2011 COMMUNITY BENEFIT REPORT

Surviving a Trauma: One Man's Stor

The morning of Oct. 28, 2010, was unfolding like any typical one for Don Griest of Minneapolis. Halfway through his routine drive to work at Cameron International's turbocharger repair shop in Salina, he had checked in with his wife, Roberta, as he often did when they drove to town separately. He'd promised to let her know when he had completed the trip safely. But Don never got the chance to make that call.

Just after crossing the I-70 interchange while driving south on I-135, Don's truck veered to the right, going through a ditch and hitting a fence and a post before crashing to a stop against a tree. Authorities estimated his speed between 60 and 70 miles per hour, but Don remembers nothing about the accident. Doctors would later guess that he had suffered a seizure—a relapse from a disorder that had been controlled for nearly 20 years.

"I don't remember anything about the accident, or going to the hospital or the only helicopter flight I've ever been on," Don says. "I don't have any memories until I woke up in a hospital bed weeks later."

Salina EMS responded to the call and found Don kneeling outside his truck. EMS personnel quickly recognized he had suffered a head injury with possible other internal injuries and sent out a trauma call to emergency workers at Salina Regional Health Center.

A NEW LEVEL OF TRAUMA CARE

Only months earlier, Salina Regional had implemented a new level of response for traumatically injured patients. A specially designated team of professionals with highly defined roles is on call around the clock to report to the emergency department whenever a trauma call is received.

When the call about Don came in, a cascade of alerts went out to notify the team of his pending arrival. Members include a trauma surgeon, emergency department physician, trauma control 2 nurse, intensive care nurse, surgical nurse and

staff from radiology, the laboratory, the blood bank, respiratory care, security and chaplaincy.

Chest X-rays quickly revealed both of Don's lungs were collapsed. He was sedated and intubated, and chest tubes were placed to gain control of his breathing. CT scans of the head, abdomen and pelvis also showed other critical injuries-a bleed in his brain and a torn aorta.

Doctors gave Don blood and used medicine to stabilize his blood pressure so that he could be safely flown by helicopter to a Level I trauma center in Wichita.

A STATEWIDE INITIATIVE

Salina Regional has implemented specialized trauma care in an effort to earn a Level III trauma verification from the American College of Surgeons and to join a statewide effort to have at least a Level III trauma center in each geographical region of the state.

While Level I trauma centers are available in Kansas City and Wichita and Level II trauma centers in other largely populated communities, there is only one American College of Surgeonsverified trauma center west of the line from Topeka to Wichita.

The main difference between levels of trauma care is the type of services available. Level I and II trauma centers offer a complete line of services, including 24/7 neurosurgery. While Salina Regional does offer neurosurgery, it's not available 24 hours a day, seven days a week.

Don Griest, Minneapolis, survived major injuries after he lost control of his truck on the way to work in October. While he doesn't remember anything about the accident, his wife, Roberta, saw firsthand how fortunate he was to be alive.

"Our efforts are to become part of a statewide trauma system, to improve access to trauma care in north central Kansas and to save more lives," says Jake Breeding, M.D., director of Salina Regional's trauma service. "Patients needing a higher level of care will still be stabilized and transferred."

A MIRACLE RECOVERY

Once Don's brain bleed stabilized, doctors in Wichita used a stent to repair his torn aorta. He spent nearly a month there in recovery and rehab to gain independence from a ventilator. Then he was transferred back to the inpatient rehabilitation unit at his hometown hospital in Minneapolis. There he spent a couple of more weeks gaining his strength and stamina and finally returned home Dec. 9. He continued outpatient physical therapy in Minneapolis, and through his determination and the support of his wife, family, friends and co-workers, he has made a nearly complete recovery.

"I had a lot of people praying for me," Don says. "You don't realize how much the support of others gets you through things like this mentally."

He still has numbness in two fingers on his left hand, some control deficit with his left wrist and slight balance issues from time to time, but those things may still heal.

Don's determination (stubbornness as Roberta may call it) showed through when he made his first outing after returning home. With Christmas just around the corner, Don used a



Minneapolis bus service to go to a Salina jewelry store to buy his wife a necklace.

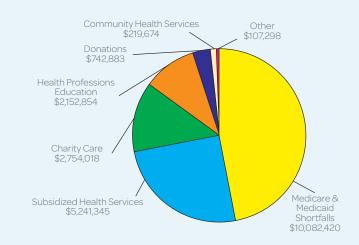
"I don't think that was doctor approved," Roberta says. "He was supposed to be home taking it easy. But that's just the kind of caring guy he is."

Don went back to work in February enjoying his job as a turbocharger inspector. Since that time, he and his wife have stopped to walk through the scene of his accident—a spot they pass every day on their way to work. He's also seen pictures of his truck after the incident.

"It's hard to believe anyone could ever live through it," Don humbly admits. "There's a lot of people I need to thank, from EMS to the doctors and staff in Salina and Wichita to the rehab folks here at home.

"Having teams ready and standing by to take care of cases like this is incredible. I'm sure it's going to save lives—even more than in the past."

2010 Unreimbursed Community Benefit: \$21,300,492



PROVIDING NOT-FOR-PROFIT CARE

As a 501(c)(3) not-forprofit organization, Salina Regional Health Center is held in trust to benefit the community. Salina Regional has an obligation to provide vital services to the north central Kansas region. Our focus is on increasing access to quality healthcare services and adding value to the area.

CHIP SUPPORTS INITIATIVES TO IMPROVE YOUTH DEVELOPMENT

Each year Salina Regional Health Center tithes a portion of its operating margin to the Salina Regional Health Foundation's Community Health Investment Program (CHIP). The Foundation in turn offers grants to a wide range of initiatives that benefit youth development.

In 2010 Salina Regional tithed 10 percent of its operating margin to CHIP, which awarded 14 grants totaling \$734,709.

One grant gave \$100,000 to the Greater Salina

Community Foundation, which acts as fiscal agent for four community foundations in the region that are participating in the Kansas Health Foundation Grow II initiative. Grow II offers a 50 percent match to endow gifts to public health. As participants in the program, Smith, Cloud, Republic and Dickinson counties each received \$25,000 from CHIP and then an additional \$12,500 from Grow II to establish public health endowments for their respective communities.

An \$18,784 grant to the Saline County Sheriff's Department allowed it to purchase a driving cart that simulates the effects of



alcohol or drugs on a motorist's driving skills. Officers use the cart for demonstrations at area schools, fairs and youth activities

to teach the dangers of driving while impaired.

Another grant gave \$10,000 to the Bennington Link Club for a climbing apparatus at a new playground constructed at the Bennington Grade School/Bennington Junior High School. The school had gone three years without a playground after new construction required the previous one to be removed.



A CHIP grant allowed Saline County Sheriff's officers to purchase a simulator to teach the risk of driving under the influence of drugs or alcohol, and helped complete construction of a new playground in Bennington.