and wellness goals that is the most important.

So the next time your doctor recommends working with a dietitian, don’t be shy! Schedule that appointment. You may be surprised at what you learn.





# Older Adults are at High Risk for Severe RSV Infection

Respiratory syncytial virus, or RSV, is a common virus that affects the lungs and breathing passages

**RSV infections can be dangerous for certain adults. Adults at highest risk for severe RSV infection include**

- Older adults, especially those 65 years and older
- Adults with chronic heart or lung disease
- Adults with weakened immune systems

Each year an estimated 177,000 older adults are hospitalized and 14,000 of them die in the United States due to RSV infection.

### Severe RSV infection

When an older adult gets RSV infection, they typically have mild cold-like symptoms including runny nose, sore throat, cough, and headache. But RSV can sometimes lead to serious conditions such as:

- Pneumonia (infection of the lungs)
- More severe symptoms for people with asthma
- More severe symptoms for people with chronic obstructive pulmonary disease (COPD) (a chronic disease of the lungs that makes it hard to breathe)
- Congestive heart failure (when the heart can't pump blood and oxygen to the body's tissues)

Older adults who get very sick from RSV may need to be hospitalized. Some may even die. Older adults are at greater risk than young adults for serious complications from RSV because our immune systems weaken when we are older.



### Scientists are working to develop vaccines

There is no vaccine to prevent RSV infection yet, but scientists are working hard to develop one. If you are concerned about your risk for RSV, talk to your doctor.

[www.cdc.gov/rsv](http://www.cdc.gov/rsv)



### How to protect yourself and loved ones

RSV season occurs each year in most regions of the U.S. during fall, winter, and spring. If you are at high risk for severe RSV infection, or if you interact with an older adult, you should take extra care to stay healthy:

- **Wash your hands often**  
Wash your hands often with soap and water for 20 seconds. If soap and water are not available, use an alcohol-based hand sanitizer. Washing your hands will help protect you from germs.
- **Keep your hands off your face**  
Avoid touching your eyes, nose, and mouth with unwashed hands. Germs spread this way.
- **Avoid close contact with sick people**  
Avoid close contact, such as kissing, and sharing cups or eating utensils with people who have cold-like symptoms.
- **Cover your coughs and sneezes**  
Cover your mouth and nose with a tissue when coughing or sneezing. Throw the tissue in the trash afterward.
- **Clean and disinfect surfaces**  
Clean and disinfect surfaces that people frequently touch, such as doorknobs. When people infected with RSV touch surfaces and objects, they can leave behind germs. Also, when they cough or sneeze, droplets containing germs can land on surfaces and objects.
- **Stay home when you are sick**  
If possible, stay home from work, school, and public areas when you are sick. This will help protect others from catching your illness.



**Centers for Disease Control and Prevention**  
National Center for Immunization and Respiratory Diseases

CS280240  
August 2017

# 8 Negative Effects of Uncontrolled High Blood Pressure

The U.S. Centers for Disease Control and Prevention estimates that about one out of every three American adults have high blood pressure, or hypertension. Because high blood pressure is so common, it might be tempting to assume that it’s no big deal. But the truth is, that when left untreated, high blood pressure can put you at risk for potentially life-threatening complications.

Here are eight ways that uncontrolled high blood pressure can negatively affect your health:

- **It raises your risk of heart attack and stroke.** High blood pressure damages the walls of your arteries. This makes them more likely to develop deposits of plaque that harden, narrow or block your arteries. These deposits also can lead to blood clots. Blood clots can flow through your bloodstream and block blood flow to your heart or brain, resulting in a heart attack or stroke.
- **It makes you more likely to develop heart failure.** When your arteries are hardened or narrowed, your heart has to work harder to circulate your blood. This increased workload can cause your heart to become larger and fail to supply your organs with blood.
- **You may experience chest pain.** Chest pain, also called angina, occurs when the heart does not get the blood it needs. When people with high blood pressure perform activities such as walking uphill, going up steps, or exercising, angina can cause pressure, squeezing, pain, or a feeling of fullness in the chest.
- **It can cause kidney damage.** Your kidneys help your body get rid of toxins and regulate many of your body’s complex functions. High blood pressure can cause damage to the arteries around your kidneys. This can reduce their ability to do their job and, at worst, lead to kidney failure.
- **You are more likely to develop vision problems.** Your eyes are full of small blood vessels that can easily be strained or damaged by high blood pressure. It also can cause swelling of your optic nerve. Lowering your blood pressure sometimes can reverse vision problems. But high blood pressure left untreated can cause permanent vision loss or impairment.
- **You could develop sexual dysfunction.** High blood pressure can cause low libido in women and erectile dysfunction in men.
- **It raises your risk for peripheral artery disease (PAD).** PAD occurs when the arteries in your legs, arms, stomach, or head become narrowed and cause pain, cramping, and fatigue. If you have PAD, you also are at an increased risk of heart attack and stroke.
- **You have a higher risk of hypertensive crisis.** A hypertensive crisis is a medical emergency that causes your blood pressure to rise above 180/120 rapidly. If your blood pressure gets too high, it can cause damage to your organs and other potentially life-threatening complications. Symptoms of a hypertensive crisis include:
  - Blurry vision or other vision problems
  - Dizziness/ Lightheadedness
  - Severe headaches
  - Nosebleed
  - Shortness of breath
  - Chest discomfort or pain
  - A feeling of anxiety or that something is not right

If you have any of these symptoms, call the ambulance (605-598-6229 in Faulk County), 911, or visit the nearest hospital emergency department.



The consequences of hypertension can be costly ... and deadly.





Protecting Your Cardiovascular Health

Your doctor can identify high blood pressure with regular checks. If found, it can be successfully treated using a combination of medication and heart-healthy lifestyle changes—or sometimes, lifestyle changes alone.

Making small changes to your habits, such as eating a lower sodium diet, getting regular exercise, maintaining a healthy weight, limiting alcohol intake, and quitting smoking can lower your blood pressure by 10-20 mmHg or more. And, if your doctor has prescribed blood pressure medication, it is important that you take it as directed.

Self-monitoring your blood pressure will also help. Self-monitoring is when you measure your blood pressure outside of the doctor’s office. Self-monitoring allows you to measure at different times throughout the day over a longer period of time, helping your doctor get a more complete picture of your blood pressure.

Make sure to use the proper techniques to get the most accurate reading. Improper techniques can alter your results (see the chart below).

By using proper self-monitoring practices you and your care team can come up with a treatment plan to better control your blood pressure and prevent more serious complications.

FAMC has a self-monitored blood pressure program with blood pressure cuffs you can borrow. Taking high blood pressure seriously and following your doctor’s treatment instructions can lower your risks of serious complications and make a big difference in your overall health.

If you have uncontrolled high blood pressure or think you are at risk, schedule a visit with your primary care provider and ask about the self-monitoring program.

When you have ...	BP can change by this much ...
Cuff over clothing	10-40mm Hg
Full bladder	10-15mm Hg
Conversation/talking	10-15mm Hg
Unsupported arm	10mm Hg
Unsupported back	5-10mm Hg
Unsupported feet	5-10mm Hg
Crossed legs	2-8mm Hg

The Correct Way to Measure Blood Pressure

Before your reading

- No food or drink for 30 minutes
- Empty your bladder

During the reading

- No talking
- Arm resting at chest height
- Cuff against bare skin
- Back is supported
- Sit with feet flat on floor



Visit [cdc.gov/bloodpressure](https://cdc.gov/bloodpressure) for tips and resources.





# Winter Weather Tips from FAMC

Take a few minutes to review cold-weather safety and health information. This is an excerpt from the extreme cold guide found at <http://www.emergency.cdc.gov/> . Prevent cold-related illness by making sure you and your children are dressed for the weather. Use common sense while traveling and always have an emergency plan in place.

Winter survival kits are recommended for home, car, or anywhere you may spend periods of time without venturing outside. When making these kits, don't forget several days' supply of food that needs no cooking or refrigeration, water, and extra medicines. You may need an alternate way to generate heat, but be careful not to use generators, grills, or camp stoves indoors due to the risk of carbon monoxide poisoning. Infants under age 1 and adults over age 65 cannot make their own body heat by shivering and will need alternate shelter.

Prolonged exposure to cold and snow may cause frost nip, frost bite, hypothermia, and eventually death. Frost nip is defined as painful areas of exposed skin (face, ears, and hands) that progress to numb white patches or blisters. Treatment is rapid re-warming. Prevent frost nip by covering exposed areas and using petroleum jelly to maintain higher skin temps. Frost-bite involves freezing deeper layers of skin. The skin will look waxy and may have blisters. Frost-bite needs to be treated as a second or third degree burn and medical care is recommended. Hypothermia occurs when the body temperature drops below 95 degrees. Seek immediate medical care and avoid jostling the victim, as this may cause death due to irregular heartbeat.

## Seasonal Vaccine Information

### Build up A Strong Defense Against Flu: Get Vaccinated! It's Not Too Late!

The best way to protect yourself and your loved ones against influenza (flu) is to get a flu vaccine every flu season. Flu is a contagious respiratory disease that can lead to serious illness, hospitalization, or even death. CDC recommends everyone six months and older get an annual flu vaccine.

#### What are some key reasons to get a flu vaccine?

- Every year, flu vaccination prevents illnesses, medical visits, hospitalizations, and deaths.
- Flu vaccination is an important preventive tool for people with chronic health conditions. For example, flu vaccination has been associated with lower rates of some cardiac events among people with heart disease.
- Vaccinating pregnant women helps protect them from flu illness and hospitalization, and also has been shown to help protect the baby from flu infection for several months after birth, before the baby can be vaccinated.
- A 2017 study showed that flu vaccines can be life-saving in children.
- While some people who get vaccinated can still get sick, flu vaccination has been shown in several studies to reduce the severity of illness.

#### Why is it important to get a flu vaccine EVERY year?

- Flu viruses are constantly changing, so flu vaccines may be updated from one season to the next to protect against the viruses that research suggests will be common during the upcoming flu season.
- Your protection from a flu vaccine declines over time. Yearly vaccination is needed for the best protection.

#### Can I get my Covid booster at the same time as my flu vaccine?

Yes! FAMC has both Pfizer and Moderna Bivalent Booster Vaccine and they can be safely administered with the seasonal flu shot.

The CDC recommends everyone stay up to date with COVID-19 vaccination, including all primary series doses and boosters for their age group:

- People ages 6 months through 4 years should get all COVID-19 primary series doses.
- People ages 5 years and older should get all primary series doses, and the booster dose recommended for them by CDC, if eligible.
- People ages 5 years to 11 years are currently recommended to get the original (monovalent) booster.
- People ages 12 years and older are recommended to receive one updated Pfizer or Moderna (bivalent) booster.
- This includes people who have received all primary series doses and people who have previously received one or more original (monovalent) boosters.
- At this time, people aged 12 years to 17 years can only receive the updated Pfizer bivalent booster.

Contact the FAMC Clinic to schedule your vaccinations. 605-598-6262



## Community Appreciation Kelly Ortmeier, Foundation Coordinator

The Faulkton Area Medical Center Foundation celebrated meeting their 2022 fundraising goal of \$50,000 with the community on Wednesday, November 2<sup>nd</sup> at the Faulkton Lutheran Church. Heather Bode, CEO of the Faulkton Area Medical Center, welcomed our community members in attendance and thanked them for their generous support of the scholarship this year and helping us to meet our goal.

Dr. Bartholomew did a short summary of his presentation back in January explaining how vital healthcare is in rural communities. At the end of his presentation, Dr. Bartholomew and his wife Twyla presented a check to the Faulkton Area Medical Center Foundation for \$50,000; matching the funds raised from private donors.

Dr. Bartholomew introduced special guest, Dennis Batteen. Dennis stated that while he and his wife, Linda were at their home in Arizona, they saw in the Faulk County Record that Dacotah Bank had stepped forward with their \$25,000 pledge to the Foundation. They both agreed that they needed to support this as well. The Batteens lived in Faulkton for 25 years after Dennis passed the bar and served as the Faulk County States Attorney for several years. During Dennis’ time in Faulkton, he was instrumental in securing physicians for the Faulk County Hospital. Dennis shared that he was one of the founding members that secured a scholarship/loan repayment option for Dr. Bartholomew to come to Faulkton. Dennis and Linda are excited to be part of the continued support of the healthcare legacy that was started so many years ago. The Batteens then presented a check to the Faulkton Area Medical Center Foundation for \$25,000.

The Foundation will continue to promote and gather funding for this scholarship program for it to be a perpetual funding source for future recruitment and retention of medical professionals to Faulkton and the surrounding area. If you would like to donate to the scholarship fund, please contact the Faulkton Area Medical Center Foundation at (605) 598-1144 or donate online at <https://faulktonmedical.org/foundation/>.



Pictured: Bev Fischer, MaKenzie Sindelar, Blythe Smith, Kelli Rhodes, Dennis Batteen, Heather Bode, Linda Batteen, Dr. Ken Bartholomew, Kelly Ortmeier, Twyla Bartholomew, Chelsea Odden, Michelle Pudwill, Jami Huss

## Hunting For a Doc

The Faulkton Area Medical Center Foundation’s Hunt for a Doc was a great success! Our hunt winner was Beverly King, King Insurance; Beverly and some of her family were able to come to Deiter Farms and spend two days hunting. While the weather was not perfect for a hunt the group had a successful weekend. One of the highlights from the weekend was Doug Deiter showing the King grandkids how to clean birds.

As part of the hunt the King family and their guests, Doug and Roger Deiter families and the Foundation board gathered to celebrate a successful event with a prime rib supper! It was a fun evening visiting, watching Jackrabbit football and enjoying a wonderful meal.

Other winners from the Hunt for a Doc drawing were: Paul Nieber (Yeti cooler & Yeti camp chairs), CHS – Todd Oster (Maven binoculars), Steve and Slade Roseland (Maven Spotting Scope) and Deiter Farms (Yeti luggage).

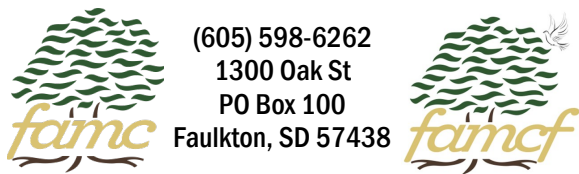


This hunt was a fundraiser for the Dr. Ken and Twyla Bartholomew Scholarship and was a great success for the Foundation! The Foundation is so thankful to everyone who purchased tickets for the drawing. We are also grateful to the Deiter Family for hosting our hunt; your hospitality was wonderful!

### In Memory/Honor Of

Jim & Virgene Wagner	Shane & Stacy Machtemes
Mary Stanley Memorial	Julie Bowar Memorial
Jerry Gilmour Memorial	Jeff & Cathy Holsing
Maxine White	Mary Stanley Memorial
Mary Stanley Memorial	Jim & Kathy Bitzer
DuWayne & Diane Hushka	Rick Hoefert Memorial
Mary Stanley Memorial	Nicholas & Kristy Bourassa
Jerry Gilmour Memorial	Julie Bowar Memorial
Julie Bowar Memorial	Mary Sandness
Bonnie Bloom Memorial	Julie Bowar Memorial
Delores Conley Memorial	Roger & Beth Deiter
Bill & Barb Schilder	Julie Bowar Memorial
Bob Roethler Memorial	Mary Stanley Memorial
Bev Hanson & Family	Theresa Bunkers
Jeanette Hogg Memorial	Evie Dutt Memorial
Julie Bowar Memorial	Esther Kapp Memorial
Steve & Deb Roseland	Steve & Susan Miller
Julie Bowar Memorial	Mary Stanley Memorial
Roger & Janet Melius	Beth Witte
Julie Bowar Memorial	Mary Stanley Memorial
Jack Schaefer Memorial	

Faulkton Area Medical Center & Foundation



PRSRT STD  
ECRWSS  
U.S.POSTAGE  
PAID  
EDDM Retail

*Rooted in the  
Community,  
Growing to Meet  
Your Needs*

LOCAL POSTAL  
CUSTOMER



We're on the Web  
[www.faulktonmedical.org](http://www.faulktonmedical.org)

Have you or a loved one been a patient in our facility?  
Would you like to give a gift in honor or memory of someone?  
Make a tax free donation or contribution to FAMCF.

OR you may go to [www.faulktonmedical.org/giving](http://www.faulktonmedical.org/giving) and donate online!

In support of Faulkton Area Medical Center Foundation, I/we would like to make a donation:

I choose to make a gift of \$ \_\_\_\_\_ to FAMCF/ Dr. Bartholomew Scholarship

**MAKE CHECKS PAYABLE TO:**  
FAMC Foundation, PO Box 100, Faulkton, SD 57438

**- OR -**

Please bill my: VISA   MasterCard   Discover   Am Ex

Card # \_\_\_\_\_ Exp Date \_\_\_\_\_

CVV Code \_\_\_\_\_ Name \_\_\_\_\_

Signature \_\_\_\_\_

Billing Address \_\_\_\_\_ Phone \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

*Thank you for your support!*