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CEO’s corner

By Chuck Bill

Welcome to the Early Spring 2017 edition of House Calls. I hope you are finding these quarterly magazines informative about what is happening at Bartlett Regional Hospital and helpful in meeting your health care needs.

In this issue, we feature Bartlett’s behavioral health services, with a focus on mental health and addiction. We also introduce our new hospitalist program spearheaded by Mimi Benjamin, MD. Then Food and Nutrition Services Director Kari Natwick, RDN, LD, makes the connection between healthy eating and healthy aging.

We also spotlight our obstetrics department and congratulate Director Karen White, BSN, RNC-OB, and her staff on Bartlett Beginnings breastfeeding recognition from the Centers for Disease Control and Prevention, as well as White’s selection as nurse manager of the year for Alaska!

We have springtime suggestions for keeping your mind and body on track and ideas for making healthy living a team effort. We even have a delicious recipe for nontraditional grilled cheese!

Happy spring!

Chuck Bill
cbill@bartletthospital.org

Our cover photo is a view of Pump House at Sandy Beach on Douglas Island. It was taken by Pat Costello on Christmas Eve morning 2016.
A NEW KIND OF DOC at Bartlett
Hospitalists offer convenience and expertise to patients

As of the start of this year, physicians are not only on call but on duty at Bartlett Regional Hospital 24/7. Popular at larger hospitals in the Lower 48, hospitalists are physicians who care for patients who do not have a local attending physician. Hospitalists also admit patients in place of their regular primary care physician.

Mimi Benjamin, MD, spearheaded the program at Bartlett. Seven years ago Dr. Benjamin and her husband, Brian, who is also a physician, arrived in Juneau from North Carolina seeking a simpler life and the Alaskan dream. Dr. Benjamin had worked as a doctor at the University of North Carolina and for the state health care quality improvement organization. To Bartlett, she brought a fresh perspective and an eye for improving efficiency.

A win-win
She worked with the medical staff on the Quality Improvement Committee and helped implement a new electronic medical records program. Then she took on implementing a hospitalist program, which she says is a win for both patients and doctors. Patients can be admitted sooner, and doctors spend less time traveling between their offices and the hospital. This is especially important in medical emergencies.

“Before, if there was a problem, the emergency room doctor was the only doctor always in-house,” Dr. Benjamin says. “So the emergency room doctor would have to run up to the floor.

“It’s also helpful to have us there at nighttime,” she continues. “Things happen at 2 in the morning, and instead of being two hours away, we are two minutes away.” Hospitalists work the same shifts as nurses, 7 a.m. to 7 p.m. or 7 p.m. to 7 a.m.

“The hospitalist is also available to the nurses and case management,” Dr. Benjamin says. “The presence is really helpful. So, for example, if some paperwork needs to be filled out or oxygen ordered, the case manager doesn’t have to fax a doctor’s office and wait for a response, because the doctor is right there working as part of the team of health care providers.”

“We greatly appreciate the hospitalists’ participation in daily rounds, engagement in clinical documentation improvement and greater availability to meet patient needs as they arise,” says Case Management Director Jeannette Lacey Dunn. “The treatment team is able to develop strong working relationships with providers—who are in the hospital on a regular basis—which enhances the continuum and provision of patient care.”

Reaping the benefits
Chief Executive Officer Chuck Bill recognizes several benefits of the hospitalist program: “It ensures we always have a physician specializing in inpatient care in the hospital and available to meet patient needs. In-house physicians can respond faster to urgent patient care situations, potentially avoiding complications. In addition, a core group of physicians can become very familiar with the inpatient resources and processes at Bartlett, improving efficiency and care. As a side benefit, primary physicians using the hospitalist service won’t have to interrupt or shorten their office hours to provide care in the hospital, allowing more daily patient office visits.”

“All of the doctors in Juneau are on board for having a hospitalist system,” Dr. Benjamin says. “Each practice has decided to participate in different ways. I think it will be very transitional over the next few years. Over time we’ll become our own department.”

“It ensures we always have a physician... available to meet patient needs.”
At Bartlett, we’re addressing mental health and addiction issues

Measuring the Challenge

Lack of mental health support is a huge national issue. When Chuck Bill took office as Bartlett Regional Hospital’s chief executive officer in 2014, one of his first orders of business was to identify challenges to serving patients with mental health and addiction disorders.

In March 2016, Bill hired Sally Schneider, MS, for the position of chief behavioral health officer. Schneider came to Juneau after 25 years working in behavioral health care in Kansas and Ohio. Her plan was daunting: comprehensive on-site detoxification services, inpatient and outpatient addiction care, integration of primary care and mental health services, and residential child and adolescent services.

“I have been very impressed with the talent in Alaska and the commitment of people, particularly in Juneau and Southeast, to finding solutions to our major behavioral health problems,” Schneider says. “The issues of alcohol and drug addiction stand out statistically and anecdotally. The Division of Behavioral Health and many of the legislators I have met are actively engaged in developing solutions for our state. Mental health services are also a critical need,
including services for children and our aging population. Part of the challenge and benefit of this position is developing solutions so we can have a healthier community.”

**A strong duo**

Schneider works closely with Behavioral Health Medical Director Jenna Hiestand, MD, who oversees a 12-bed, locked mental health unit; the 16-bed Rainforest Recovery Center; and outpatient psychiatric services.

“I have a very strong administrative leader, and Sally’s been great to work with,” Dr. Hiestand says. “I think we share a lot of the same focus and interest and energy. I’m really happy that she’s here. We’re able to grow the service line and move it forward and do things that we’ve really wanted to do and make progress for the community in the needed changes.”

Schneider and Dr. Hiestand restructured the management and 28-day programs offered by the Rainforest Recovery Center to help patients with drug and alcohol addiction.

“For the residential patients, there is a completely new group system that’s evidence-based, which means we constructed the program around research,” Dr. Hiestand says. “We’ve moved away from focus on the 12 steps, which is still available, but it’s not the sole focus of treatment. We do motivational interviewing, dialectical behavior therapy and cognitive behavioral therapy.”

**Meet Dan**

“I think it’s great,” says Dan, a Rainforest patient. “It’s very regimented. There is a schedule. You have to be up at a certain time; meals are at certain times. But you can see a counselor at any time. There’s support groups all day long, where you discuss what is going on with you.”

Dan only drank on weekends until he was about 28. “And I could drink and then the next day not feel like I needed to drink. And then for whatever reason—and I’ve heard this from others—people like me will cross a line to where you get up in the morning and your body is telling you you have to have it or you can’t function. The binges started. For 20 years I was off and on. Get well, do well. Everything’s fine. Think I can have a couple beers with my friends. They go home from the bar, and I just keep on going. Once I get it in my system, I don’t have the ability to stop drinking—anything I can get my hands on.”

Dan landed in the mental health unit for three days. He doesn’t remember how he got there. Dan is 4½ months sober after his second stay at Rainforest.

“I’ve done 4½ months and then relapsed before,” he says. But this time Dan is determined not to repeat the destructive cycle.

**Where mental health and addiction meet**

Dan is also diagnosed bipolar. “I have issues with my ups and downs,” he says. When he’s up, Dan feels invincible—like a drink or two won’t matter. “But it always ends in disaster. I’ve been in jail many times. I’ve lost apartments, cars, friends.

“They put me on a different medication,” he says. “It took a few weeks for it to take effect. But I’ve been pretty level, so I haven’t felt the need to run to the bar and feel better.”

“There are medications that are proven to help

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diminish craving and increase sobriety,” Dr. Hiestand says. “A psychiatrist meets with the patient weekly to go over any co-occurring psychiatric disorders or medical conditions that might be contributing.”

Dan is a perfect example of “why it’s important to have a good assessment and evaluation by psychiatric staff,” Schneider says. “Sometimes people with addictions have been self-medicating their mental health disorder. Sometimes people with mental health disorders use substances to get relief, which does not work. And I think if we had this discussion 20 years from now, we’d realize that many addictive disorders and mental health disorders are similar and that the brain, which is our master control center, is responsible for both.”

“I would like to see us move toward a more integrated care model where medical care and psychiatric care aren’t so split,” Dr. Hiestand says. “That’s been very effective in other states. Often patients with psychiatric disorders or substance use disorders don’t go to their primary care physicians or they have a lot of unmet medical needs because they’re embarrassed. The more you bring those together under the same roof, the better the person’s outcome will be. That’s really part of the goal: to improve the communication between the two sides.”

Looking ahead

For Bartlett, the next step is implementing a continuum of inpatient and outpatient care for adults, adolescents and children. Schneider hopes to have the expansion of services completed and new physicians hired within the next two to three years.

In the meantime, Schneider is “very excited about working with our partners in the community, particularly the Juneau Alliance for the Mental Health, Inc. (JAMHI), and Juneau Youth Services and helping develop those services more robustly.”

She is buoyed by the hire of Ian Niecko, CDC2, M.Div, PsyD (student), the new Director of the Rainforest Recovery Center. Niecko previously worked for the JAMHI, where he was the clinical case manager. Prior to JAMHI, he spent several years working in behavioral health with the Yukon-Kuskokwim Health Corporation.

Schneider is also encouraged by former patients now in recovery, like Dan.

1 Dan’s name has been changed to protect his identity.
10 WAYS to add more joy to your life

Henry Wadsworth Longfellow once wrote, “Into each life some rain must fall.”

If you sometimes feel like your life is one downpour after another, it’s time to find some joy. And it’s easier than you might think.

1 Do something you loved as a kid. Sing silly songs, splash in puddles or see how high you can swing.

2 Laugh at life’s hassles. No day is perfect. But there’s often something at least a bit amusing in challenging situations if you look for it.

3 Collect sayings or photos that make you smile. Then stick them where they’re visible—on your refrigerator or at your desk, for instance—to look at when you need a pick-me-up.

4 Play a song you love. Imaging tests of brains show that music can release feel-good hormones.

5 Go for it. Stop putting experiences you want to try on hold. Bake a pie from scratch, learn to crochet or sign up for an indoor climbing class—explore what intrigues you.

6 Take a nature break. Look up at the sky, and see how blue it really is. Go on an early-morning walk, and delight in the dew on the grass. Let nature’s beauty soothe you.

7 Take a mental break. Close your eyes and imagine a place you love. Use all your senses. Are you drawn to the beach? Smell the salt water, feel the sun on your back and hear the crashing waves.

8 Spread happiness. When you get good news, don’t keep it to yourself—tell a friend. You’ll relive the moment and have the extra pleasure of your friend’s reaction.

9 Seek out happy people. Good moods are contagious.

10 Develop your playful side. Joke with strangers in line, arrange nights out with friends or have a regular game night with your family.

Sources: HelpGuide; Mental Health America

www.bartletthospital.org
People over the age of 60 are the largest demographic in Juneau and greater Southeast Alaska. Alzheimer’s dementia is the sixth leading cause of death in the United States and impacts an estimated 11 percent of the population age 65 and older; prevalence increases to 33 percent of people age 85 and older. The good news is that regular exercise and a healthy diet have been shown to slow cognitive decline in older adults.

With that in mind, Bartlett Regional Hospital’s Food and Nutrition Services Director Kari Natwick, RDN, LD, recommends the MIND diet, which stands for Mediterranean-DASH Intervention for Neurodegenerative Delay. Mediterranean refers to the longevity and lower risk of cognitive decline observed in older people in regions like coastal Greece, where they eat more white meats, fish, beans and greens.

The study
The diet was developed by Martha Clare Morris, a nutritional epidemiologist at Rush University Medical Center, through a study funded by the National Institute on Aging. Morris’ team followed the food intake of 923 Chicago-area seniors over the course of 4½ years. During that time period, 144 members of the study group developed Alzheimer’s dementia. However, researchers observed that the longer people in the study group followed the MIND diet patterns, the lower their risk of developing Alzheimer’s dementia.

The MIND diet study considered 15 components of the participants’ diets: 10 beneficial brain foods (green leafy vegetables, other vegetables, nuts, berries, beans, whole grains, seafood, poultry, olive oil and wine) and five harmful brain foods (red meat, butter/stick margarine, cheese, pastries/sweets and fried/fast food).

Even people who made modest changes to their diets had a lower risk of developing Alzheimer’s. The MIND diet lowered Alzheimer’s risk by about 35 percent for people who followed it moderately well and up to 53 percent for those who adhered to it rigorously.

The MIND diet offers an exciting new link between diet and brain health. It is a simple, cost-effective and delicious way to help maintain cognition as you age.

Making it easy
MIND diet tips
For many people, the MIND diet is relatively easy to implement. The following are some simple changes to help follow the MIND diet:

- Add garbanzo, black or kidney beans to salads.
- Snack on walnuts, almonds or pistachios.
- Daily, include berries at lunch or as a snack.
- Use olive oil and vinegar for salad dressing instead of commercial dressings.
- Sprinkle nuts over pasta dishes, cereal, yogurt or oatmeal.
- Make your own salad dressing by pureeing berries with olive oil and other spices.
- Swap steak and hamburger for white meat chicken or turkey, salmon, or tuna.
- Use beans as a primary source of protein in at least two meals per week.
- Sauté vegetables in olive oil instead of butter.
- Choose fruit or berries for dessert instead of cake or cookies.
- Experiment with different greens, such as kale, spinach, collard or mustard greens, or Swiss chard.
Aging may be inevitable, but falls among older adults don’t have to be. Every year, more than one-third of U.S. adults 65 and older take a fall. Yet many of these mishaps could be avoided with a few preventive steps.

Prevention is important—once you’ve fallen, you may find yourself dealing with a laceration, a hip fracture or even a traumatic brain injury. You may end up in the hospital after a bad tumble. And in some cases, serious falls and their complications result in death.

To take an active role in sidestepping such accidents and injuries, try the following tips:

Choose the right shoes.
Low-heeled and rubber-soled shoes help keep your feet securely on the ground. Walking around in socks, backless shoes or floppy slippers raises the risk that you may lose your footing.

Get a vision exam.
Glaucoma, cataracts and other eye problems can interfere with vision. Proper eye care and the correct eyewear will help you steer clear of obstacles in your path.

Have a medication review.
Blood pressure pills, heart medicine and muscle relaxants are among the medications that can make you feel confused, slow or dizzy. Visit with your doctor or pharmacist to make sure your medicines aren’t increasing the risk of a tumble.

Modify your living space.
Most falls happen at home, but minor modifications can reduce by half your risk of falling in your residence: Remove clutter from stairs and floors. Use nonslip rugs and mats. Keep all areas adequately lighted. Place handrails along stairs and in showers and tubs. Put nonslip treads on vinyl-covered and wood steps. Keep electrical cords out of the way.

Exercise regularly.
Improving your balance, coordination and overall strength greatly lowers your chance of falling. Talk with your doctor to see what type of exercise program is right for you.

Sources: Centers for Disease Control and Prevention; National Institute on Aging
A **HEALTHIER YOU** **can mean a HEALTHIER BABY**

**When** you’re pregnant, a lot of things you do can have an effect on your baby—an effect that continues long after your baby is born. It’s crucial to make good decisions about diet, exercise, health care and lifestyle habits. Take care of your baby by taking care of yourself.

**Prenatal care**

Prenatal care is the care you receive during your pregnancy. Pregnant women who see a health care provider regularly decrease their risk of pregnancy complications.

During your prenatal visits, your provider will talk with you about how to give your baby a healthy start, answer your questions, and check to make sure you and your baby are healthy.

Prenatal care gives your provider a better chance to detect and treat problems early.

**Diet**

Take care of yourself and your baby by following a healthy diet. Aim to eat a low-fat diet filled with fruits, vegetables, whole grains, protein and calcium-rich foods.

In addition, you should avoid certain types of fish that may contain high levels of mercury, such as shark, swordfish, king mackerel and tilefish. Cook meat, eggs and fish thoroughly. Avoid unpasteurized milk and soft cheeses.

**Exercise**

Exercising during pregnancy may help delivery go more smoothly, and being in good physical condition may make it easier to get back in shape after childbirth.

If you were exercising before you became pregnant, it’s usually OK to continue. But ask your provider about which exercises are safe for you.

Your changing body can affect your balance and increase your risk of a fall. Avoid exercises that involve jumping, quick stops and starts, and change-of-direction movement.

If you don’t already exercise, start...

**We’re BABY-FRIENDLY!**

Bartlett Beginnings gets top recognition for breastfeeding support

**According** to the results of a biannual survey by the Centers for Disease Control and Prevention (CDC), Bartlett Regional Hospital is among the top-scoring hospitals in the United States for encouraging and supporting breastfeeding. Bartlett scored 94 out of 100, well above the average Alaska score of 82 and the nationwide score of 79.

Bartlett Beginnings Director Karen White, BSN, RNC-OB, credits the accomplishment to a positive culture for breastfeeding established at Bartlett back in the early 1990s under the leadership of lactation consultant Debi Ballam. Breast milk is the established best source of nutrition for babies and has remarkable health benefits for both baby and mother.

However, nationally, of the 80 percent of mothers who start breastfeeding, only 1 in 5 continues to exclusively breastfeed for the recommended six months, and even fewer continue some breastfeeding for a full year, which is the minimum duration recommended...
If possible, you’ll spend your baby’s first hour after birth cuddled up together skin to skin. This helps regulate baby’s heart rate, body temperature and breathing.

Since your baby will be close, you’ll be able to breastfeed as soon as you’re ready. And our trained staff will be there to help if you need it.

Your baby stays in your room day and night, as long as you’re both healthy. That’s the best way to bond from the start.

Expecting? We’d love to show you around. Call 907-796-8424 to schedule a tour of our birth center.

We’re a designated Baby-Friendly Hospital. That means we meet the highest standards for maternity care and infant feeding.

Breastfeeding Support

Skin-to-skin time

If possible, you’ll spend your baby’s first hour after birth cuddled up together skin to skin. This helps regulate baby’s heart rate, body temperature and breathing.

Rooming in

Your baby stays in your room day and night, as long as you’re both healthy. That’s the best way to bond from the start.

Home sweet home. If feeding problems come up after you go home, our staff can help too.

OFF TO A GREAT START

“WE DID NOT NECESSARILY SET OUT TO IMPROVE THE mPINC BENCHMARK SCORES BUT TO IMPROVE OUR BREASTFEEDING PRACTICES BY IMPLEMENTING THE STANDARDS OF CARE OUTLINED BY THE Baby-Friendly initiative.” WHITE SAYS. THE ULTIMATE GOAL IS TO IMPROVE THE HEALTH OF MOTHERS AND BABIES. BARTLETT BEGINNINGS WAS AWARDED THE COVETED BABY-FRIENDLY DESIGNATION IN 2014.

THE Baby-Friendly Hospital Initiative IS A GLOBAL INITIATIVE FIRST LAUNCHED IN 1991. GUIDELINES INCLUDE A WRITTEN BREASTFEEDING POLICY, STAFF EDUCATION, HELPING MOMS LEARN HOW TO BREASTFEED WITHIN THE FIRST HOUR AFTER BIRTH, GIVING INFANTS NO FOOD OR DRINK EXCEPT BREAST MILK, AND HAVING BABIES ROOMING WITH MOMS. UNDER THE GUIDELINES, THE OFFER OF FREE FORMULA SAMPLES PROVIDED BY COMPANIES IS A THING OF THE PAST.

BARTLETT IS PART OF AN ESTEEMED MINORITY. ONLY 20 PERCENT OF BIRTHS IN THE UNITED STATES ARE IN OFFICIALLY DESIGNATED Baby-Friendly hospitals.

TO LEARN MORE

About prenatal care, visit www.womenshealth.gov.
Bartlett Beginnings Director Karen White, BSN, RNC-OB, was named Nurse of the Year in the Leadership Nurse Manager category at the 13th annual March of Dimes Alaska Nurse of the Year Awards in Anchorage. Janell Meade, BSN, RN-BC, was nominated in the same category. Meade serves as the clinical assistant manager for the Rainforest Recovery Center. The event took place Friday, Nov. 18, 2016, at the Dena’ina Center.

Registered nurses working at all staff levels in Alaska were honored in 16 categories. Ninety-eight nurses statewide were nominated. The Nurse of the Year Awards recognize professionalism and exceptional care. The atmosphere was charged with anticipation and joy as the honorees were announced.

CONGRATULATIONS! Janell Meade, BSN, RN-BC, Clinical Assistant Manager, Rainforest Recovery Center, and Karen White, BSN, RNC-OB, Bartlett Beginnings Director, Bartlett Regional Hospital (photo by Sally Schneider)

Nurses

You’re in good hands

Whether you’re seeing your doctor for a checkup or being treated in our emergency department, the first person you are likely to see is a nurse.

In fact, you’ll probably see a lot of nurses in any medical setting. According to the U.S. Bureau of Labor Statistics, registered nurses, or RNs, make up the largest health care occupation, with about 3 million jobs.

Highly trained professionals

While nurses everywhere are dedicated to good patient care, we think our nurses are exceptional at what they do. They are highly trained professionals, and many have a four-year degree in nursing. Others have trained to be advanced-practice specialists, such as nurse practitioners, nurse anesthetists or nurse-midwives.

The personal touch

Whatever their training or specialty, our nurses deliver a special kind of care. While they follow precise standards for evaluating and treating patients, they also take a broader view of what nursing means.

For instance, along with your physical condition, our nurses consider your lifestyle, family situation, state of mind, and spiritual and economic needs when planning and implementing your care.

When you or your loved ones go home feeling good about your hospital experience, our nurses are likely to be a big reason why.
So healthy together

Habits can be contagious

You share dinner with your kids, TV time with your spouse and lunches out with co-workers. And without realizing it, you may be sharing your health habits (or lack thereof) with those close to you.

Research suggests that the habits—whether healthy or unhealthy—of those around us can influence our own habits. And our choices, including the foods we eat and the way we spend our leisure time, are likely to have a subconscious but significant impact on our friends and loved ones as well.

So, in the spirit of spreading good health, why not make sure the habits you’re sharing will benefit everyone in your circle of health? Try these ideas from the Centers for Disease Control and Prevention.

You can find healthy recipes to share with family and friends at www.bartletthospital.org/healthyrecipes.

**Make exercise a team effort.** Let’s face it—we’re all much less likely to blow off a workout if someone is waiting for us. So make exercise dates with a friend, your spouse or your kids. You’ll be able to enjoy each other’s company and improve your health at the same time. If a little healthy competition is what motivates you to stay active, set up a video game fitness tournament.

**Band together to shed unwanted pounds.** You might arrange a friendly weight-loss competition at work. Or you and a friend may decide to keep food journals. Sharing that information can help you both stay accountable for your food choices.

**Create a healthy food contest.** For family meals and friendly gatherings, make it a challenge to plan a menu that is both healthy and satisfying. Share meal and recipe ideas with friends.

**Kick the habit collectively.** It can be extremely difficult to quit smoking if those around you are still lighting up. Recruit your smoking buddies to set a group quit date. You can visit each other’s homes to be sure all lighters, ashtrays and cigarettes are tossed out. Your fellow quitters will be an invaluable source of support.
General Surgery
Benjamin A. Miller, DO
Bartlett Surgery and Specialty Clinic
3225 Hospital Drive, Suite 10A
Juneau, AK 99801
907-796-8700

Matthew A. Taintor, MD
SEARHC–Cedar
3245 Hospital Drive
Juneau, AK 99801
907-463-4040

Oncology
Paul Welden, MD
Bartlett Surgery and Specialty Clinic
3225 Hospital Drive, Suite 10A
Juneau, AK 99801
907-796-8700

Otolaryngology
John F. Raster, MD
John Raster, MD
10301 Glacier Highway, Suite 10A
Juneau, AK 99801
907-790-4047

Orthopedic Surgery
Gordon R. Bozarth, MD
Juneau Bone and Joint Center
3220 Hospital Drive, Suite 110A
Juneau, AK 99801
907-364-2663

Pediatric Dentistry
Jessica Bianco, DMD
Juneau Pediatric Dentistry
2220 Dunn St.
Juneau, AK 99801
907-523-5437

Pediatrics
Amy E. Dressel, MD
Glacier Pediatrics
1600 Glacier Ave.
Juneau, AK 99801
907-506-1542

Joy M. Neyhart, DO
Rainforest Pediatric Care
3268 Hospital Drive, Suite E
Juneau, AK 99801
907-463-1210

Physical Medicine
and Rehabilitation
John P. Bursell, MD
Juneau Bone and Joint Center
3220 Hospital Drive, Suite 10A
Juneau, AK 99801
907-364-2663

Podiatry
Kelly M. Moxley, DPM
Juneau Foot and Ankle Center
1880 Glacier Highway, Suite 210
Juneau, AK 99801
907-789-0405

Psychiatry
Janice R. Carrick, DO
Bartlett Outpatient Psychiatric Services
3240 Hospital Drive
Juneau, AK 99801
907-796-8498

Ronald Solberg, DO
Bartlett Outpatient Psychiatric Services
3240 Hospital Drive
Juneau, AK 99801
907-796-8498

Radiation Oncology
Eugene H. Huang, MD
Southeast Radiation Oncology Center
1701 Salmon Creek Lane
Juneau, AK 99801
907-586-5762

Radiology
Theresa J. Shanley, MD
Diagnostic Radiology Consultants
3260 Hospital Drive
Juneau, AK 99801
907-796-8800

Steven T. Strickler, DO
Diagnostic Radiology Consultants
3260 Hospital Drive
Juneau, AK 99801
907-796-8800

Urology
Michael J. Saltzman, MD
Southeast Urology
3225 Hospital Drive, Suite 102
Juneau, AK 99801
907-500-9520

Gynecology
Nicholas Newbury, DO
Juneau OB/Gyn
3268 Hospital Drive, Suite B
Juneau, AK 99801
907-586-4126

Nell A. Wagoner, MD
Nell A. Wagoner, MD
3268 Hospital Drive, Suite B
Juneau, AK 99801
907-586-1717

Internal Medicine
Nathaniel L. Haddock, MD
Family Practice Physicians
10301 Glacier Highway
Juneau, AK 99801
907-789-2910

Alex D. Malter, MD
Family Practice Physicians
10301 Glacier Highway
Juneau, AK 99801
907-789-2910

Catherine L. Peimann, MD
Southeast Medical Clinic
641 W. Willoughby, Suite 201
Juneau, AK 99801
907-586-8100

Anne B. Standerwick, MD
Southeast Medical Clinic
641 W. Willoughby, Suite 201
Juneau, AK 99801
907-586-8100

Matthew A. Miller, MD
Alaska Minimal Invasive Surgery Center
3268 Hospital Drive, Suite C
Juneau, AK 99801
907-586-4126

David A. Miller, MD
Juneau OB/Gyn
3268 Hospital Drive, Suite B
Juneau, AK 99801
907-586-1717

Nicholas Newbury, DO
Juneau OB/Gyn
3268 Hospital Drive, Suite B
Juneau, AK 99801
907-586-1717

Oncology
Paul Welden, MD
Bartlett Surgery and Specialty Clinic
3225 Hospital Drive, Suite 10A
Juneau, AK 99801
907-796-8700

Ophthalmology
Robert A. Breffeilh, MD
Tongass Regional Eye Clinic
3268 Hospital Drive, Suite A
Juneau, AK 99801
907-586-2700

Oral and Maxillofacial Surgery
Eric G. Paulson, DDS
Eric G. Paulson, DDS
9000 Glacier Highway
Juneau, AK 99801
907-796-3008

Charles J. Schultz, DDS
Charles J. Schultz, DDS
2220 Dunn St.
Juneau, AK 99801
907-586-9586

Pathology
Norman H. Thompson, MD
Bartlett Regional Hospital–Department of Pathology
3260 Hospital Drive
Juneau, AK 99801
907-796-8840

Burton L. Vanderbilt, MD
Bartlett Regional Hospital–Department of Pathology
3260 Hospital Drive
Juneau, AK 99801
907-796-8841

Pediatrics
Amy E. Dressel, MD
Glacier Pediatrics
1600 Glacier Ave.
Juneau, AK 99801
907-506-1542

Joy M. Neyhart, DO
Rainforest Pediatric Care
3268 Hospital Drive, Suite E
Juneau, AK 99801
907-463-1210

John P. Bursell, MD
Juneau Bone and Joint Center
3220 Hospital Drive, Suite 10A
Juneau, AK 99801
907-364-2663

Pediatric Dentistry
Jessica Bianco, DMD
Juneau Pediatric Dentistry
2220 Dunn St.
Juneau, AK 99801
907-523-5437

Podiatry
Kelly M. Moxley, DPM
Juneau Foot and Ankle Center
1880 Glacier Highway, Suite 210
Juneau, AK 99801
907-789-0405

Psychiatry
Janice R. Carrick, DO
Bartlett Outpatient Psychiatric Services
3240 Hospital Drive
Juneau, AK 99801
907-796-8498

Ronald Solberg, DO
Bartlett Outpatient Psychiatric Services
3240 Hospital Drive
Juneau, AK 99801
907-796-8498

Radiology
Theresa J. Shanley, MD
Diagnostic Radiology Consultants
3260 Hospital Drive
Juneau, AK 99801
907-796-8800

Steven T. Strickler, DO
Diagnostic Radiology Consultants
3260 Hospital Drive
Juneau, AK 99801
907-796-8800

Urology
Michael J. Saltzman, MD
Southeast Urology
3225 Hospital Drive, Suite 102
Juneau, AK 99801
907-500-9520

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**RED, WHITE and GREEN grilled cheese**

*Makes 4 servings.*

### Ingredients
- 1 teaspoon garlic, minced (about ½ clove)
- 1 small onion, minced (about ½ cup)
- 2 cups frozen cut spinach, thawed and drained (or substitute two 10-ounce bags fresh leaf spinach, rinsed)
- ¼ teaspoon ground black pepper
- 8 slices whole-wheat bread
- 1 medium tomato, rinsed, cut into 4 slices
- 1 cup shredded part-skim mozzarella cheese
- Nonstick cooking spray

### Directions
- Preheat oven to 400 degrees. Place a large baking sheet in the oven to preheat for about 10 minutes.
- Heat garlic with cooking spray in a medium sauté pan over medium heat. Cook until soft but not browned. Add onions, and continue to cook until the onions are soft but not browned.
- Add spinach, and toss gently. Cook until the spinach is heated throughout. Season with pepper, and set aside to cool.
- When the spinach and onions are cool, assemble each sandwich with 1 slice of bread on the bottom, 1 tomato slice, ½ cup of spinach mixture, ¼ cup of cheese, and a 2nd slice of bread on the top.
- Spray the preheated nonstick baking sheet with cooking spray. Place the sandwiches on the baking sheet. Bake for 10 minutes or until the bottom of each sandwich is browned.
- Carefully flip sandwiches, and bake for an additional 5 minutes or until both sides are browned. Serve immediately.

### Nutrition information

Serving size: 1 sandwich. Amount per serving: 254 calories, 8g total fat (4g saturated fat), 29g carbohydrates, 17g protein, 6g total fiber, 468mg sodium.

Source: National Heart, Lung, and Blood Institute