



**Billings Clinic**

**Cardiovascular  
Services**

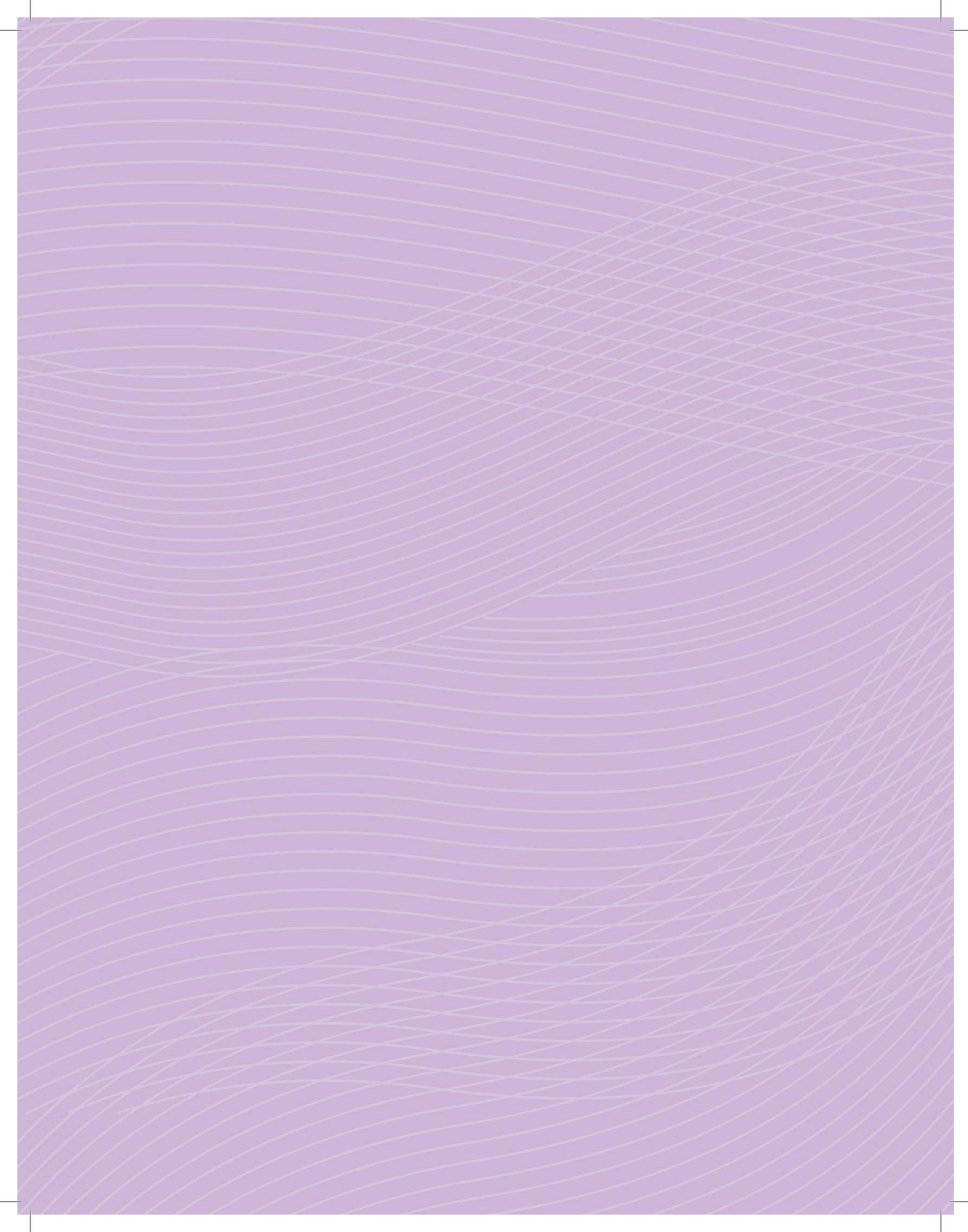
# My Heart and I

*A journey to a healthier ME*



[billingsclinic.com/heart](http://billingsclinic.com/heart)





# Cardiovascular Services



**Barbara Dudczak, MD, FACC, ABOM**

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## Cardiology



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Follow -Up  
Appointments

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**John Burg Cardiac Center  
801 North 29th Street  
4th Floor  
406.238.2000**

## Electrophysiology



**Loren Budge, MD, FACC**

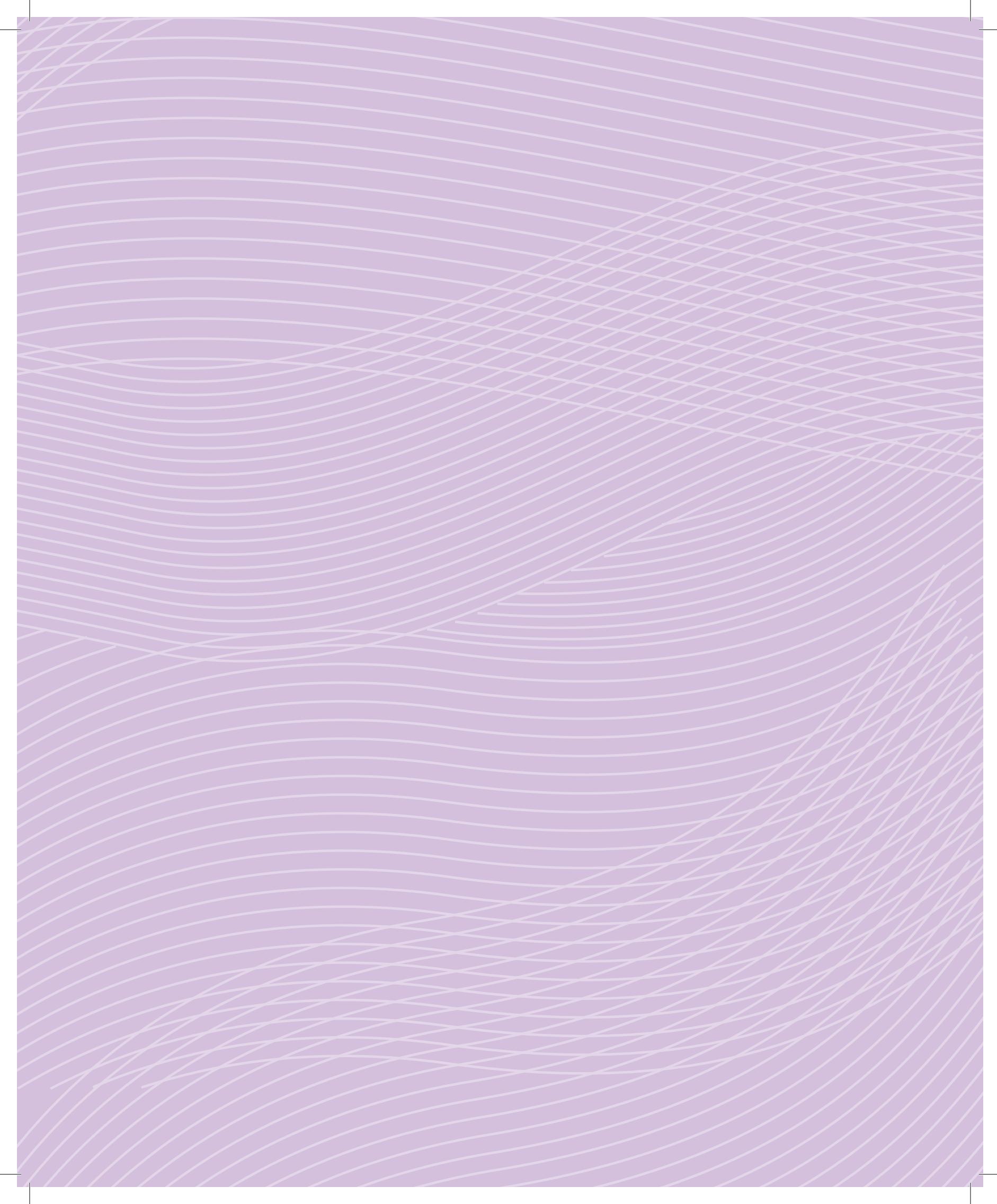
**Zachary Appel, PA**



**John Verbsky, MD, PhD**

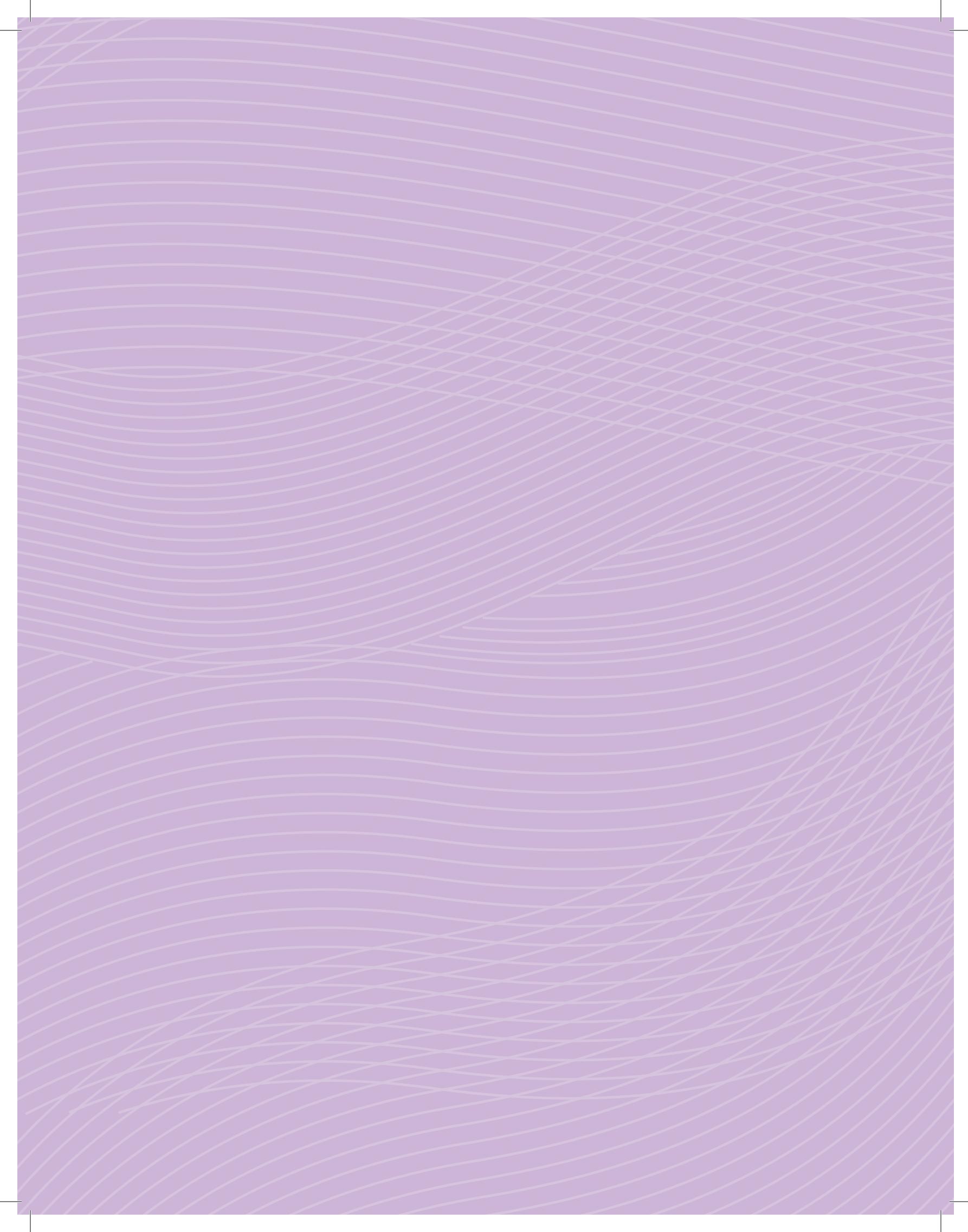
**Amber Zito, PA**





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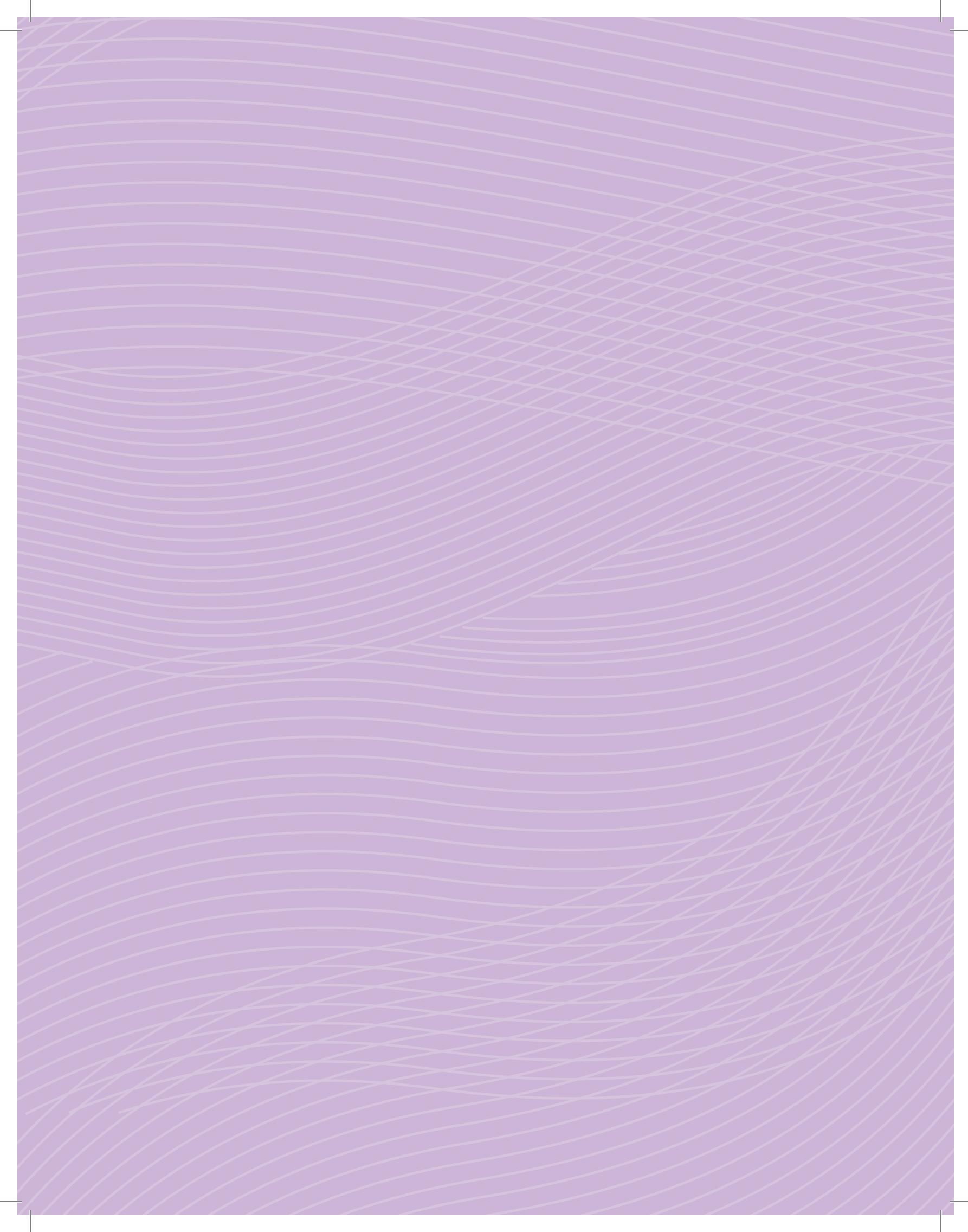
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1

# What is a heart attack?





# What is a heart attack? 1

## Did you have a heart attack?

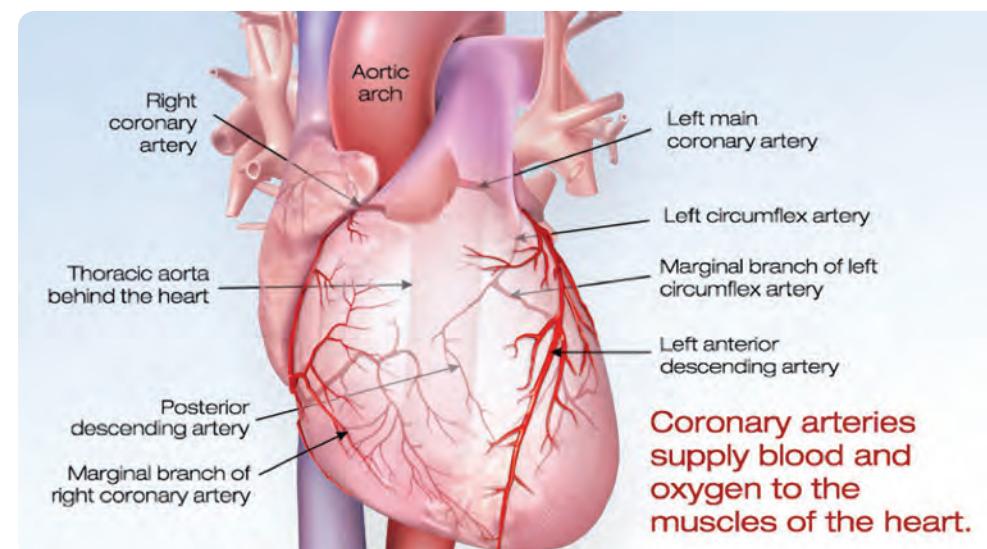
Yes       No

## What are some other names used for “heart attack?”

- NSTEMI (non-STEMI)
- STEMI
- MI (myocardial infarction)
- AMI (acute myocardial infarction)

## What is a heart attack?

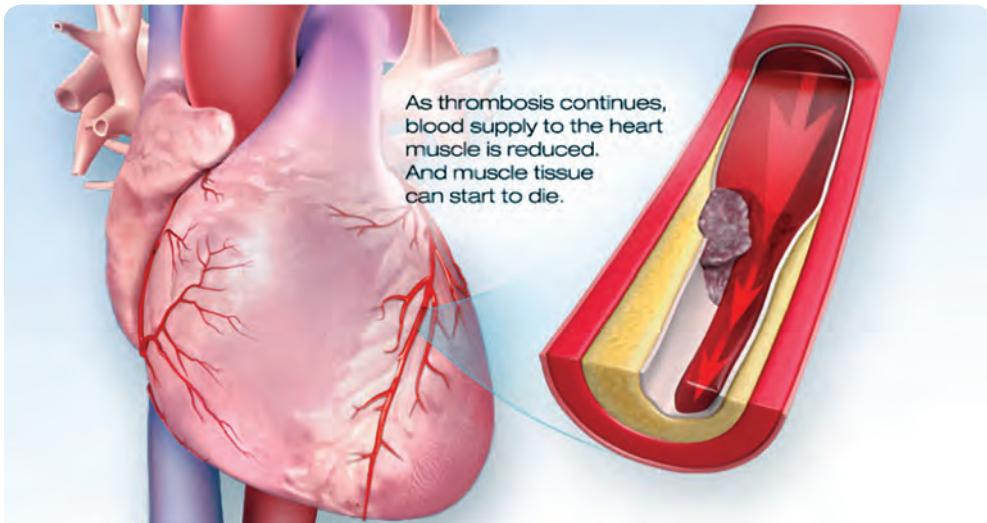
A heart attack occurs when the blood flow to your heart becomes reduced due to a blockage in your vessels in your heart.



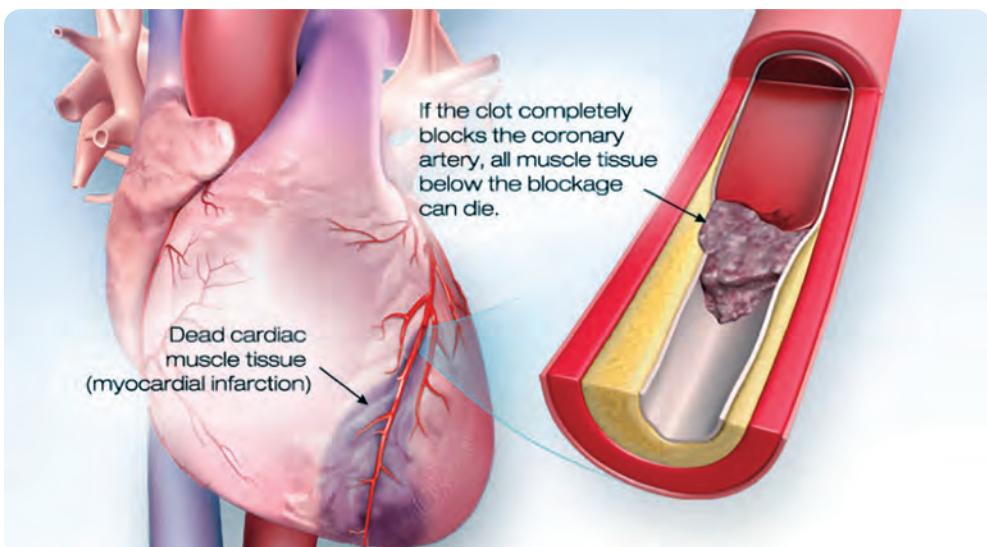
*About every 43 seconds, someone in the US has a heart attack.*

## 1 What is a heart attack?

This blockage can be due to a build up of fat, cholesterol and other substances, which forms a plaque on the inside lining of your vessels. This plaque can rupture causing a clot to form that can either partially or totally block your vessel.

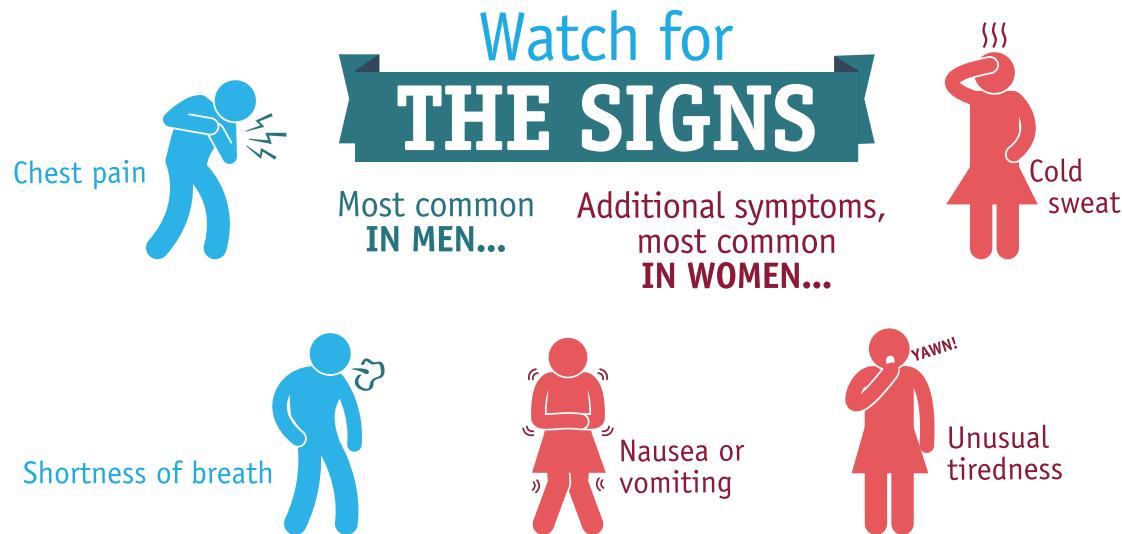


This blockage can cause a lack of blood to reach your heart muscles depriving your muscles of oxygen. This can cause "ischemia" or muscle damage or death. Another name for ischemia is heart attack or myocardial infarction (MI).



***85% of heart damage occurs within the first two hours of a heart attack. The average person in Montana waits at least 4 hours to seek medical attention when they have a heart attack!***

## What is a heart attack? 1

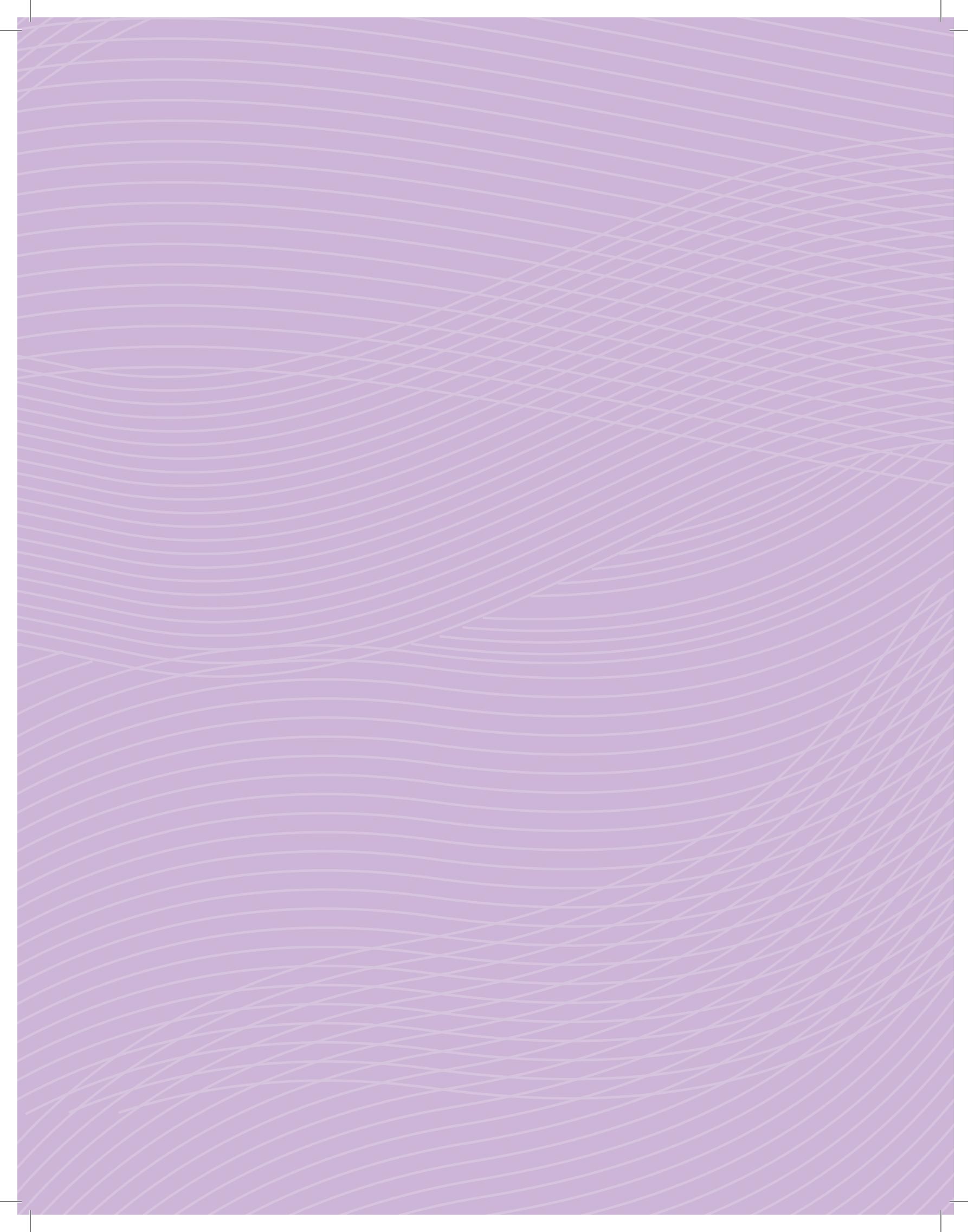


## Think you're having one?



911

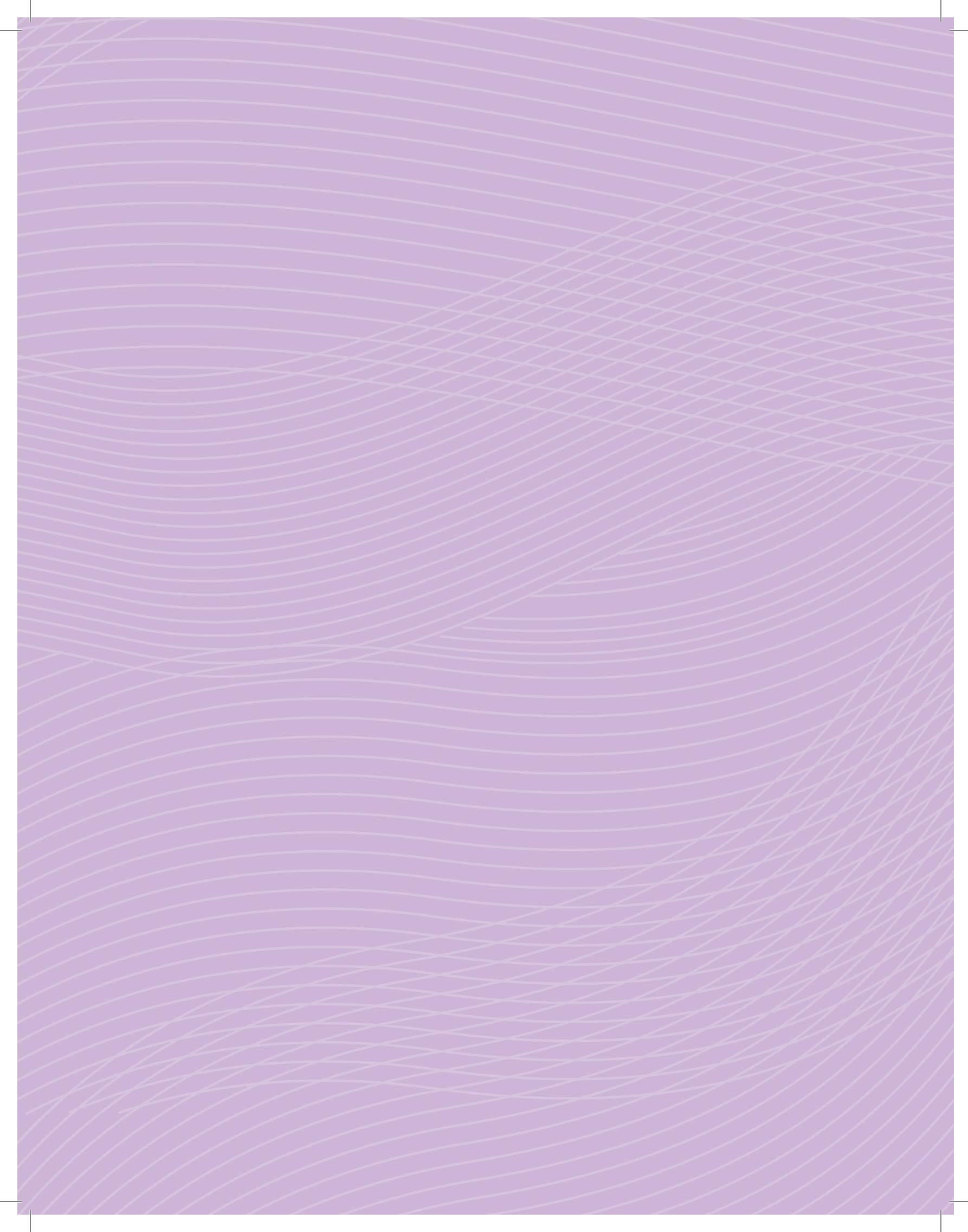




2

## What happened during my hospitalization?





# What happened during my hospitalization? 2

## Heart catheterization: elective vs emergent

You may have had mild heart symptoms or chest pain, so your doctor may have done some testing that helps him/her to determine what is causing your discomfort. Your provider may choose to do a stress test, a stress echo, or perhaps a cardiac angiogram or heart catheterization.

- OR -

## You may have had symptoms of a heart attack:

- Heaviness in the chest or chest pressure
- Dizziness or light-headedness
- Shortness of breath
- Nausea or sweating
- Discomfort or pain in arms, neck, jaw, shoulder or upper back
- Burning feeling under breastbone/felt like indigestion

AND so you called 911, enjoyed a fast ambulance, helicopter or airplane ride to Billings Clinic or perhaps went directly to your local emergency room (ED). That is when you started your whirlwind journey to a healthier YOU.

In the ED, they would have immediately done a test called an electrocardiogram (EKG) to determine what your heart rhythm was doing.

The EKG is how they determined if you had a heart attack or not. You may have heard the terms "Acute Coronary Syndrome (ACS)," "Non-STEMI (NSTEMI)," "STEMI." Each diagnosis would determine your course of treatment and which medications you would receive.



19-AUG-1939 (72 yr)  
Male Caucasian  
Weight: 180  
Room: ED  
Loc: 17

Vent. rate	68	BPM
PR interval	150	ms
QRS duration	ms	ms
QT/QTc	392/417	ms
P-R-T axes	53 64	77

Normal sinus rhythm with marked sinus arrhythmia.  
ST elevation consider anterolateral injury or acute infarct  
ST depression consider inferior injury or acute infarct  
==== ACUTE MI =====  
Abnormal ECG

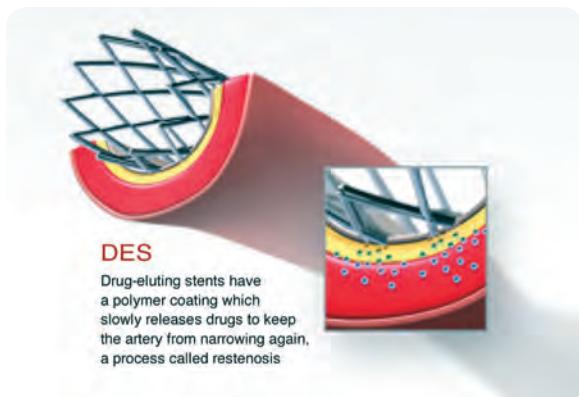
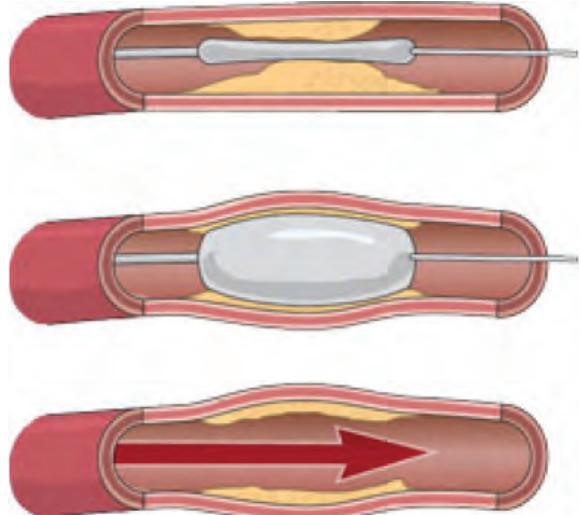


This ECG shows that the patient is having a heart attack.

## ② What happened during my hospitalization?

### Angiogram or heart catheterization

An angiogram is a procedure where a catheter is inserted through an artery and passed into the heart. Contrast dye is injected so the blockages can be visualized. For angioplasty, a balloon is deployed to the site of the plaque, the balloon is inflated, and it smashes the plaque against the vessel walls, thus opening the vessel so oxygen-rich blood can flow through the vessel.



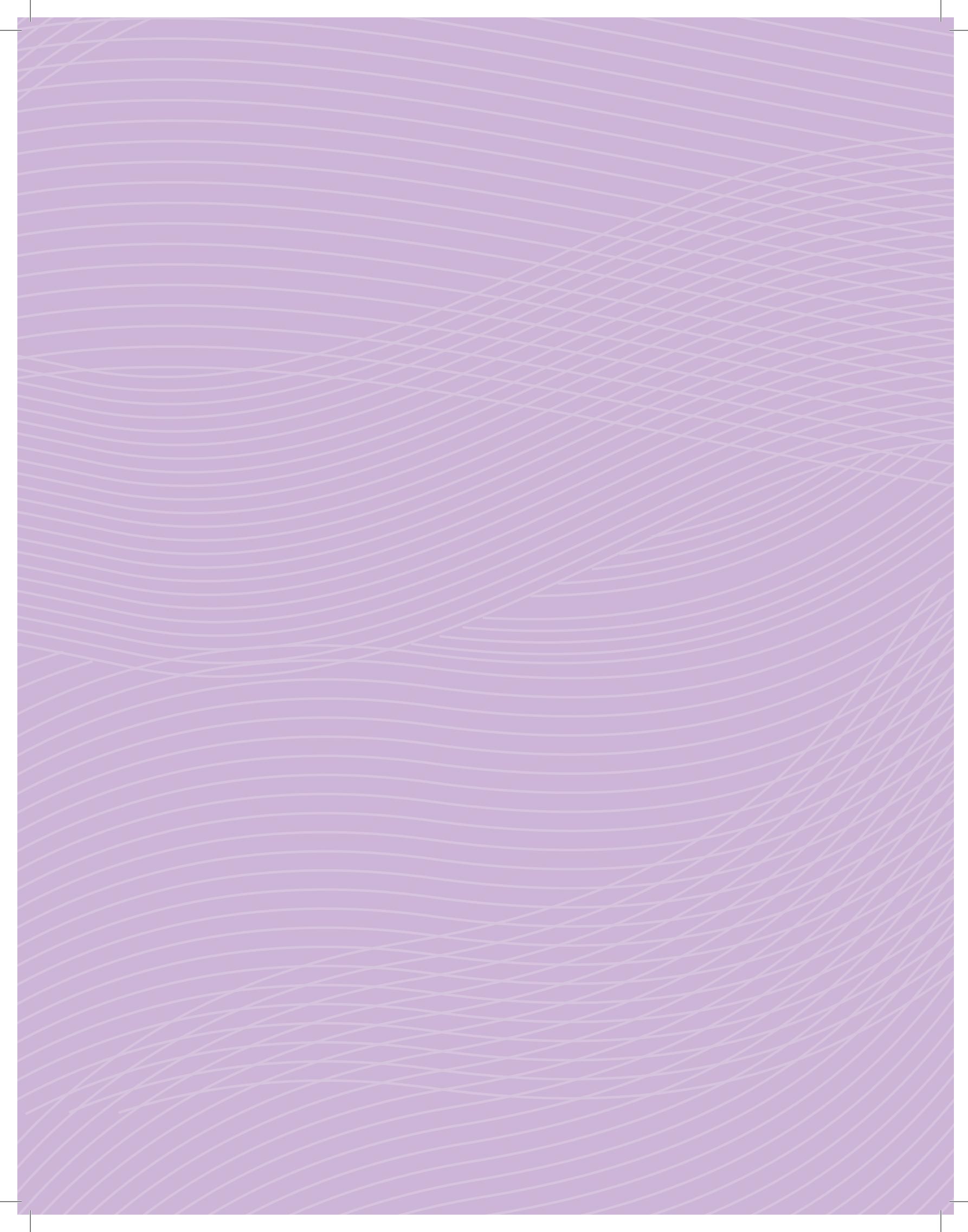
In addition to angioplasty, the physician can choose to deploy a stent at the site of the plaque. There are two different types of stents – bare metal or drug-eluting stents. The stent can be deployed which keeps the vessel open in that particular area. Your doctor will choose the correct stent for you.

You will need to be on aspirin for life and an anti-platelet medication for at least one year to prevent clotting in your new stent or in your vessels which could cause a heart attack.



# 3 Medications





## Why do I have to take all these pills?

### 1. Aspirin

Aspirin is used to help "thin" your blood after you have a stent placed. It prevents something in your blood called "platelets" from sticking together to form clots. You will need to take aspirin for the rest of your life.



The most common side effect is related to increased bruising or bleeding.

### 2. Anti-platelet agents

There are three common agents used in this class of medications. You will need to take this medication for **at least 1 year** to prevent platelets from sticking together to form a clot in your new stent or to cause another heart attack. Taking this medication every day is **VERY IMPORTANT!** The most common side effects are related to bruising or bleeding or shortness of breath. Your doctor will choose the medication that is right for you.

- Clopidogrel (Plavix®)
- Prasugrel (Effient®)
- Ticagrelor (Brilinta®)

Clopidogrel (Plavix®) and Prasugrel (Effient®) are taken once daily. It is best to try to take at the same time every day. You will also take an aspirin every day with this medication.

Ticagrelor (Brilinta®) is taken twice daily. It is best to try to take at the same time every day (morning and bedtime). **NEVER** take more than 81mg of aspirin with this medication.



### 3. Beta blockers

There are many different beta blockers available. Below are some names (generic names and brand names) of which you may be started on:

- Metoprolol (Lopressor® or Toprol®)
- Atenolol (Tenormin®)
- Carvedilol (Coreg®)

These medications have been shown to reduce short term complications and improve long term survival. They also help keep your heart beating in a nice, normal rhythm if you happen to have a fast heartbeat or "Atrial Fibrillation." Side effects include tiredness, dizziness, and slow heart rate.

## ③ Medications

### 4. Angiotensin Converting Enzyme (ACE) Inhibitors/ Angiotensin Receptor Blocker (ARB)

You may also be started on an ACE Inhibitor (or ARB if you are unable to tolerate an ACE inhibitor). Some commonly prescribed ACE inhibitors/ARBs include:

#### ACE Inhibitors

- Captopril (Capoten®)
- Lisinopril (Prinivil®)
- Ramipril (Altace®)
- Benazepril (Lotensin®)
- Enalapril (Vasotec®)

#### ARBs

- Irbesartan (Avapro®)
- Olmesartan (Benicar®)
- Valsartan (Diovan®)
- Losartan (Cozaar®)
- Candesartan (Atacand®)

These medications relax blood vessels, allowing blood to flow easier and decrease the resistance the heart has to pump against. This decreases how hard the heart has to work. They have also been shown to improve long term survival rates after a heart attack. They may also help reduce your blood pressure. Side effects include dizziness upon standing, cough, and low blood pressure.

### 5. Statins

There are many Statins available now. Your doctor will choose the appropriate medication for you. Some commonly prescribed Statins include:

- Atorvastatin (Lipitor®)
- Simvastatin (Zocor®)
- Rosuvastatin (Crestor®)

These medications can do a variety of things. They reduce inflammation and stabilize vessels in your heart that have been injured from your heart attack. They may reduce your cholesterol, decrease your LDLs (the “bad guys”) and increase your HDLs (the “good guys”). Your doctor may have to adjust your dose and check your blood periodically to make sure your liver is not being affected. Be sure to report any severe muscle achiness to your doctor. You also need to avoid grapefruit juice while taking these medications. Some of these medications need to be taken at night. Be sure to discuss this with your pharmacist.

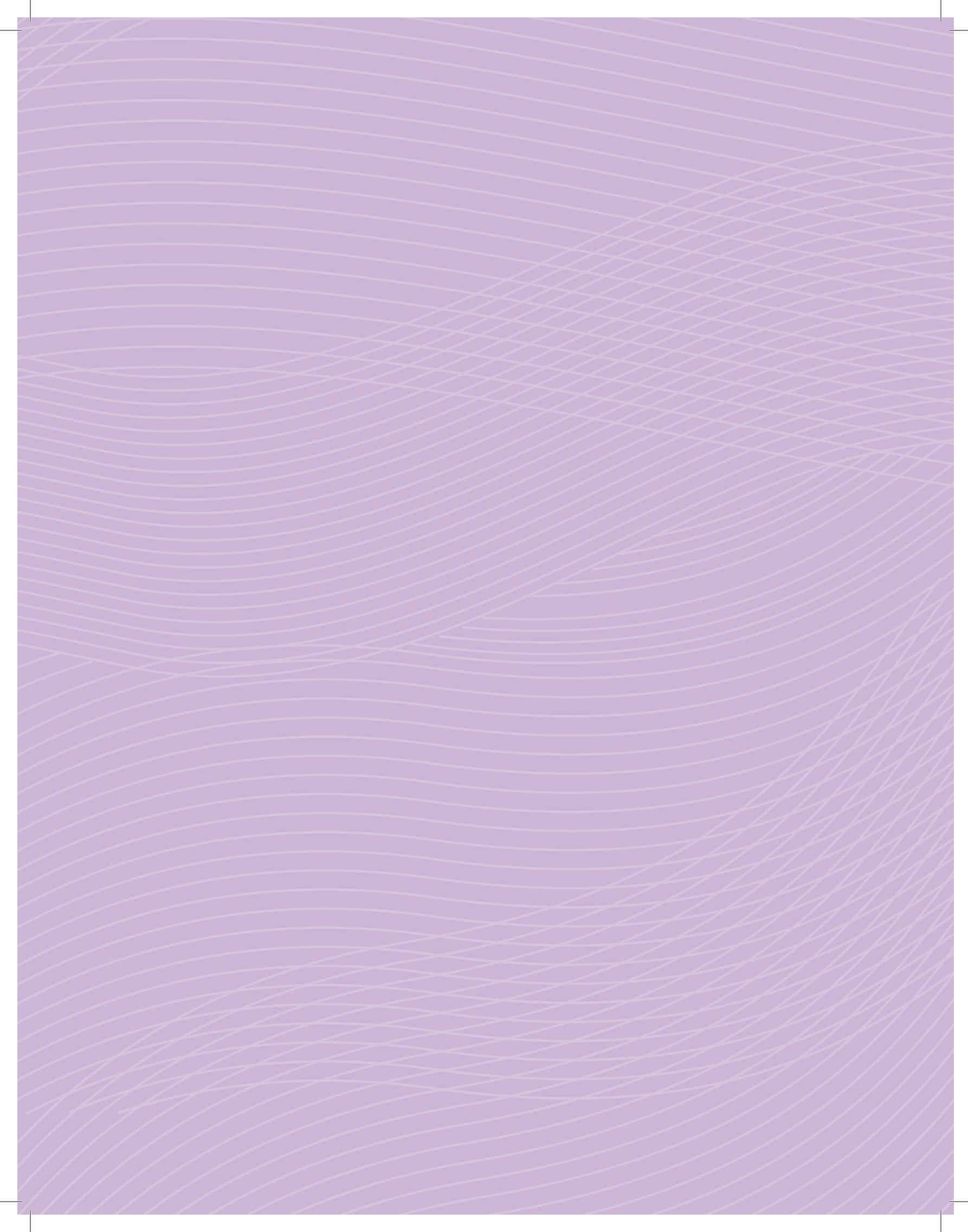
*Most importantly,  
take your medications  
as prescribed by your  
doctor and be sure to  
ask questions if you  
don't understand how  
to take them!*



4

## The first two weeks... What do I need to know?





# The first two weeks... 4 What do I need to know?

## Site care

Your catheterization could be performed through a radial/wrist puncture site or a femoral/groin puncture site.

- You may shower the day after the procedure, however no soaking the site
- Do not flex or bend the wrist for 24 hours
- No heavy lifting, pushing, or pulling greater than 10 pounds for 1 week
- You may not drive or operate heavy machinery for 24 hours following the procedure
- You may notice bruising at the site, but it should be painless
- Seek medical attention if you experience any of the following:
  - Redness, warmth, swelling, or pain at the puncture site
  - Drainage
  - Fever or chills persistent for greater than 72 hours
  - Your limb becomes painful, cool to touch, or pale
  - If you start bleeding at the site, apply pressure

## Activity restrictions

- No strenuous exercise for 2 weeks following a heart attack



## 4 The first two weeks... What do I need to know?

### Intimacy

- You can usually return to your normal sexual activity after you have seen your doctor 1-2 weeks after discharge, and if you do not have chest pain, shortness of breath, or heart rhythm problems. Talk to your health care provider.

### Here are some tips to help you return to sexual activity:

- Use a position of comfort and one that does not restrict your breathing
- Stop and rest if you have chest pain or symptoms of angina. If you have been prescribed a medicine such as nitroglycerin for chest pain, take the medicine. If your pain does not stop in a few minutes, see emergency care.
- **DO NOT** take **nitroglycerin** within 24 hours of taking medications such as **Viagra**, **Levitra**, or **Cialis**. This combination can cause your blood pressure to fall and make you faint! If your angina does not go away with rest, you feel dizzy, or like you might faint, call 911.

### Alcohol

- Moderation is recommended

### Work restrictions

- Check with your health care provider. Usually they recommend taking a week off work following a heart attack.

### Smoking

If you smoke or use nicotine, you are strongly encouraged to stop to improve your health. If you need help quitting, talk with your health care provider or call Billings Clinic Healthline at 255-8400 or 1-800-252-1246.

MONTANA TOBACCO



### Diet

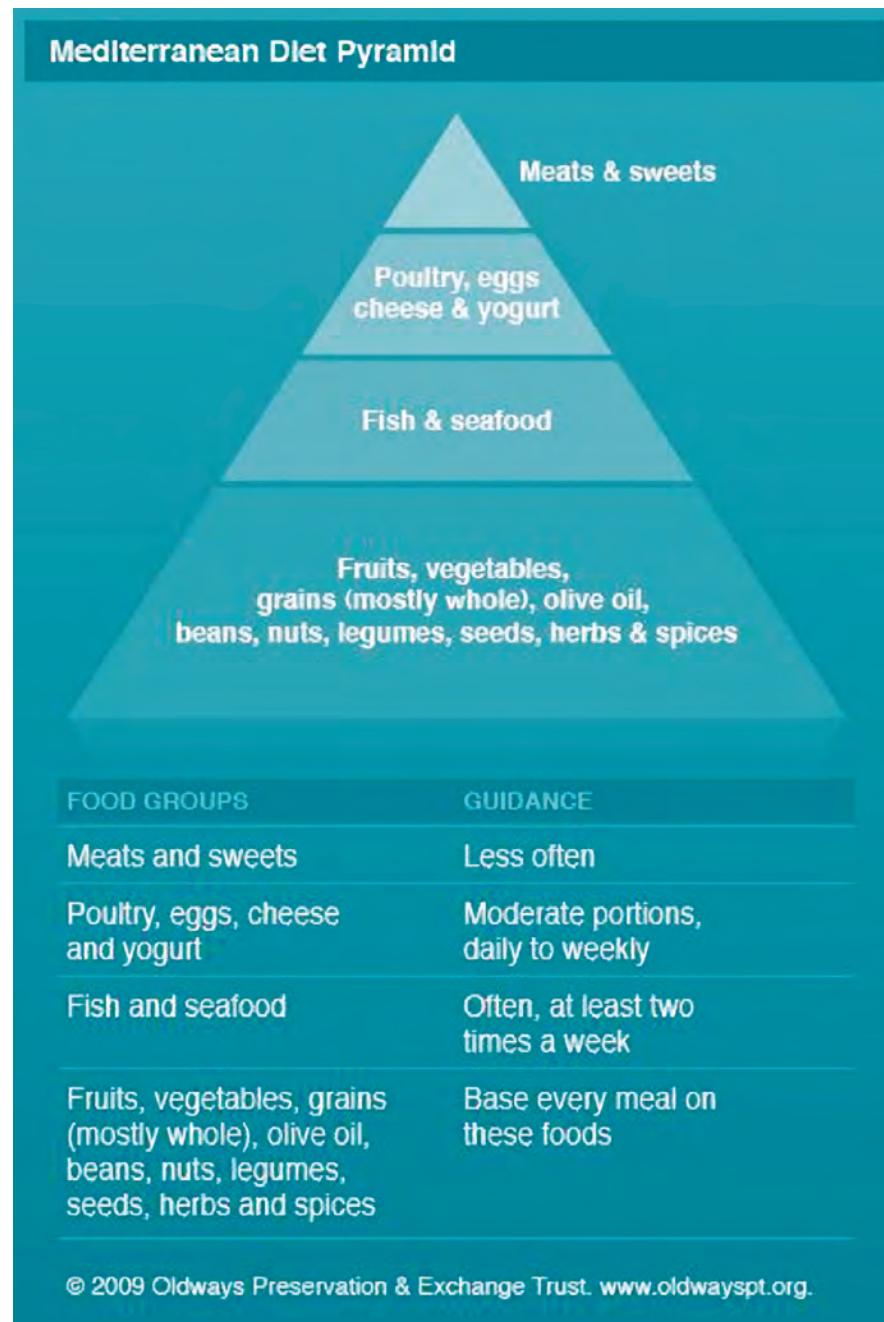
- The ACC recommends following a Mediterranean diet

### Benefits of the Mediterranean diet

Research has shown that the traditional Mediterranean diet reduces the risk of heart disease. In fact, an analysis of more than 1.5 million healthy adults demonstrated that following a Mediterranean diet was associated with a reduced risk of death from heart disease and cancer, as well as a reduced incidence of Parkinson's and Alzheimer's diseases.

The Dietary Guidelines for Americans recommends the Mediterranean diet as an eating plan that can help promote health and prevent disease. And the Mediterranean diet is one your whole family can follow for good health.

## The first two weeks... What do I need to know? 4



### Key components of the Mediterranean diet

The Mediterranean diet emphasizes:

- Eating primarily plant-based foods, such as fruits and vegetables, whole grains, legumes and nuts
- Replacing butter with healthy fats, such as olive oil
- Using herbs and spices instead of salt to flavor foods
- Limiting red meat to no more than a few times a month
- Eating fish and poultry at least twice a week
- Drinking red wine in moderation (optional)

The diet also recognizes the importance of being physically active, and enjoying meals with family and friends.

## 4 The first two weeks... What do I need to know?

### Focus on fruits, vegetables, nuts, and grains

The Mediterranean diet traditionally includes fruits, vegetables and grains.

For example, residents of Greece average six or more servings a day of antioxidant-rich fruits and vegetables.

Grains in the Mediterranean region are typically whole grain and usually contain very few unhealthy trans fats, and bread is an important part of the diet. However, throughout the Mediterranean region, bread is eaten plain or dipped in olive oil – not eaten with butter or margarine, which contains saturated or trans fats.

Nuts are another part of a healthy Mediterranean diet. Nuts are high in fat, but most of the fat is healthy. Because nuts are high in calories, they should not be eaten in large amounts – generally no more than a handful a day. For the best nutrition, avoid candied or honey-roasted and heavily salted nuts.

#### The AHA offers these healthy tips for diet

- Use up at least as many calories as you take in
- Eat a variety of nutritious foods from all the food groups
- An overall healthy diet includes a variety of fruits and veggies, whole grains, low-fat dairy, poultry and fish, and nuts and legumes



## The first two weeks... What do I need to know? 4

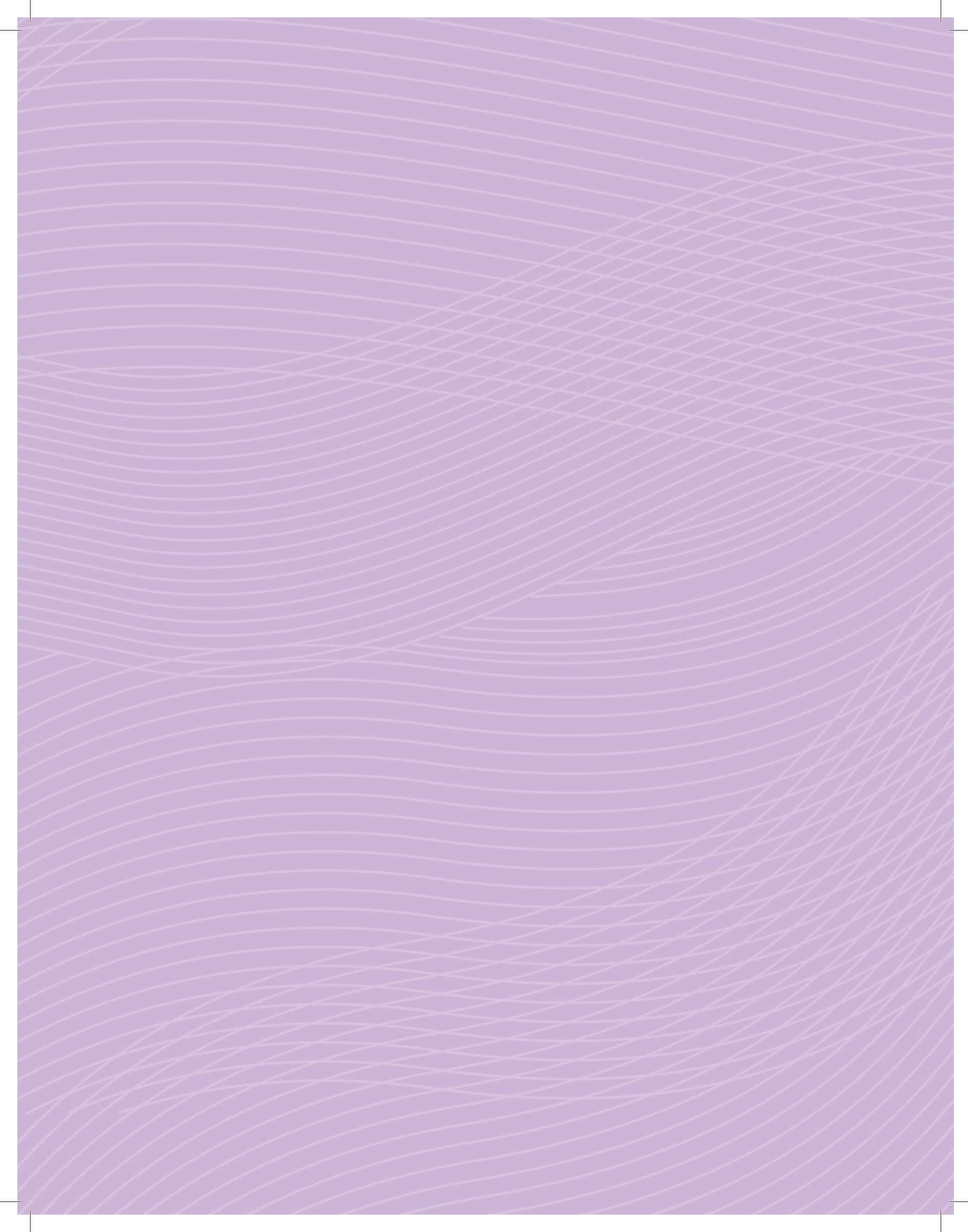
### Encouraging healthy lifestyles for cardiovascular health

#### Hunters: How does your game measure up to traditional beef?

	Protein (gm/3 ounces)	Fat (mg/3 ounces)	Cholesterol (mg/3 ounces)	Energy (calories/3 ounces)
Beef (choice)	22.0	6.5	72	180
Beef (standard)	22.7	2.0	69	152
Pork	22.3	4.9	71	165
Lamb	20.8	5.7	66	167
Buffalo	21.7	1.9	62	138
Whitetail Deer	23.6	1.4	116	149
Mule Deer	23.7	1.3	107	145
Elk	22.8	0.9	67	137
Moose	22.1	0.5	71	130
Antelope	22.5	0.9	112	144
Squirrel	21.4	3.2	83	149
Cottontail	21.8	2.4	77	144
Jackrabbit	21.9	2.4	131	153
Chicken	23.6	0.7	62	135
Turkey	23.5	1.5	60	146
Wild Turkey	25.7	1.1	55	163
Pheasant	23.9	0.8	71	144
Wild Pheasant	25.7	0.6	52	148
Grey Partridge	25.6	0.7	85	151
Sharptail Grouse	23.7	1.2	101	140
Dove	22.9	1.8	94	145
Sandhill Crane	21.7	2.4	123	153
Snow Goose	22.7	3.6	142	121
Mallard	23.1	2.0	140	152
Widgeon	22.6	2.1	131	153

Source: M.J. Marchalle, North Dakota State University Dept. of Animal Science,  
Morris G. Mast, Food Science Corner 12 (3), 4, 1988,  
(Results of research conducted at North Dakota State University)

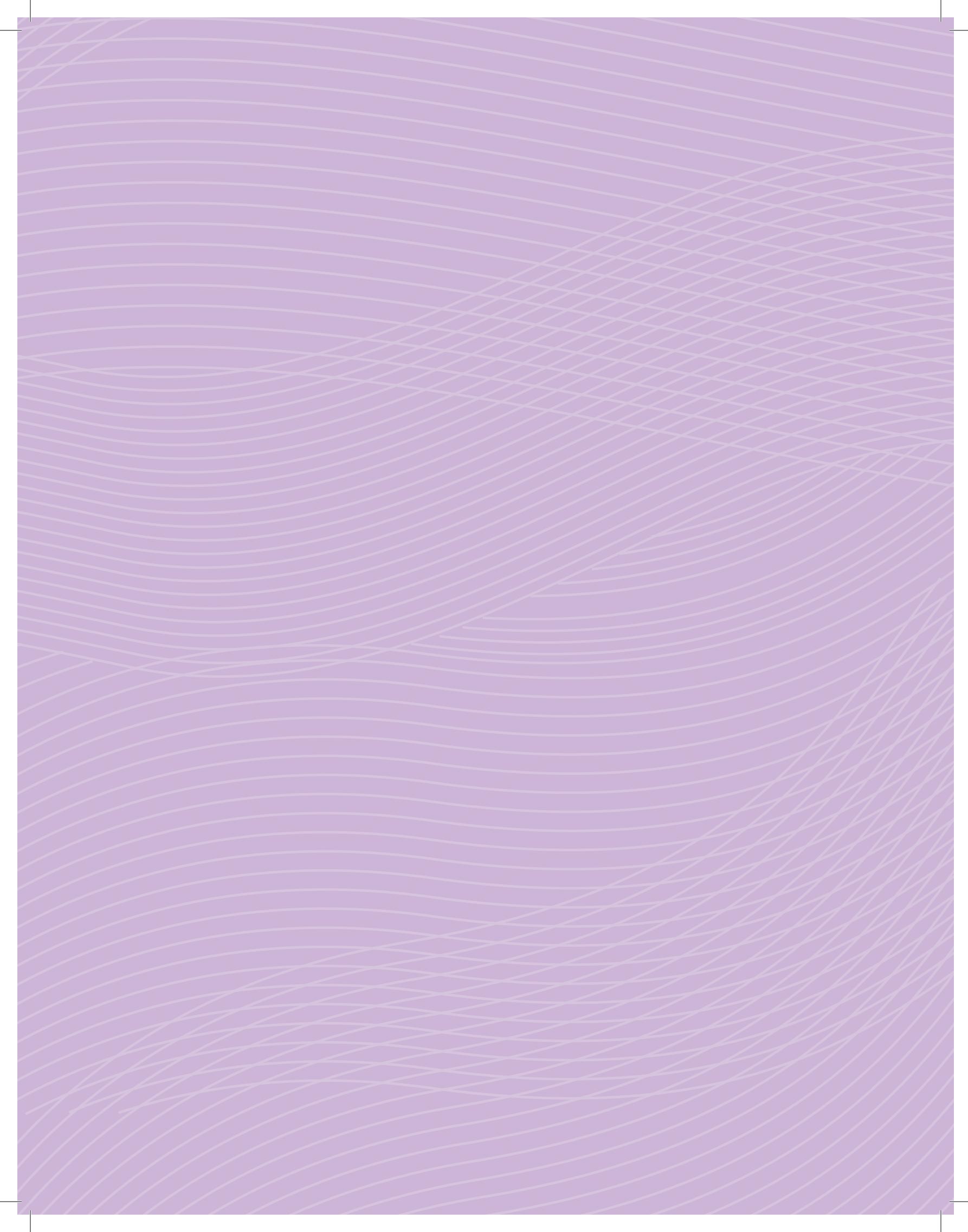
Billings Clinic - reviewed 9/2009 Kristine Kilen, RD, CDE



5

## What's next?





## Cardiovascular rehabilitation

### Your next step in a successful recovery!

If you recently survived a heart attack, had heart surgery (bypass or valve), have recently undergone placement of a stent or angioplasty, or have been diagnosed with heart failure, **it's essential to enroll in Outpatient Cardiovascular Rehab.**

Your physician has strongly recommended an appointment soon after your procedure.

#### Why is Cardiac Rehab important?

- Rehab can stabilize, slow or even reverse the progression of heart disease
- Improves strength and endurance
- Speeds up the recovery process
- Enables quicker return to work and recreational activities
- Reduces cardiovascular risk factors such as: lowers cholesterol, promotes weight loss, decreases blood pressure, improves blood sugar control, supports smoking cessation, reduces stress, and helps manage depression
- Promotes wellness through lifestyle changes that are essential for prevention of future heart-related events



#### What is Cardiac Rehab & what can I expect?

- Customized exercise program designed specifically for you to strengthen your heart
- The program is supervised by a team of nurses, exercise physiologists, respiratory therapists, and physicians
- Heart health education provided by a team of nurses, exercise physiologists, dietitians, and counselors
- Any health concerns will be reported to your physician
- Meets 2-4 days per week. Both the exercise and education classes last approximately an hour



#### What is the cost?

- Insurance coverage varies and will need to be addressed on an individual basis
- Common diagnoses that insurance (and Medicare) typically cover include: heart attack, open-heart surgery, angioplasty and/or stenting, stable angina, and heart failure

#### How to get started?

Please call (406) 247-6431 to schedule your cardiac rehab appointment.

## 5 What's next?

### Stress reduction tips

Stress can elevate your blood pressure and heart rate which can increase your risks of a heart attack.

#### Here are some tips to help reduce stress:

- Get at least 6-8 hours sleep every day
- Enjoy simple things every day
- Take a walk
- Read a good book or watch your favorite movie
- Visit with friends
- Exercise every day
- Learn to do some deep Belly Breathing:
  - Think that your belly is a big balloon and you are slowly filling it with air
  - Place your hands on your belly while you slowly breathe in and out
  - Focus on your belly while you continue to breathe slowly and deeply
  - Relaxation is the calm and peaceful feeling you get from Belly Breathing
  - Think about positive things when you do Belly Breathing
- Take a few minutes to relax each day
- Think about the good things in your life:
  - Think about someone you love
  - Think about a place you love to visit
  - Think about a nice thing that someone did for you
- **Laugh more!**

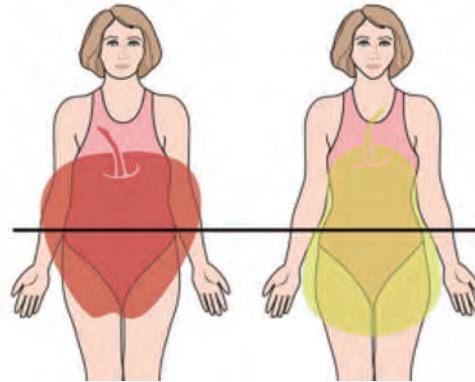


## Risk factors that you can control

### Obesity

Obesity can be a big risk factor for a heart attack, especially if you carry your weight around your waist. This is referred to as being "Apple-shaped" or "Pear-shaped." It refers to where you carry the majority of your weight. Having abdominal obesity or being an "Apple" can increase your risk of diabetes and heart disease.

To find out if you have abdominal obesity, measure your waist straight around your middle and just above your belly button.



**You have abdominal obesity if your waist is**

- 35 inches or more for women
- 40 inches or more for men

### BMI

You should try to get your BMI less than 25. (BMI = Body Mass Index)

Normal BMI is 18.5-24.9

Overweight is 25-29.9

Obese Class I is 30-34.9

Obese Class II is 35-39.9

Obese Class III is  $\geq 40$

To calculate your BMI = weight (lbs)  $\times 703 / \text{height (in)} \times \text{height (in)}$

For example: if you are 57 inches tall and 170 pounds, your BMI is:

$170 \text{ lbs} \times 703 / 57 \text{ in} \times 57 \text{ in} = 36.7$

which means you are classified as OBESE Class II.

Time to start thinking about exercising and losing weight, as risks of heart disease and diabetes are elevated.



## 5 What's next?

### Risk factors that you can control

#### Diabetes

Elevated blood sugars can lead to a build up of cholesterol in your arteries as well as cause damage to many of your vital organs like your kidneys, heart, and eyes. Keep your sugars within normal range by losing weight, exercising and controlling your diet. There are many medications used to help keep your blood sugars within range.

#### High blood pressure (normal is less than 120-80mmHg.)

You can lower your blood pressure by exercising, losing weight, or by taking medications.

#### High cholesterol

High cholesterol or "Fats" can clog your arteries and cause a heart attack. You can lower your cholesterol by watching the amount of fat you eat in your diet, exercising every day, and by taking medications called "Statins." Statins can lower your LDLs (bad guys), increase your HDLs (good guys) and reduce inflammation in your vessels.

#### Inactivity

Try to do 30 minutes of moderate-intensity aerobic (brisk walking, water aerobics, doubles tennis, general gardening, or a slow bike ride) at least 5 days a week or 25 minutes of vigorous-intensity activity (race walking, jogging or running, lap swimming, aerobic dancing, jumping rope, hiking, and singles tennis) at least 3 days a week. This does not need to be done all at one time. If you have not been active, you may need start with exercising for shorter times, and then work on increasing this to the recommended amount.



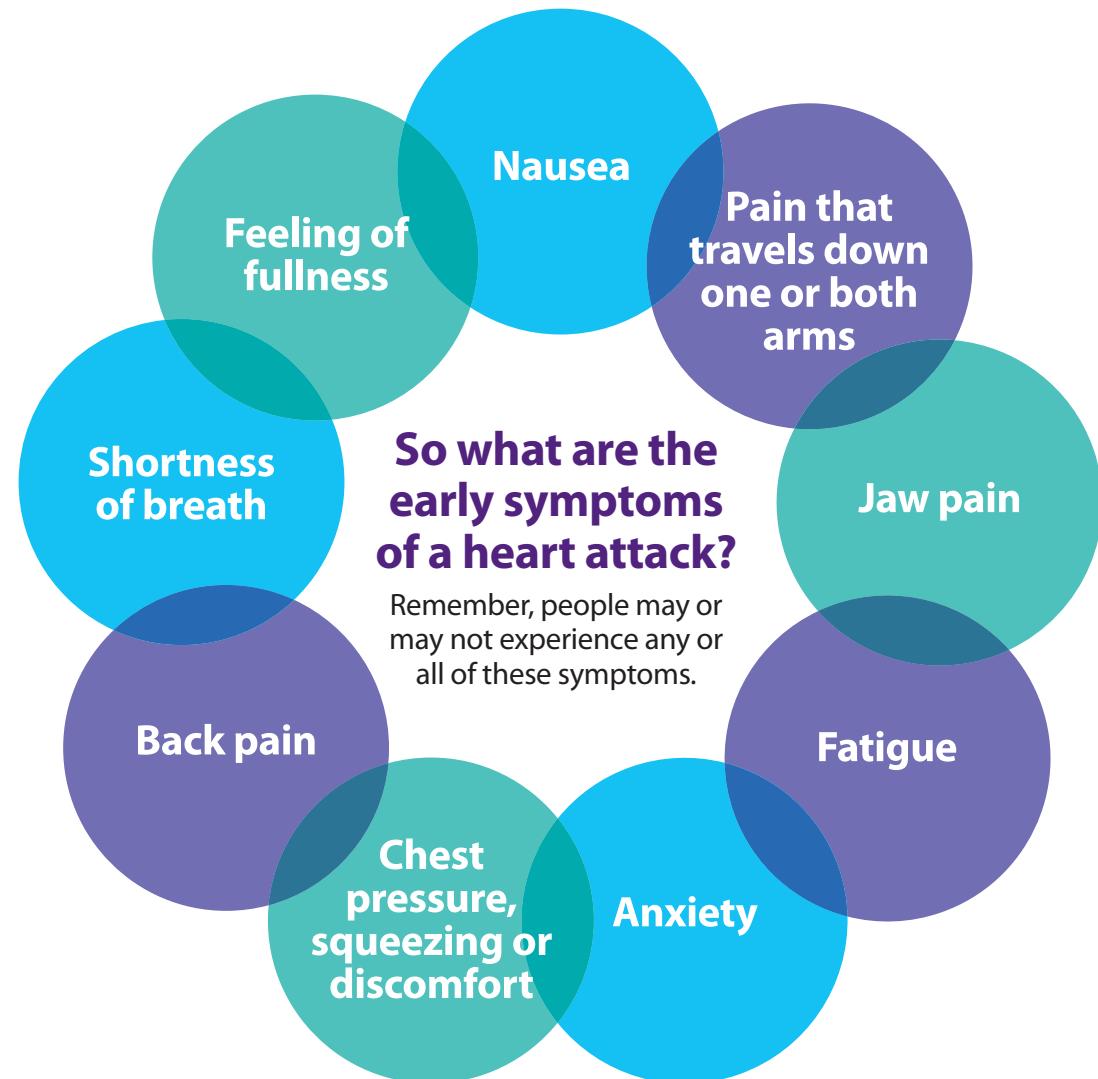
*Just remember...*

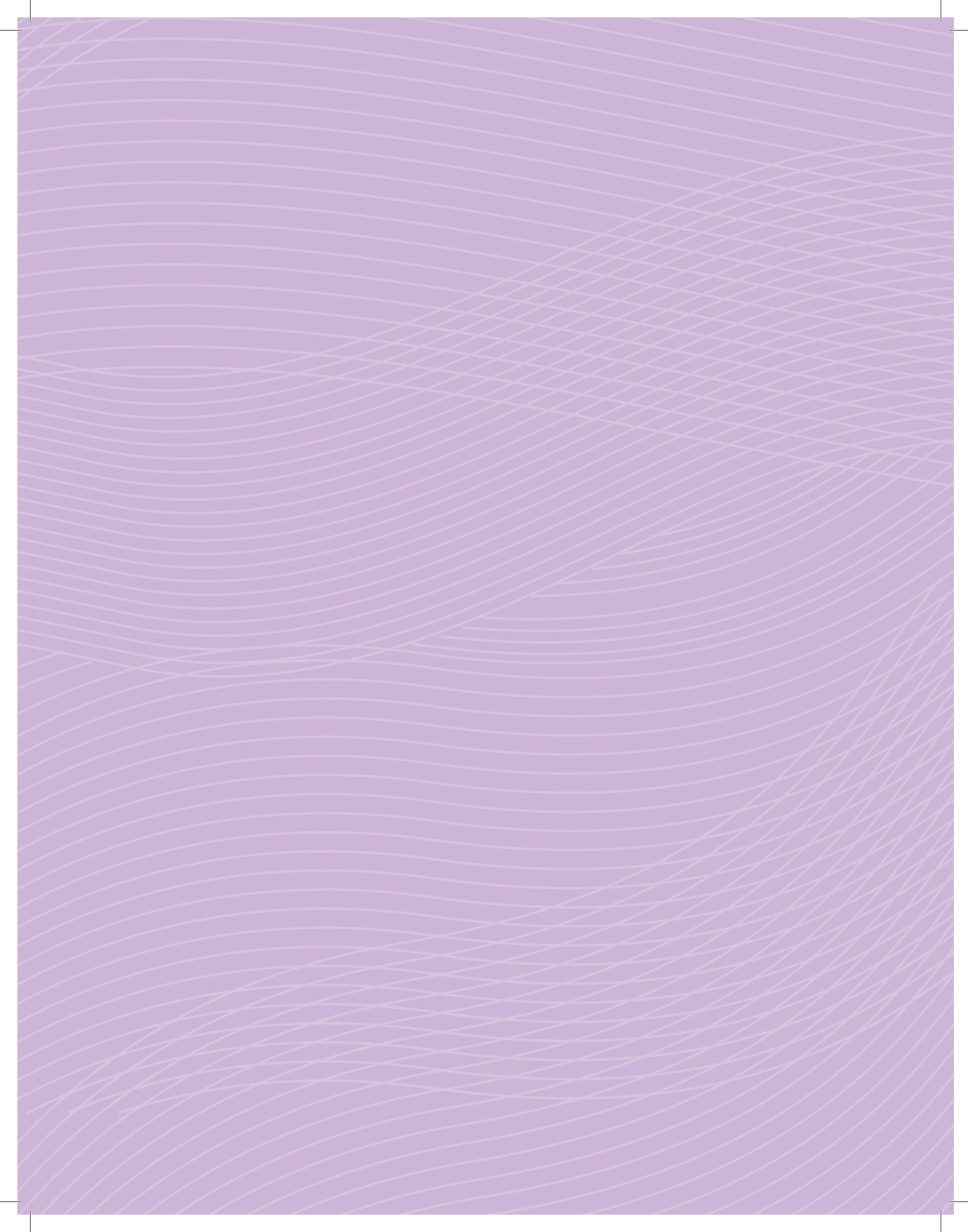
## Early Heart Attack Care

### What is EHAC or Early Heart Attack Care?

- 85% of heart damage occurs within the first 2 hours of a heart attack
- EHAC is knowing the subtle danger signs of a heart attack and acting upon them immediately – **BEFORE HEART DAMAGE OCCURS**
- Heart disease is the leading cause of death for both men and women in the US
- Every 25 seconds, an American will have a coronary event; every minute, someone will die from one

### Know the signs of a heart attack

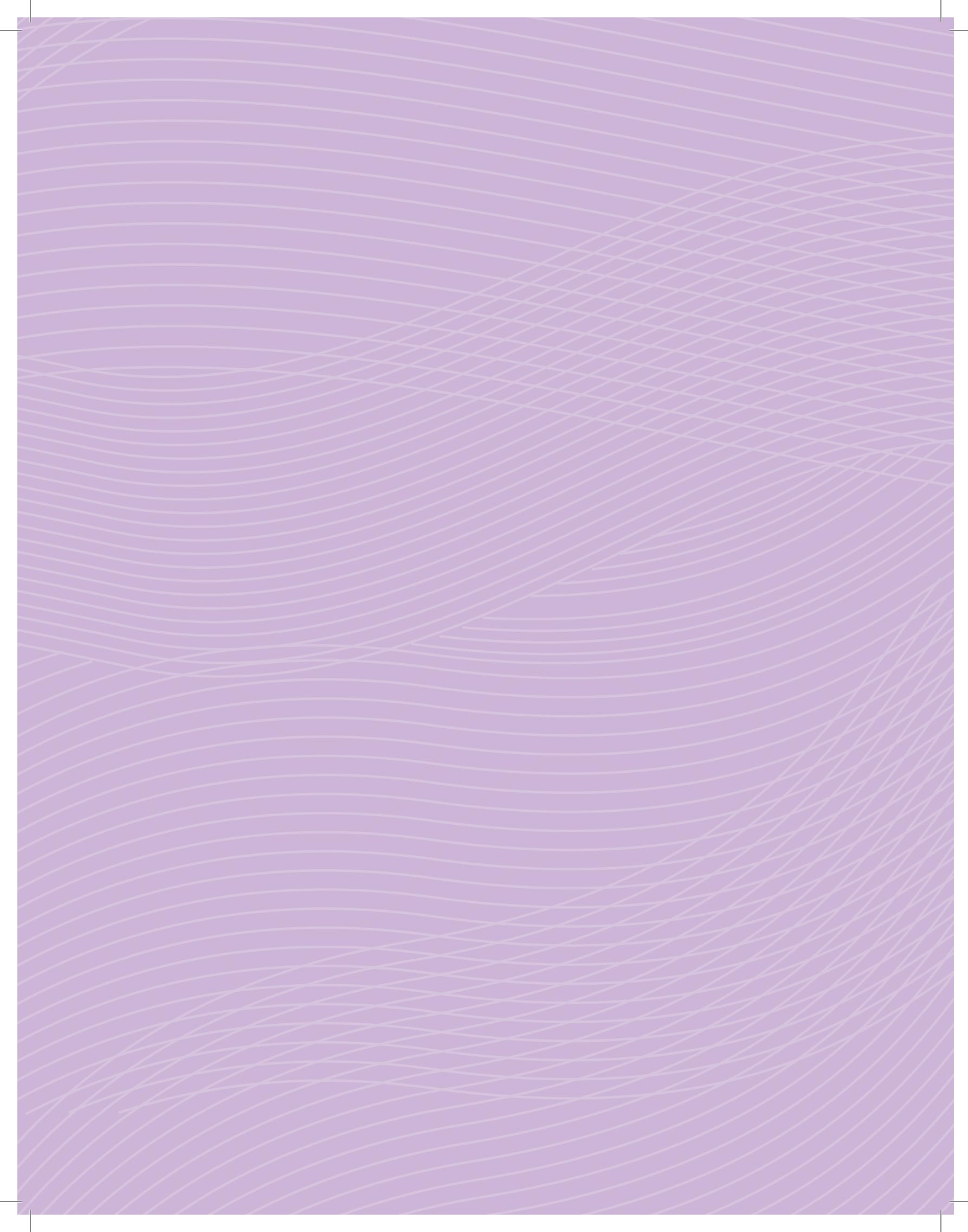




# 6

## Numbers I need to know





## Important phone numbers

### Billings Clinic Department of Cardiology:

Scheduling: (406) 238-2000, ext. 1445  
Nurses Line: (406) 238-2040  
Healthline: (406) 255-8400 or 1-800-252-1246

### Billings Clinic Cardiac Rehabilitation:

(406) 247-6431

### Other information numbers:

Pastoral Care Department: (406) 238-2500  
Care Management Department: (406) 238-2500  
Patient Financial Services Department: (406) 238-2500  
Medication Assistance Program: (406) 238-5896

### Montana Quit Line:

1-800-784-8669 or [tobaccofree.mt.gov](http://tobaccofree.mt.gov)

### WyomingQuitLine:

1-866-996-7848 or [wy.quitnet.com](http://wy.quitnet.com)

### Telemedicine Sites

#### Montana

- Baker: Fallon Medical Center, Tammy (406) 778-5109
- Culbertson: Roosevelt Medical Center, Vickie (406) 787-6401
- Forsyth: Rosebud Health care Center, Andrea (406) 346-4227
- Glasgow: Frances Mahon Deaconess Hospital, Julie (406) 228-3626
- Glendive: Glendive Medical Center, Lori (406) 345-3345
- Hardin: Big Horn Hospital, Vera (406) 665-9616

• Helena: St. Peter's Hospital, Kathy (406) 447-2840

• Miles City: Billings Clinic Miles City, Kirstin (406) 233-7039

• Plentywod: Sheridan Memorial Hospital, Connie (406) 765-3709

• Poplar: Northeast MT Health Services, Robin (406) 653-6549

• Terry: Prairie County Clinic, Jessica (406) 635-5863

• Wolfpoint: Trinity Hospital, Robin (406) 653-6549

#### Wyoming

• Cody: Billings Clinic Cody, Dian (307) 527-7561, ext. 1947

### Cardiology Outreach Clinics

- Big Timber: Outreach Clinic every other month
- Cody: Outreach Clinic three times a month; Device Clinic every other month
- Colstrip: Telemedicine Clinic once a month
- Columbus: Outreach Clinic once a month
- Glasgow: Outreach Clinic once a month; Telemedicine Clinic once a month; Device Clinic every other month
- Glendive: Outreach Clinic once a month
- Lewistown: Outreach Clinic every other month; Electrophysiology Outreach Clinic every other month
- Livingston: Outreach Clinic three times a month
- Lovell: Outreach Clinic once a month; Telemedicine Clinic once a month
- Malta: Telemedicine Clinic once a month
- Miles City: Outreach Clinic four times a month; Device Clinic once a month
- Plentywood: Telemedicine Clinic once a month
- Red Lodge: Outreach Clinic once a month
- Sheridan: Electrophysiology Outreach Clinic every other month

## ⑥ Numbers I need to know

### Cardiac Rehab

Montana			
Town	Phone Number (406)	Staff Name	E-mail
Billings	247-6431	Erika S, Deb W, Casey H, Jake N	
Bozeman	585-5040	Ashley Wishman	awishman@bdh-boz.com
Butte	723-2560	Karen Bennett & Dawn Pickett	karenbennett@sjh-mt.org
Columbus	322-1071	Jule' Bruursema	jbruursema@stillwaterbillingsclinic.org
Conrad	271-3211	Cathy Jones	
Dillon	683-3170	Deanna Nelson	dnelson@barrettthospital.org
Glasgow	1-800-322-3634 ext. 3310	Bev Falcon	bev.falcon@fmdh.org
Glendive	345-3309	Penny Maher	cardiac@gmc.org
Great Falls	455-2180	Pam Crisp	pamelacrisp@benefis.org
Havre	262-1185	Corey Labrie	colabrie@yahoo.com
Helena	447-2622	Kristene Palmer	kkpalmer@st.petes.org
Helena VA	447-7708	P. Jim Lund	paul.lund@va.gov
Kalispell	751-4504	Cathy Lisowski	clisowski@krmc.org
Lewistown	535-6209	Debbie Lee	debbyleern@msn.com
Libby	283-7279	Ruth Fenn	ruth.fenn@sjlh.com
Livingston	823-6459	Christine Usher	christine.usher@livingstonhealthcare.org
Miles City	233-2635	Diane Molstad	diane.molstad@hrh-mt.org
Missoula (St. Pats)	329-5824	Susi Mathis	smathis@saintpatrick.org
Missoula (Community)	728-4100 ext. 7560	Julie Bauer	jbauer@communitymed.org
Polson	883-8478 or 883-2377	Lisa Bertoglio	lbertoglio@saintjoes.org
Red Lodge	446-0627	Heidi Hunsperger	hhunsperger@beartoothbillingsclinic.org
Ronan	676-4441 ext. 230	Lydia Walton	lwalton@stlchn.org
Sidney	488-2124	Brandi Franck	brandi.franck@sidneyhealth.org
Whitefish	862-2515 ext. 153	Cathy Relf	

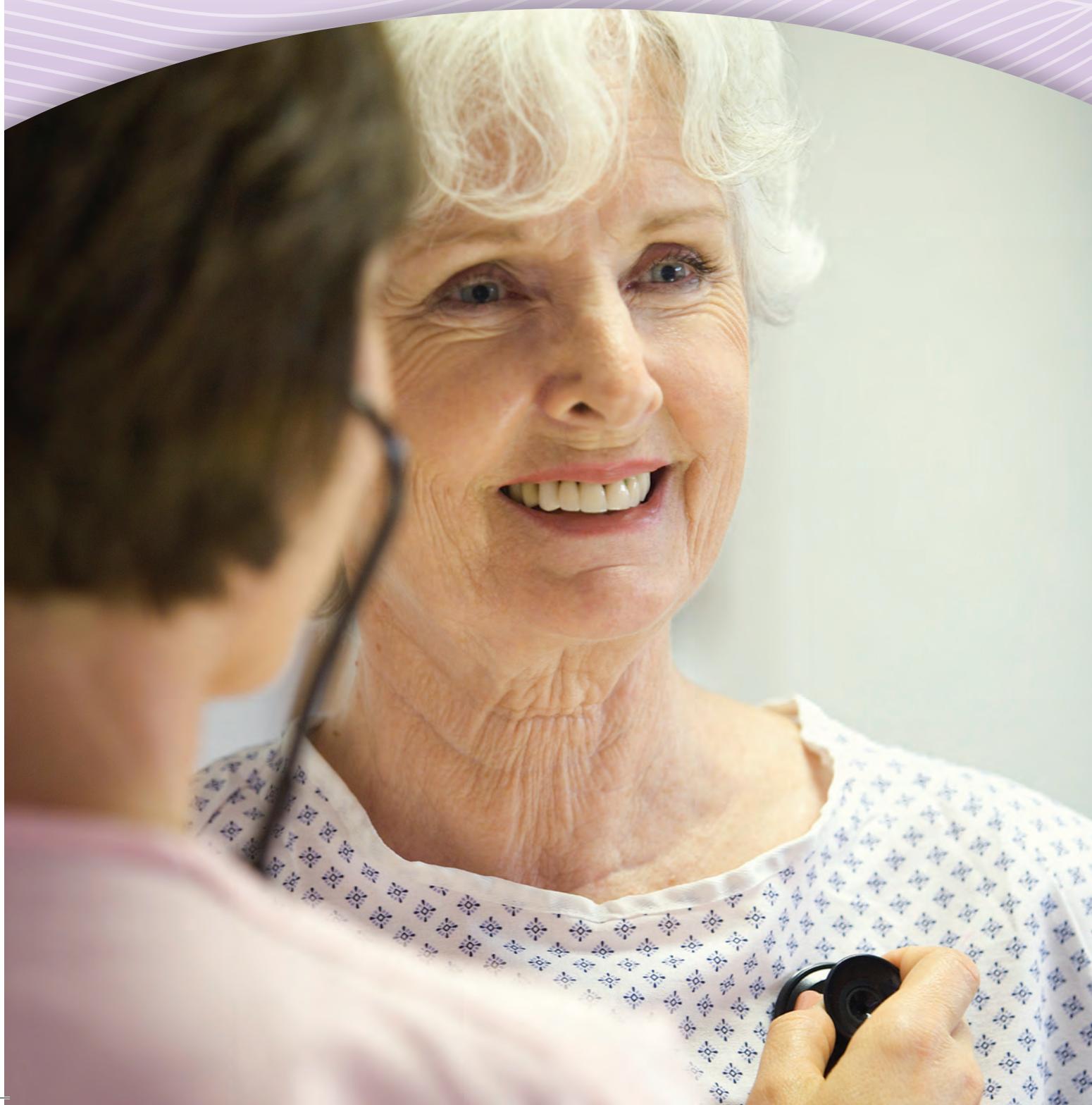
Wyoming			
Town	Phone Number (307)	Staff Name	E-mail
Buffalo	684-6320	Karen Sullivan	karens@jchealthcare.com
Casper	577-2240	Denise Lusk	Fax (307) 577-2968
Cody	578-2286	Linda Mendl-Kalb	lmendlkalb@wph.cody.org
Gillette	688-2330	Kelly Tyron	
Lander	332-4420 or 335-6391	Rita Peterson	
Lovell	548-5268	Melanie Schmitt	mschmitt@nbhh.com
Powell	754-1227 or 754-1228	Dianna Gorsuch	dgorsuch@pvhc.org
Sheridan	672-1062	Jenny Clemens, Rhonda, Thelma	jennyclemens@sheridanhospital.org
Thermopolis	864-5083	Bree	
Worland	347-5755	Robyn Jones	robyn.jones@bannerhealth.com

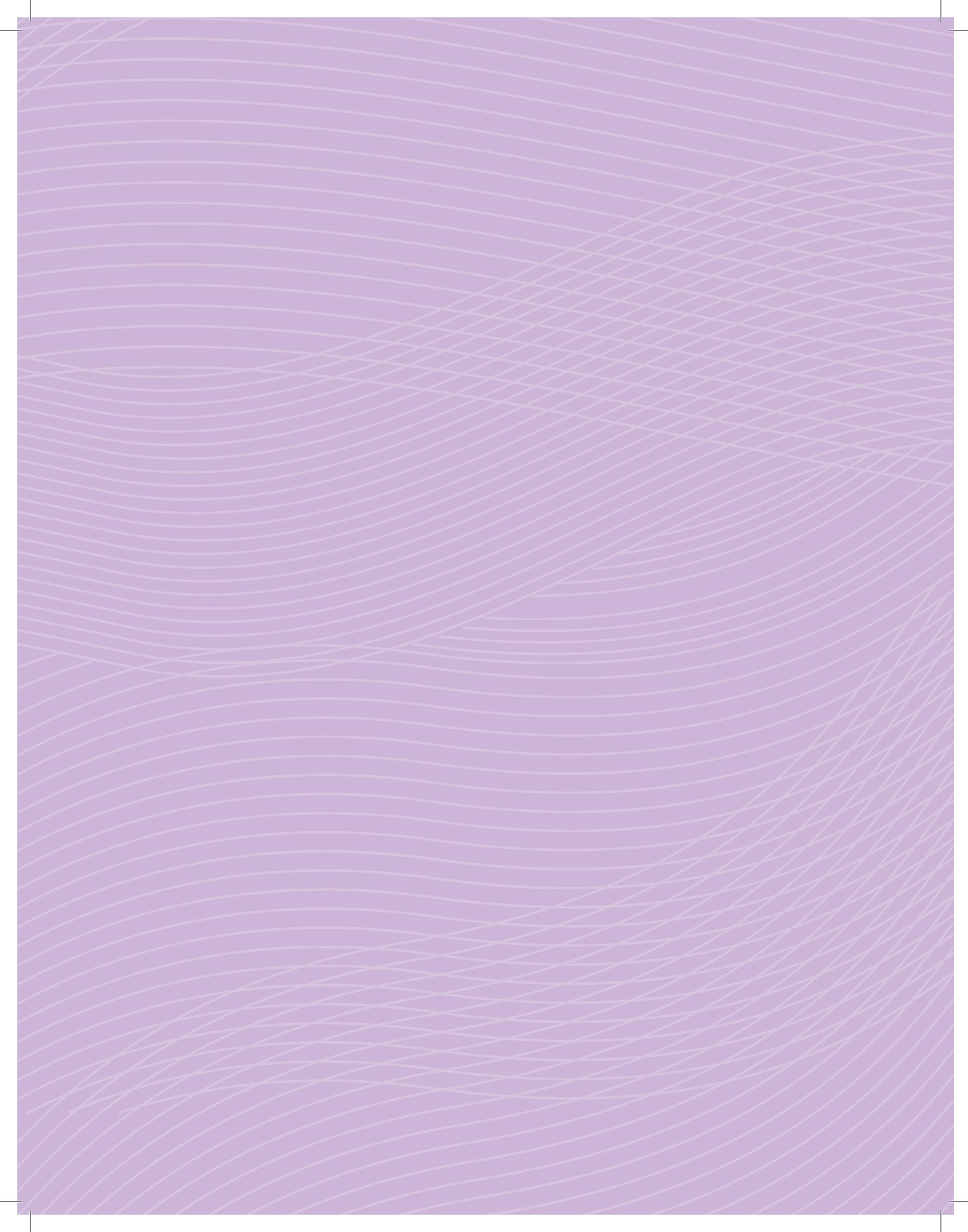
North Dakota			
Town	Phone Number (701)	Staff Name	E-mail
Williston	774-7400 or 1-800-544-3579	Gloria Fenster (Mercy Medical Ctr.)	

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## My questions and notes





## My questions and notes 7

## 7 My questions and notes

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