

To Your Health!

By Judy Hargis, P.A., and Audeen Wagner



Who is my Primary Care Provider?

Healthcare in this country has changed dramatically over the last few decades. There are many challenges for patients trying to navigate the system. Gone are the days of the General Practitioner who took care of several generations within a family, often owned his/her own practice and remained in the community for many years. A visit to the "doctor" today can be confusing and overwhelming. Changes in clinical practice have affected the continuity that we

once relied on. Many factors have been responsible for these changes. They include higher healthcare costs, lower reimbursement for services provided, more administrative and productivity demands on providers. Our society is more mobile and there is more Provider turnover within clinics. Statistics show that fewer medical school graduates are choosing to go into primary care, opting for specialty medicine.

Many clinics have multiple partners and it can be frustrating for individuals seeking continuity with their chosen provider. Health insurance plans can "muddy the water" even more. Employers often change health plans and that change can mean being assigned to a new contracted clinic or provider.

We all need to educate ourselves and learn how to navigate the healthcare system. It is important that we are armed with knowledge that will help us to be consumers of the most cost effective, quality healthcare possible. This column will take a look at healthcare providers and their roles in providing primary care to you. The next several columns will provide information on understanding health insurance options, ways to reduce our health costs and an introduction to integrative holistic medicine.

Let's review who our providers are:

Physicians: We all know what a medical doctor is, but do you know what an osteopathic physician (DO) is? In many ways MDs and DOs are alike. Their undergraduate and medical school training are similar. They both participate in internships and residency programs after completing medical school. Both choose to practice in specialty areas like pediatrics, orthopedics, surgery, OB/GYN, etc. They pass comparable examinations to obtain state licenses. The one difference is that DOs receive additional training in your body's interconnected system of nerves, muscles and bones. There is a strong emphasis on pre-

ventive health and treating the "whole" person.

Mid-level practitioners: This includes Nurse practitioners (NP), physician assistants (PA-C), and certified Nurse Midwives (CNM);

- Nurse practitioners are registered nurses who are prepared through advanced education and clinical training to provide a wide range of preventive and acute healthcare services to individuals of all ages. NPs can take health histories, provide physical examinations, diagnose and treat many common and chronic medical problems, interpret laboratory results and x-rays, perform minor procedures and prescribe medications. Their training places a strong emphasis on preventive care. They can practice independently or in collaboration with a physician. Almost all NPs are trained at a master's level.

- Physician Assistants are healthcare providers licensed to practice medicine with physician supervision. Comprehensive responsibilities include physical exams, diagnosis and treatment of acute and chronic medical problems, interpreting lab results and x-rays, casting, suturing and assisting in surgery. A typical PA applicant has a bachelors degree and four years experience in a health profession such as nursing, Paramedic, respiratory therapy, physical therapy, medical corpmen, and sometimes pharmacist/pharm-D etc. PAs must pass a national certification exam to obtain a state license and sit for a re-certification exam every 6 years, while logging 100 hours of CME (continuing medical education) every two years. Studies have shown that PAs and NPs have demonstrated their clinical effectiveness both in terms of quality of care and acceptance.

- Certified Nurse Midwife (CNM) provide comprehensive prenatal care, delivery and postpartum care. They work in a collaborative role with OB/GYN physicians and consult with or refer to other healthcare providers. Numerous studies over the last 20 to 30 years have documented the ability of CNMs to independently manage about 80 percent of all prenatal care, labor, delivery and postpartum care and 90 percent of gynecologic care for women of all ages.

All members of the healthcare team are valuable. They often work in clinics together and in collaboration professionally. In light of the primary care shortage we are facing, this group of healthcare providers will continue to make a significant difference in accessibility to quality healthcare. For further information on these professions you can access the following web sites: www.ama-assn.org, www.osteopathic.org, www.acnpweb.org, www.aapa.org, www.acnm.org.

West Nile Virus reached Oregon in 2006

Mosquito season is approaching and public health officials are reminding the public that mosquitoes can transmit a number of diseases, including West Nile Virus (WNV). In 2006, the first year for WNV in Oregon, Clackamas County had no cases, Multnomah

County had five positive birds, and Washington County had one positive bird. Clark County Washington had one human case.

The spread of West Nile virus is unpredictable; however, trends throughout the country have shown a significant in-

crease of cases in the second year of the virus. The following is an overview of West Nile Virus along with some prevention tips.

What is WNV?

West Nile Virus is carried by infected mosquitoes. It can cause serious illness in some people and horses. Mosquitoes become infected when they feed on infected birds of the Corvid family, such as ravens, crows, jays and magpies. The

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