

GUNDERSEN



WELCOME NEW MIDWIFE

Kylie Jirak, RN, CNM

How an injured
high school athlete got

BACK IN THE GAME

GUNDERSEN
HEALTH SYSTEM®

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Gundersen Health System has the following locations in your area. For a complete listing visit gundersenhealth.org.

Calmar

• Medical Clinic: 106 E. Main St.
(563) 562-3211

Cresco

• Rehab Services: 316 3rd Ave. E.
(563) 547-4400

Decorah

• Medical Clinic, Behavioral Health, General Surgery and Podiatry:
1830 State Highway. 9
(563) 382-3140
Eye Clinic: (563) 382-2639
• Orthodontics: 202 W. Main St.
(563) 382-2525
• Rehab Services: 516 Montgomery St.
(563) 382-4770

Fayette

• Gundersen Palmer Lutheran Hospital and Clinics Fayette: 110 King St.
(563) 425-3381

Lansing

• Medical Clinic: 50 N. Fourth St.
(563) 538-4874

Postville

• Gundersen Palmer Lutheran Hospital and Clinics Postville:
111 S. Reynolds St.
(563) 864-7512

Waukon

• 120 2nd Ave. SE
Medical Clinic: (563) 568-3000
Eye Clinic: (563) 568-3378

West Union

Gundersen Palmer Lutheran Hospital and Clinics
• Hospital: 112 Jefferson St.
(563) 422-3811
• Clinic: 110 Jefferson St.
(563) 422-3817

Libby Abbas, DO, joins Decorah Clinic



Elizabeth (Libby) Abbas, DO, is now seeing patients at Gundersen Decorah Clinic. Dr. Abbas grew up in Frederika, Iowa, and graduated from Tripoli High School.

In addition to primary care services, Dr. Abbas provides obstetrics, integrative medicine, osteopathic manipulative medicine and prolotherapy, an injection technique that helps relieve pain.

In her spare time, she enjoys spending time with family, mountain biking, running with her very active Doberman, practicing and teaching yoga, and playing music with her husband, Nick.

To schedule an appointment, call (563) 382-3140.

Joelle Zeien, FNP, joins Spring Grove Clinic



Gundersen Spring Grove Clinic is excited to have family nurse practitioner Joelle Zeien, FNP, join its staff.

Joelle cares for patients of all ages – pediatrics, women's health and geriatrics. She offers wellness exams, follow-up appointments for medical conditions and visits for acute illnesses.

When she isn't working, Joelle enjoys cooking, baking, gardening and spending time with her husband and children.

To schedule an appointment, call (507) 498-3302.



love + medicine

A PERFECT PAIR

Nurse creates scavenger hunt to brighten patient's day

Shortly after meeting Eduardo Hernandez in December 2017, registered nurse Taylor Matchey sensed his boredom. Eduardo had recently been diagnosed with leukemia and was receiving inpatient care.

"Being in the hospital is not fun," Taylor says.

Whether you're an adult or a 9-year-old, like Eduardo, there are only so many things to do: "A lot of the day, you're looking at the same four walls," Taylor says.

Searching for a solution, she put pen to paper to create a game that would meet many of Eduardo's treatment requirements, such as walking daily and problem solving, yet still be fun. The result was a scavenger hunt, which has since become a staple of Eduardo's visits.

Sometimes the clues lead him to a microwave. Then to a fish tank. Then to a computer station. Regardless of where they take him, Eduardo looks forward to the opportunity to explore and search for a frisbee or other small prize he knows is waiting for him at the end of the activity.

"I have to get all the clues first," Eduardo says.

Hunt after hunt, there is always one overarching goal: "To see him smile," Taylor says. After all, it's a small way for her to return the favor.

"Eduardo is definitely someone who every nurse wants to be paired with," Taylor says. "He's constantly laughing and cracking jokes."

Thankfully, Eduardo is spending less time in the hospital as his health continues to improve. He has progressed to treatments every other week, says his dad, Jose, and has not needed inpatient care for quite some time.

"He has so much energy now," Jose says.

Eduardo and his family are hopeful that the number of treatments he needs will continue to decline, while knowing that if Eduardo does require inpatient care again, there will be a friendly face waiting for him—clues in hand.

"For kiddos with recurring illnesses, building relationships with them is so rewarding," Taylor says. "Eduardo always remembers me, and that warms my heart."

To learn more about Pediatric Cancer Care at Gundersen, call (608) 775-2385.

Baby Kameryn:

Kameryn Vian weighed just over 1 pound at birth and spent 5 ½ months in Gundersen's Neonatal Intensive Care Unit. Her mom, Mindi, cannot help but smile, knowing just how far Kameryn has come.

Overcoming the odds at 23 weeks

On June 16, 2017, Kameryn Vian came into this world without warning, weighing just 1 pound 3.8 ounces, or about the weight of four sticks of butter.

Every year, 10 to 12 percent of babies in the U.S. are born prematurely (birth before 37 completed weeks of pregnancy). Only about 1 percent are born at an extremely low birth weight like Kameryn.

"I was one scared mother," shares Melinda (Mindi) Vian of Sparta, Wis., who delivered her daughter at 23 weeks. "No one knows why our babies come early. But trust me, they are in the best hands at Gundersen," says Mindi.

24/7 care in the NICU

Gundersen Health System has a Level III Neonatal Intensive Care Unit (NICU), which means Kameryn was within arm's reach of advanced technology and an entire team of experts who are trained in rapid response protocols and evidence-based clinical guidelines to treat infants born under difficult circumstances.

"The outcomes of extremely low birth weight babies in our care are comparable to the nation's best children's hospitals," states Gundersen neonatologist and NICU medical director Kate Moen, MD, FAAP. "Of all babies born at Kameryn's age and weight, only about 6 percent survive, but for those who



KATE MOEN, MD, FAAP

have immediate access to NICUs like ours, particularly with sophisticated ventilators, survival can approach 20 percent. Yet, even under the best of circumstances, most survivors will have some degree of disability.”

During Kameryn’s five-and-a-half-month NICU stay, she required a ventilator, oxygen, IVs and a gastrostomy (G-tube); developed chronic lung disease and bleeding in her brain; had 17 blood transfusions; and underwent laser surgery to treat retinopathy of prematurity. She also needed the assistance of many pediatric subspecialists, including a cardiologist, neurologist, ophthalmologist, endocrinologist, surgeons and therapists to keep her alive.

“It was a rollercoaster ride,” says Mindi, “Yet, there was never a scary moment that I went through alone. The team involved me in every part of Kameryn’s care.”

Most impressive, according to Mindi, was the love and knowledge of the NICU team. “Many of the nurses are mothers or grandmothers. They take your child in like one of their own. There is a lot of love up there!”

On Nov. 30, 2017, after a long-awaited homecoming, Kameryn joined her big brothers Brayden and Malakai at home. “Every nurse was in our room the day we went home,” recalls Mindi. “I remember Dr. Kate saying, ‘You’ll do great, Mindi.’ I broke down and cried, thinking ‘I can’t do this without all of you.’”

Care beyond the NICU

Receiving specialized care and support did not end when Kameryn went home from the NICU. Under Gundersen’s Pediatric Medical Home model of care, Kameryn’s primary care team provides coordinated care and helps her family navigate the healthcare



system, calling on pediatric specialty services, when needed.

Among those specialty services, Kameryn sees a pediatric endocrinologist, pediatric ophthalmologist, a registered dietitian, speech therapist and has her very own care coordinator. She is also seen in Gundersen’s NICU Follow-Up Clinic.

“We see children in the NICU Follow-Up Clinic at regular intervals during their first four years of life to screen for developmental or growth-related issues associated with their prematurity,” states David Gerhard, MD, director of the NICU Follow-Up Clinic. “Our team has all of the needed pediatric experts to diagnose and treat problems early if they do arise. This specialty care will help Kameryn meet her full potential.”



DAVID GERHARD, MD

“It’s comforting to know there is always someone to answer any question I have, because they’ve been with Kameryn for so long,” Mindi shares. “The support here is wonderful.”

Now at 19 months old, Kameryn continues to make slow but steady progress, thanks to her extended care team and her biggest advocate of all—her mom Mindi.

**To learn more about the NICU,
go to gundersenhealth.org/NICU.**

THE SKINNY on the keto diet

The ketogenic or “keto” diet is very low in carbohydrates, moderate in protein and high in fat. It has developed a popular following for dramatic weight loss.

“Low carbohydrate levels with the keto diet cause the body to break down fat to use as energy in a process called ketosis,” explains registered dietitian Jessica Lind, Gundersen Nutrition Therapy.

This might sound promising in theory, but Jessica and her colleagues caution, “It’s time to ask some hard questions.”

Does it work?

Despite being around since the 1930s, when it was used as a clinical treatment for children with epilepsy, the keto diet is relatively new as a weight-loss diet. There’s little research on its long-term effects.

As with many diets, there may be significant weight lost initially. “We know that by whatever means you lose weight, it must be maintained to keep weight off,” reports Jessica. “The keto diet is not recommended for long-term use, and it’s unlikely that weight-loss could be sustained.”

How does it work?

The weight-loss mechanism is debatable, but possibilities include:

- Increased sense of feeling full from proteins and fats leads to fewer calories consumed
- It takes more energy and calories to metabolize fats and proteins
- Better quality food is eaten because it’s difficult to find keto-friendly processed foods
- It’s likely some combination of the above

Is it safe?

According to Jessica, “Putting the body into ketosis is serious and should not be done without an experienced clinician’s oversight. Risks range from organ damage (especially the kidneys) to an upset in blood sugar and cholesterol levels.”

There are ways to lose weight that are much safer and sustainable—not to mention much more enjoyable. So, go ahead and eat your pasta,” says Jessica, “in moderation, of course.”



JESSICA LIND, RD

For healthy weight-loss options, visit gundersenhealth.org/nutrition or call Gundersen Nutrition Therapy at (608) 775-3447.



NINE

screenings that can save your life

When it comes to maintaining your best possible health, it is important to stay current on your health screenings.

Jessica Everman, PA-C, Gundersen Waukon Clinic, and her colleagues at Gundersen say these nine screenings can detect health problems early and help you live a longer, healthier life:



JESSICA
EVERMAN, PA-C

1

Blood pressure:

Adults should have their blood pressure checked at least every two years.

2

Cholesterol:

Starting at age 20, a fasting cholesterol test should be done every five years.

3

Fasting blood sugar/glucose:

Most adults should have their fasting blood sugar measured every three years to screen for diabetes.

4

Mammography

(breast cancer screening): Women should discuss with their primary care provider when and how often to be screened. Most women should be screened every one or two years, starting at age 40.

5

Pap smear (cervical cancer screening):

Women ages 21 to 29, every three years; ages 30 to 65, every three to five years (five years if a human papilloma virus test is done at the same time).

6

Colonoscopy

(colorectal cancer screening): Adults ages 50 to 75 should have a colonoscopy every 10 years or an annual stool sample.

7

Bone mineral density (osteoporosis screening):

Women ages 65 and older should be screened at least once.

8

Hepatitis C:

Adults born between 1945 and 1965 are encouraged to be screened once.

9

Depression and anxiety:

Adults should be screened for depression and anxiety at every wellness exam.

Jessica also recommends that if you currently smoke or have ever smoked heavily, you should be screened yearly for lung cancer between ages 55 and 77, and men should be screened for abdominal aortic aneurysm once between ages 65 and 75.

These guidelines are recommended for a person with average health risks. Ask your primary care provider if these guidelines are right for you or call the nearest Gundersen clinic.



Alex Arneson is a high school athlete who was determined not to stay sidelined after a car crash. Gundersen's Steve Krieg is the physical therapist who made it happen.

'You would NEVER KNOW'

Alex Arneson is a standout athlete, holding positions on high school football, basketball and baseball teams.

Watching him on the field now, "you would never know he had gone through any of this," says his mother, RaeAnn Arneson.

"They had a football game last night and he led the team in tackles," says his father, Earl Arneson, during the fall season.

Alex was severely injured in a Feb. 5, 2018, car accident in rural Decorah, Iowa, on the way to school.

He came to Gundersen Health System in La Crosse by Gundersen AIR with a concussion, injured spleen, severed urethra, fractured collarbone, deflated lungs, fractured pelvis on his right side, and broken left femur, RaeAnn says.

Alex, 15, underwent surgery to repair his femur with a permanent rod and left the hospital nine days later.

"It's still a blur," RaeAnn says.

Alex returned home unable to bear weight on his right side and with a weak left leg. To learn how to rebuild his strength, the family turned to Gundersen Decorah Rehab Services, formerly Team Rehab, which joined Gundersen Health System in April.

"We had to get him back to fighting strength," RaeAnn says.

Physical therapist Steve Krieg, MPT, remembers meeting Alex while he was in a wheelchair.

"He had a pelvic fracture and a leg fracture," Steve says.

They began working together twice a week, focusing initially on improving Alex's flexibility



STEVE KRIEG, MPT

and range of motion in his left leg from a seated position.

"Right away, Steve pushed me hard," Alex says. "He was great to work with."

The volume of treatment sessions soon decreased but evolved to include a stationary bike, elliptical machine and trampoline as Alex regained his strength.

At every appointment, RaeAnn witnessed her son's progress.

"I think Steve was just as proud of him," she says. "He was easy to work with and knew how to push Alex where he needed to be."

Soon, Alex and Steve faced off on the clinic's basketball court.

"In about six months, we went from him being in a wheelchair and partial weight bearing to jumping and running," Steve says. "It was amazing to see that. It was quite miraculous."

The pair finished working together in mid-August when Alex regained strength in his left leg.

"I thought it was going to take a lot longer," Alex says.

Steve credited Alex's full recovery to his resiliency. Last fall, he played tight end and outside linebacker on Mabel-Canton (Minn.) High School's football team and this winter and spring returns to the basketball court and baseball field, where he rotates between the pitcher, catcher and shortstop positions.

"He wanted to get back to sports," Steve says. "He really impressed me."

The feelings are mutual, says RaeAnn, who added this was the family's first and only experience with physical therapy.

"It was excellent care," she says. "Hopefully we don't ever have to go back, but if we do, I want my boys to go there."

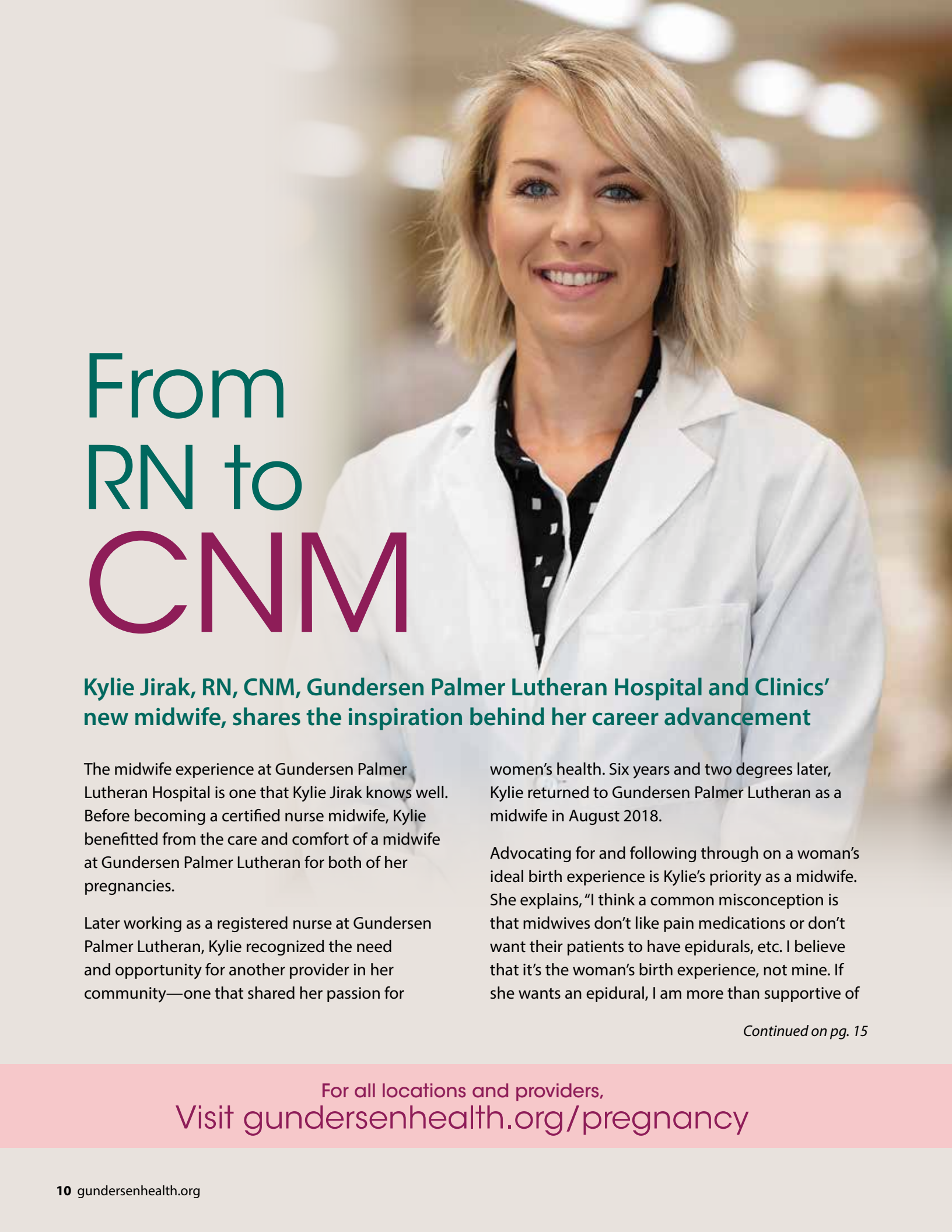
For the Decorah Rehab staff, it's about treating each patient as an individual while building a connection that stretches beyond treatment for the clinic's full range of services, including orthopaedic and post-operative rehabilitation; physical therapy for all ages; industrial rehabilitation; sports therapy; sports training and more.

"Appointments are usually longer than traditional doctor appointments, and you're working closely together, so you really get to know each other," Steve says.

Steve says he plans to attend one of Alex's games this spring, but before that, "I think I still owe him a game of one-on-one."



To learn more about Gundersen Decorah Rehab services, call (563) 382-4770 or visit gundersenhealth.org/decorah-rehab. In northeast Iowa, Gundersen offers rehab services in Decorah and Cresco and at Gundersen Palmer Lutheran West Union.



From RN to CNM

Kylie Jirak, RN, CNM, Gundersen Palmer Lutheran Hospital and Clinics' new midwife, shares the inspiration behind her career advancement

The midwife experience at Gundersen Palmer Lutheran Hospital is one that Kylie Jirak knows well. Before becoming a certified nurse midwife, Kylie benefitted from the care and comfort of a midwife at Gundersen Palmer Lutheran for both of her pregnancies.

Later working as a registered nurse at Gundersen Palmer Lutheran, Kylie recognized the need and opportunity for another provider in her community—one that shared her passion for

women's health. Six years and two degrees later, Kylie returned to Gundersen Palmer Lutheran as a midwife in August 2018.

Advocating for and following through on a woman's ideal birth experience is Kylie's priority as a midwife. She explains, "I think a common misconception is that midwives don't like pain medications or don't want their patients to have epidurals, etc. I believe that it's the woman's birth experience, not mine. If she wants an epidural, I am more than supportive of

Continued on pg. 15

For all locations and providers,
Visit gundersenhealth.org/pregnancy

Telemedicine provides access to specialists CLOSE TO HOME

Traveling to La Crosse to see a Gundersen Health System specialist can be difficult for some patients, especially when illness, distance, weather or transportation is an issue. A service called clinical telemedicine uses technology to help patients overcome these challenges.

Telemedicine uses interactive video and audio to connect patients and healthcare professionals at regional clinics and hospitals with Gundersen medical consultants in La Crosse.

Gundersen hematologist Wayne Bottner, MD, has used clinical telemedicine for more than 10 years. "I can visit with patients at any site in our system equipped with telemedicine. Hematology (the care of patients with blood disorders) is very well adapted for telemedicine. We often use it for appointments after lab work and X-rays, sparing patients a drive to La Crosse to discuss test results and treatment plans."

With telemedicine, the doctor in La Crosse and the patient at a regional site can see and interact with each other as if in person. While Dr. Bottner uses telemedicine primarily for appointments not heavily reliant on hands-on physical exams, the telemedicine cart can aid in an exam.

For example, the cart has a stethoscope so the doctor in La Crosse can listen remotely to the patient's heart, lung or bowel sounds. The camera on the telemedicine cart has remarkable clarity and elements such as a zoom feature, so the physician can get close-up views of areas of interest.

"My patients really love telemedicine. It keeps them closer to home, it works very well, and it's a wonderful way to provide care," says Dr. Bottner.

**To learn more, visit gundersenhealth.org/telemedicine.
If you're interested in using telemedicine, please talk with your Gundersen primary care provider or specialist.**



WAYNE
BOTTNER, MD



Telemedicine by the numbers

- In 2005, Gundersen launched telemedicine services.
- Telemedicine is available in 29 communities in hospitals, clinics and behavioral health sites throughout Gundersen's tri-state service area.
- As many as 140 Gundersen clinicians offer telemedicine in 43 specialties.
- Gundersen conducts about 160 telemedicine visits per month.





IN PAIN? You have options.

Chronic pain doesn't have to keep you from life's special moments or the activities you enjoy.

Gundersen works to understand and care for your pain if you're experiencing frequent headaches, or back, neck, pelvic or joint pain from a combination of factors like arthritis, aging, an old injury and genetics.

This includes examining past and current conditions, surgeries, trauma and other important factors, and working with you to develop a treatment plan to fit your needs.

"We have a large population of patients in our region who struggle with chronic pain," says Stephanie Neuman, MD, department chair, Gundersen Pain Medicine. "Fortunately, Gundersen has many options to help. These

options include referring patients to treatments like chiropractic care, dry needling and physical therapy; to helping patients manage the type and amount of medications they take; to even placing electrical devices in patients' spinal canals (spinal cord stimulators) that have taken patients from severe, debilitating pain to enjoying life again."

Since every patient's situation is unique, what works for one person may not work for another. That's why Gundersen offers a variety of treatment options that can be used on their own or with others for maximum relief. Patients may also ask their provider about specific treatment options they have heard of and want to try.

"One of my patients was struggling with chronic neck pain," shares Stephen Wissink, MD, Gundersen Internal Medicine. "She had worked with physical therapy, chiropractic care, massage, physical



STEPHANIE NEUMAN, MD

medicine and rehab and the injection clinic. She had received good relief with most of these therapies contributing positively but was still struggling. She had heard from a friend about dry needling, and she thought it might help her. I encouraged her to make an appointment and the result has been an additional level of relief. Today, she has intermittent neck pain, but reports that most days it is quite well managed."

"Patients really need to be open to the full spectrum of treatment options and be willing to work with their doctor to manage difficult pain problems," Dr. Wissink says. "We often need to approach a difficult pain problem from multiple angles and use a combination of treatments to achieve reasonable pain control."



STEPHEN
WISSINK, MD

If you're struggling with chronic pain, visit gundersenhealth.org/pain-treatment for more information, including a short quiz to help you find the best treatment options for easing your pain. You'll find helpful information on your pain treatment options. This includes information about Gundersen:

- **Primary Care:** This is the best place to begin. Your primary care provider will do an exam, review your medical history and recommend a treatment plan, which may include one or more options below.
- **Pain Medicine:** Gundersen specialists use a variety of treatments, including injections; nerve burning procedures (radiofrequency ablation); medication management; and referrals to non-medication and non-procedural options, to support your pain treatment plan.
- **Physical Therapy:** This drug-free care option treats the source of your pain using exercise, postural changes or body mechanics.
- **Integrative Medicine:** Acupuncture, massage therapy, essential oils and more are available for those seeking relief from pain who desire noninvasive, drugless and evidence-based treatments that can accompany more traditional forms of healthcare.
- **Chiropractic Care:** This nonsurgical, drugless form of healthcare seeks to enhance health and manage back and neck pain through manual manipulation techniques and other therapies.
- **Physical Medicine & Rehabilitation:** This specialty helps you find relief with noninvasive techniques and often oversees referrals to other specialists to help manage pain and increase functional independence.

Opioids: A system approach

With opioid use and abuse continuing to make headlines, Gundersen is addressing this national concern with our providers and in our policies to be sure care balances patient needs with responsible practice.

Gundersen providers work with each patient to determine whether opioids are an option for pain treatment or whether other options – from a combination of anti-inflammatory medication, like ibuprofen and acetaminophen, to non-medication alternatives, like essential oils and massage therapy to injections– can provide pain relief.





A healthy body image STARTS WITH YOU

How do you see yourself when you look in the mirror?
Are you **content** or **critical**?



SARAH LONG, PhD

Gundersen Health System pediatric psychologist Sarah Long, PhD, says, “From a very young age, children pick up on how parents talk about their own bodies and the bodies of other people. No one is more influential to children than their parents.”

When you teach your kids happiness comes from being healthy, not having a perfect body, they will carry those attitudes with them throughout their life.

Dr. Long shares this advice:

Watch what you say and what others say. You control what comes out of your mouth, but you cannot control what others say. When you hear something you don’t like, turn it into a conversation at home. For example, “Our neighbor said something today I think we should discuss...”

Be critical viewers of social media. Every day, we are inundated with pictures and videos of the culturally ideal body type. Parents, along with their kids, should

be skeptical viewers of advertisers and social media, recognizing that it is not realistic to look like celebrities.

Build confidence. Telling your children that they are great does not make them believe it or feel it. Dr. Long says the best way to build confidence is to pick up a new hobby—preferably something that your child enjoys but might need to practice. Over time, they can look back and see how far they’ve come. In the process, this takes the focus off aspects of the body that your child may dislike.

Empathize with them. When talking to teenagers, acknowledge that you understand how they are feeling. Provide positive feedback and focus on what their bodies can do, not how they look.

“Some amount of body dissatisfaction, particularly in puberty, is not unusual. However, it is important to seek help when problems with body image result in changes in your child’s behavior (e.g. excessive exercise, restrictive eating) or changes in their daily activities (e.g. not wanting to go to school or avoiding an extracurricular activity),” states Dr. Long.

For more advice, talk to your child’s primary care provider.



New Palmer midwife continued from pg. 10

that. If she doesn't want any medications, I support that as well."

From her own pregnancies to her new role as a midwife, Kylie is excited to experience the miracle of childbirth alongside her patients: "For me, one of the most rewarding things is watching families grow and getting to be a part of that."

Kylie joins the Gundersen Palmer Lutheran prenatal team alongside Mordechai Lederman, DO; Geralyn Zeurcher, MD; and Kristen Larter, NP.

In northeast Iowa, Gundersen Health System also provides prenatal care in Calmar, Decorah, Fayette, Postville, Waukon and West Union, with deliveries available in Decorah, Waukon and West Union.

What is a midwife?

Certified nurse midwives are registered nurses who have completed advanced education in the care of women during pregnancy and childbirth. They believe in personalized, safe birthing experiences, as well as ongoing preventive care.

Certified nurse midwives at Gundersen Health System provide...

- Women's health services
- Family planning
- Preconception counseling
- Prenatal care
- Labor and delivery
- Postpartum care
- Lactation support

Keep an EYE on your health in 2019

Overall health includes your eyes.
Add "annual eye exam" to your 2019 resolution list to...

- Check your overall eye health
- Update your prescription
- Start the new year in style with a new set of frames

Schedule your appointment today to receive quality care at a Gundersen eye clinic close to home.

Iowa locations:

Decorah Eye Clinic (563) 382-2639
Waukon Eye Clinic (563) 568-3378

For a complete listing of locations and for more information,
visit gundersenhealth.org/eye-care.

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prior to any change in medical treatment, exercise routine or diet.

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