

# GOODHEALTH™

A HEALTHCARE JOURNAL FROM SANSUM CLINIC • ISSUE 27 • SPRING 2021



**HERO HOSPITALISTS  
COMPREHENSIVE  
COVID-19 CARE**

**PATIENT-CENTRIC  
WEIGHT-LOSS SUPPORT**

**CORNEA SPECIALIST  
EXPERT EYE CARE**

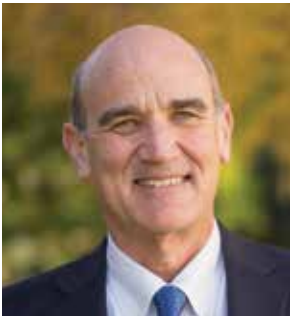
**ADVANCEMENTS  
IN UROLOGY**

SANSUM CLINIC



— YEARS OF —  
MEDICAL EXCELLENCE





## Dear Patients,

Delivering high-quality healthcare during a pandemic has come with some significant challenges. I am filled with pride for how our team has persevered. They are truly committed to our patients and the community.

Last March, our IT team launched a comprehensive Telehealth program, which normally would have taken a few months, in a matter of days. Our Urgent Care team established car-based COVID-19 testing so patients could be tested safely without

having to come into our Clinic. Our operations and clinical staff teamed up to design a COVID-19 vaccine program—with the need for repeat shots, uncertain supplies and the requirement to observe people and keep them apart all at the same time—with just a few days' notice, the week before Christmas. From the moment this all started, our medical director, Dr. Marjorie Newman, has played an invaluable role in translating guidance from the Santa Barbara County Public Health Department into safe healthcare practices for the more than 118,509 individual patients who visited us in 2020.

There are so many people who have made it possible to continue caring for our patients at this time. Our ICU doctors and hospitalists, taking care of the sickest of the sick. Our Urgent Care staff, who have had hundreds of patients with COVID-19 in their midst. All of our patient services representatives, receptionists, MAs and RNs, who are learning alongside the doctors how to practice medicine in a pandemic. The people in our Finance Department who managed us through a huge storm. The Patient Access, MyChart Help Desk and COVID-19 Hotline teams who have responded to thousands and thousands of patients wanting to know when it is their turn to get a vaccination. The Radiology crew, Foothill Surgery Center, GI lab folks, and all those showing up every day in person or virtually to make sure patients can access the healthcare they need.

Every one of our people deserve appreciation for doing important jobs in normal times, and incredibly important jobs in these times. When you come to us for care, I hope you will join me in thanking the staff and providers you encounter, for all that they have done and all that they will do to get us through this time. I couldn't imagine a better group with whom to endure this pandemic, and I'm honored to be working alongside all of them.

I'd also like to thank the many people who have made generous contributions to our Pandemic Relief Fund. You have made a significant impact in our ability to meet the healthcare needs of our patients over the last year.

It seems poignant that in our 100th year in existence, we are still facing challenges similar to those our founders faced—a runaway contagious disease, as this Clinic started a few years after the Great Influenza Pandemic. Our predecessors had to practice through earthquakes, wars and depressions, but I think they would admire how we have responded to this infectious catastrophe.

Please know, we are here for you and we continue to smile under our masks.

Sincerely,

Kurt N. Ransohoff, MD, FACP  
CEO and Chief Medical Officer

## GOOD HEALTH

A free publication from  
Sansum Clinic published  
three times a year

ISSUE 27 • SPRING 2021

Sansum Clinic's mission is to provide an excellent healthcare experience, recognizing our first priority is the patients we serve.

Sansum Clinic is accredited by the  
Institute for Medical Quality

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Chief Medical Officer*

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# WE CARE Team Award

In November of 2020, Sansum Clinic’s Radiology Department received the first WE CARE Team Award. Karen Handy, MPH, Vice President of Operations, presented the trophy to Director of Imaging Services Matt McGill, who received it flanked by some members of his staff. This department, which operates across 6 different Sansum Clinic locations, was chosen for its consistent improvement of patient satisfaction scores, as well as excellent teamwork and group problem solving under challenging circumstances. “WE CARE truly thrives when it becomes more than just individual actions. To be truly effective, WE CARE must be a team sport,” remarked Handy. She praised the team’s resilience, creativity and selflessness.



Maricela Hurtado Salinas, Clinical Resource RN, was the first Sansum Clinic healthcare worker to receive COVID-19 vaccine, administered by Ian McLelland, BSN, RN, Quality Management & Infection Control Manager.

“By receiving the vaccine first, we can show the community that it is safe and easy, and it’s important to get one,” says Salinas.

## Patients Express Thanks for Ease of COVID-19 Vaccination Process

“We got our second COVID shot today and have never seen a more friendly nor efficient business operation. The whole place was humming like a happy bee. Thank you for the wonderful services Sansum supplies everyone on a daily basis. We are indeed fortunate to live in this community near Sansum.”

“My compliments to the very well organized vaccine event. The Sansum staff was extremely kind and professional. The ‘patients’ were all very grateful and smiling underneath their masks, it was almost a festive atmosphere, surely rarely seen in a clinic. Thank you, Sansum!”

“We arrived at the vaccination site 10 minutes early and went into line for our scheduled 10:30 AM vaccinations. The staff had everything in good order and were courteous and helpful. Shots went like clockwork. We were in our car at 10:55 AM! Everyone gets an A+.”



Over the last year, the Radiology Department shepherded a new breast health program, and achieved accreditation from the American College of Radiology. Additionally, when the demand for imaging services increased, the department expanded their hours to create early, late and Saturday appointments. McGill commented that the award is especially meaningful because it represents recognition of his staff’s great effort and patient-centric focus. “Whenever there is a problem, this group comes to me with solutions. I am incredibly proud of this team,” he said.

WE CARE is a simple acronym that guides how we interact with patients, and each other. It’s a reminder that everyone at Sansum Clinic agrees to welcome others warmly and sincerely, to engage wholeheartedly with those we come in contact with, to communicate the plan effectively, to ask questions to deepen our understanding, to reassure that we have others’ best interests in mind, and to exit interactions with appreciation and thanks. 🌻

## GOODHEALTH

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From left to right. Front row: Dr. Anh Lam, Dr. Diane Nguyen, Dr. Casey Rives, Dr. Lindsay Katona, Dr. Kyle Lemon, Dr. Jeff Yim.  
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This magazine is not intended to provide medical care. For specific medical advice, diagnoses, and treatment, consult your doctor. All information in this publication is for educational purposes only.

Dr. Sansum is first physician in U.S. to both develop **lifesaving insulin** and successfully treat a diabetic patient. Santa Barbara becomes a medical destination for diabetics nationwide.

Santa Barbara Medical Clinic expands with a 3,200 square foot **Surgical Wing**. Among 3 new specialists is **Dr. Lawrence Eder**, one of the first board-certified OB/GYNs in the U.S.

**Sansum Medical Clinic** opens as a private clinic with a focus on diabetes and related metabolic disease, staffing six physicians.

Santa Barbara Medical Clinic is one of **earliest multi-specialty practices** in the country. **Chapala Street building** is annexed to provide additional 1,538 square feet.

Famed architect **Carleton Winslow** designs a clinic remodel in the Italian Venetian style **adding second story** and 4,200 square feet.

**New Sansum Medical Clinic** built across from **Cottage Hospital** to treat patients who don't require hospitalization with latest research and medical advances.

Santa Barbara Medical Clinic physicians publish articles in **more than 30 scientific and medical journals** in the Clinic's first 10 years.

Founder **Dr. Rexwald Brown** is 1 of 11 physicians nationwide to serve on **FDR's Medical Advisory Board** for the Committee on Economic Security.

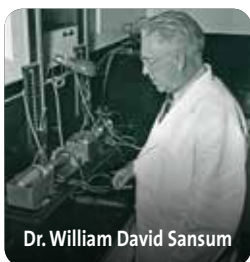
The **endocrine research** of Sansum Clinic's **Dr. Alfred Koehler** – years ahead of its time – shows relationship between cholesterol and arteriosclerosis.

**Santa Barbara Medical Clinic** doctors are called to **military service**. Remaining staff works overtime to handle patient load in town, as well as helping with military personnel at Marine air base.

Non-profit **Sansum Medical Research Foundation** is established for full-time research; Clinic doctors desiring to keep a connection with research serve on the board.

**Dr. Sansum** dies. Six physicians buy the clinic from the Sansum estate and continue as a partnership in his name.

To meet the needs of a post-war growing community, the clinic staffs **20 physicians**. Sansum Medical Clinic is remodeled and expanded with a **9,000 square feet** addition.



Dr. William David Sansum

Sansum Medical Clinic brings in more specialists, becoming a **diversified multi-specialist group**.

**Santa Barbara Medical Clinic** opens. Founder **Dr. Rexwald Brown** believes a team approach could provide better healthcare more affordably by pooling resources, skills and costs - a novel premise at the time.

**Dr. William David Sansum** recruited to Santa Barbara to head **Potter Metabolic Clinic**, treating diabetes and metabolic disease (gout, nephritis).

**Carnegie Foundation** funds the move of the **Potter Metabolic Clinic** to Santa Barbara.



## Sansum Clinic, founded in 1921, is one of the oldest non-profit outpatient clinics in California.

Located in Santa Barbara, Sansum Clinic is the largest independent non-profit outpatient healthcare organization between Los Angeles and the San Francisco Bay Area.

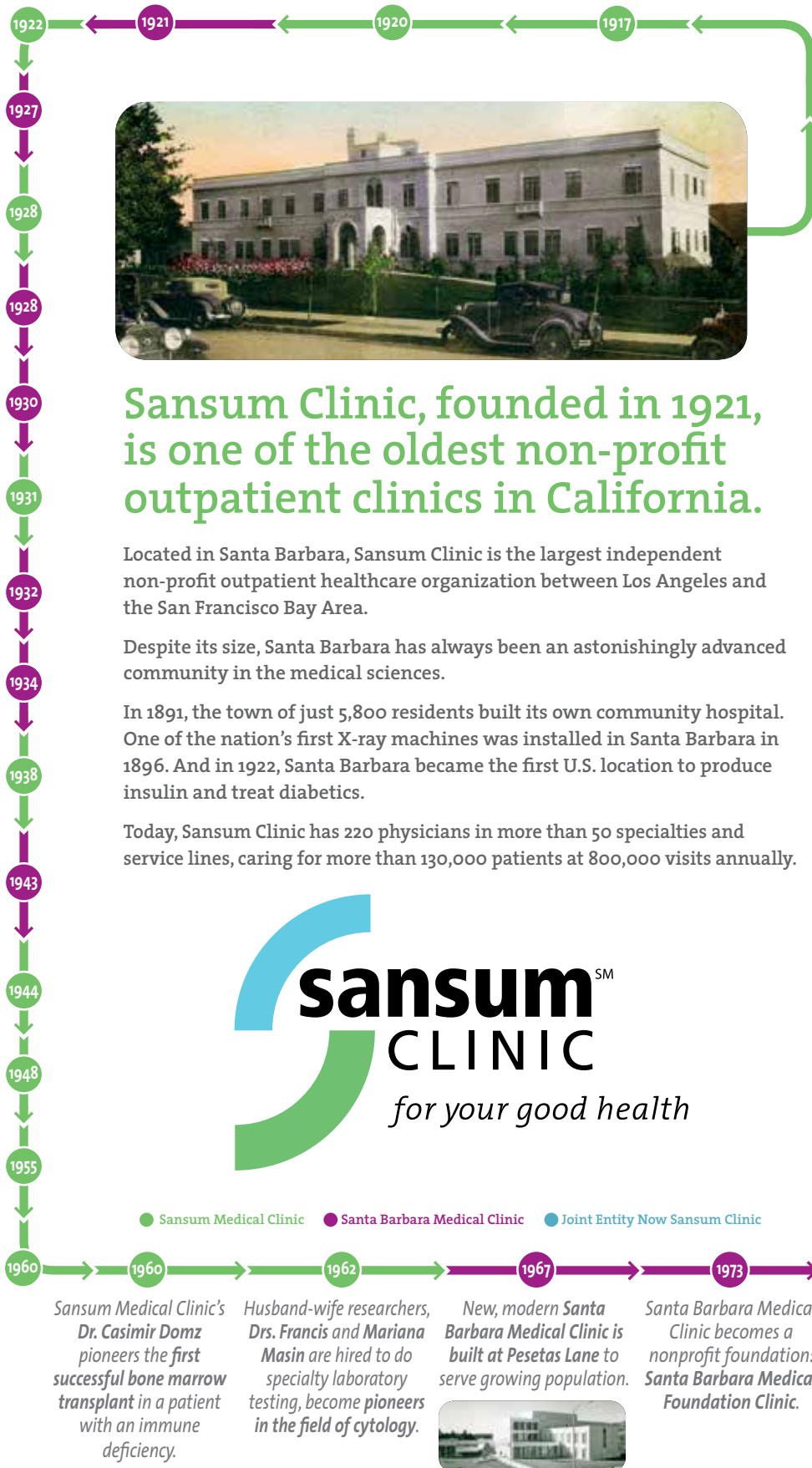
Despite its size, Santa Barbara has always been an astonishingly advanced community in the medical sciences.

In 1891, the town of just 5,800 residents built its own community hospital. One of the nation's first X-ray machines was installed in Santa Barbara in 1896. And in 1922, Santa Barbara became the first U.S. location to produce insulin and treat diabetics.

Today, Sansum Clinic has 220 physicians in more than 50 specialties and service lines, caring for more than 130,000 patients at 800,000 visits annually.



● Sansum Medical Clinic ● Santa Barbara Medical Clinic ● Joint Entity Now Sansum Clinic



Sansum Medical Clinic's **Dr. Casimir Domz** pioneers the **first successful bone marrow transplant** in a patient with an immune deficiency.

Husband-wife researchers, **Drs. Francis and Mariana Masin** are hired to do specialty laboratory testing, become pioneers in the field of cytology.

New, modern **Santa Barbara Medical Clinic** is built at **Pesetas Lane** to serve growing population.



**Santa Barbara Medical Clinic** becomes a nonprofit foundation: **Santa Barbara Medical Foundation Clinic**.

Timeline graphic by Walters Group



**Ridley-Tree Cancer Center**  
at Sansum Clinic

Sansum Clinic has earned state and national recognition for medical quality, including **Elite Status** from California Association of Physician Groups.

**Sansum Clinic Medical and Surgical Center and Sansum Clinic Elings Eye Center opens on Foothill Road.** Foothill Surgery Center at Sansum Clinic is fully-accredited state-of-the-art outpatient surgery.

**Cancer Center of Santa Barbara's physicians and staff merge with Sansum Clinic** to advance the level of cancer care in the community.

Sansum Clinic announces accreditation of its new **Echocardiography Laboratory**, the first in Santa Barbara County.

Sansum Clinic transitions from paper charts to **electronic health records**.

Philanthropist **Leatrice Luria** supports the work at Sansum Clinic by funding two state-of-the-art **digital mammography machines**.

Impressed with Sansum Clinic's physicians, philanthropist **Virgil Elings** funds colonoscopy screenings for people without insurance in a community outreach program, collaborating with **Santa Barbara Neighborhood Clinics**.

Name is shortened to less cumbersome "**Sansum Clinic**"—in keeping with the names of similar institutions such as the Mayo Clinic or Cleveland Clinic.

**Santa Barbara Medical Foundation Clinic and Sansum Medical Clinic merge** and is renamed Sansum-Santa Barbara Medical Foundation Clinic.

Sansum Medical Clinic draws patients from **every state in the union** and more than 20 foreign countries.

Santa Barbara Medical Foundation Clinic Internist **Dr. Erno Daniel** becomes one of the first U.S. physicians certified in the specialty **Geriatric Medicine**.

Sansum Medical Clinic becomes one of the first clinics in the nation to acquire a **color flow doppler electrocardiogram machine** to diagnose heart disease.

Santa Barbara Medical Foundation Clinic establishes **Goleta office**.

Several hundred clients sign on for Sansum Clinic's newly-launched "**Weight Control for Life**"—a medically-supervised diet program.

**Lompoc branch** of Santa Barbara Medical Foundation Clinic opens.

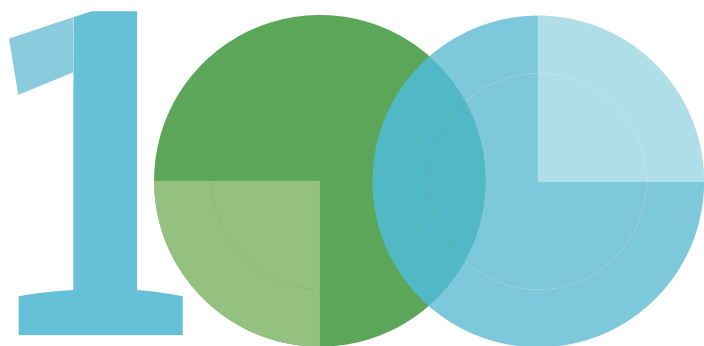
To meet the health needs of patients throughout the county, **Santa Barbara Medical Foundation Clinic expands with satellite clinics**. Carpinteria branch opens.

Sansum Clinic leadership, physicians, and staff successfully navigate **COVID-19 pandemic** to care for more than **100,000 individual patients** in person and via Telehealth.

Sansum Clinic and Cancer Foundation of Santa Barbara join forces in partnership to create the **Ridley-Tree Cancer Center** at Sansum Clinic, providing world class services and treatment.



Sansum Clinic celebrates  
**100 years of medical excellence**



— YEARS OF —  
**MEDICAL EXCELLENCE**



1976

With 50 physicians on staff, Sansum Medical Clinic outgrows space. A new facility is built on Pueblo Street.

1979

Santa Barbara Medical Foundation Clinic is certified as a Health Maintenance Organization (HMO).

1980

Grateful patient **Edward A. Rykenboer** makes \$1.6 million bequest, which is used to construct new **Rykenboer Pavilion** wing at Pesetas Lane.

1981

Undersea medicine specialist **Dr. Paul Linaweaver** and **Dr. Hugh Greer** develop one of the first **Diving Medicine Departments**, operating a hyperbaric decompression chamber.

1981

# A Lifetime of Compassionate Care

## Linda Silvestri Reflects on Sixty Years of Life-Saving Treatment from Sansum Clinic

ED BAUM

The year was 1957. School was in session for Carpinteria fourth graders. The kids followed the rules: get to class on time, pay attention, raise your hand if you would like to speak, no bathroom breaks until recess. It was a time for learning new things and making new friends. Students were having an exciting and joyful day. Except for one little girl who was uncontrollably wetting her pants at her school desk...again. Though it had yet to be diagnosed, nine-year-old Linda had type 1 diabetes.

“I tried to hide my accidents, drying it with my sweater because the shame and humiliation of frequently losing bladder control at that age was crushing,” Linda Silvestri recalls. “But I think it is important to share those unpleasant memories now because it may help parents and teachers recognize the early signs of this disease in children.”

Early detection and treatment of diabetes can decrease the risk of developing the complications of diabetes. The seventy-two year-old Santa Barbara great-grandmother remembers other symptoms from her childhood. She was constantly sleepy and took naps often. Her body felt fatigued. Along with fatigue and frequent urination, common symptoms of new-onset type 1 diabetes in children can include increased hunger and thirst, blurry vision, and weight loss.

One day as her mother was helping her get dressed, young Linda keeled over and went into a coma. An ambulance took her to Santa Barbara County General Hospital where tests revealed she had type 1 diabetes. She was transferred to Cottage Hospital where she stayed for a month. “It was really hard for me,” she says. “I was the only patient in the pediatric ward. It was so lonely.”

Thanks to more than sixty years of ongoing treatment and care from Sansum Clinic medical professionals for her disease, Ms. Silvestri has enjoyed a fulfilling and productive life. She worked for the Santa Barbara News-Press for 34 years as a linotype operator and retail ad builder. She is now retired and lives independently, staying active with daily walks and occasional Pilates classes. “I am so grateful for the care I have received from the people at Sansum Clinic over my entire life,” she says. “I credit them for the quality of life right here and now that I am living.”

## Comprehensive Professional Care Provides Decades of Wellbeing

Previously known as juvenile diabetes, type 1 diabetes is a condition where the pancreas produces very little or no insulin. Insulin is a hormone required for the body to use blood sugar for energy. Without insulin, blood sugar (also known as blood glucose) builds up in the bloodstream where it causes damaging symptoms and complications. It is usually diagnosed in children, teens and young adults, but it can develop at any age. Approximately five to ten percent of people with diabetes have type 1. The cause is believed to involve a combination of genetic and environmental factors. Treatment with insulin, usually given by injection, is required for survival.

When Ms. Silvestri was a child undergoing treatment for the disease, her doctor was Percy Grey, who had previously worked with William Sansum, MD. Dr. Sansum pioneered research to formulate artificial insulin, along with Canadian physician Sir Frederick Grant Banting and others. When Dr. Sansum moved to Santa Barbara in 1920 as a specialist in diabetes, it was a fatal disease. He founded Sansum Medical Clinic in 1921. In 1922 Dr. Sansum administered the first doses of insulin produced in the United States. Today 7.4 million Americans, including Linda Silvestri, rely on insulin to sustain their lives.

For the past twenty years, Ms. Silvestri has received treatment from Rosanna Petronella, PA-C, CDE. Ms. Petronella joined the Sansum Clinic staff in 1983. She is a certified physician assistant and certified diabetes educator who trained at University of Texas Medical Branch in Galveston. “I love Rosanna and I trust her completely,” Silvestri says. “I call her Saint Rosanna. She is compassionate, caring, and professional. She analyzes the numbers that represent my blood sugar levels and guides me on exactly how much insulin I need. She is so kind, and that is very important to me.”

Ms. Silvestri’s appointments with Ms. Petronella occur every three months and include analysis of blood tests that are performed at Pacific Diagnostic Laboratories in Santa Barbara, as well as evaluation of readings from a medical sensor that Linda wears on her arm. The sensor, called the FreeStyle Libre, measures the glucose concentration in her interstitial fluid, which is a thin layer of fluid that surrounds the body’s cells.

Close monitoring of glucose levels is critical for diabetes patients. Dangerously high blood sugar (hyperglycemia) or dangerously low blood sugar (hypoglycemia) can lead to a diabetic coma, as Linda experienced as a young child.

“Previously, I had to prick my finger many times a day to draw blood for a home test of my blood sugar levels,” Silvestri explains. “The test results help me determine how much insulin I should inject. My fingertips were always in bad shape because of constantly pricking them with needles to get blood. I love the Libre sensor because it frees me from that painful procedure and makes it so much easier to test my blood glucose levels throughout the day. I wear a small disc on my arm that I change every two weeks. Any time I want to know my blood sugar levels, I hold the Libre sensor up to the disc.” Ms. Petronella developed a scale that helps Ms. Silvestri accurately calculate how much insulin she should take, based on analysis of metrics from the Libre sensor and Linda’s personal medical history.



Linda Silvestri

Ms. Silvestri explains that when she was younger, diabetic patients only had their blood sugar levels tested when they went to a medical lab. “With the arrival of home tests, patients like me can see how our blood sugar fluctuates,” she says. “Because of the variability, I take a combination of long-acting insulin and quick insulin. Long-acting therapies mimic the insulin levels that a typical healthy body has. A normal body produces additional insulin when a person eats carbohydrates. But mine doesn’t. So I give myself quick insulin to cover the meal.”

Gerri French, MS, RDN, CDCES also provides care for Ms. Silvestri. Ms. French is a clinical dietitian, culinary nutritionist, diabetes educator, and cooking instructor. She has worked with Sansum Clinic since 2002. “There is a link between diet and diabetes,” Silvestri says. “I see Gerri French as a patient and I also attend her nutrition education classes. She is very practical and realistic in the way she provides information about what our bodies need. Gerri teaches us about eating whole, real foods that are not processed. She helps us understand how to count our carbohydrates, which is important for diabetic patients because carbs break down into sugar, which enters the blood. And Gerri doesn’t merely tell people about a healthy diet. She lives what she teaches.”

Linda believes one of the reasons Sansum Clinic functions so well is collaboration among caregivers. “Gerri French, Rosanna Petronella and other medical experts can easily

share information about patients like me to get a complete picture of our condition, our history, medications, and more,” she says. “Various specialists can access my records as well as the notes from other professionals so pertinent information is always in the right hands. I also appreciate the after-visit summary I receive. When I get home after a medical visit, it is so helpful to have a written description of what transpired at the appointment.”

Ms. Silvestri values the medical services she has received from Sansum Clinic over the course of her life. She shares some advice. “Sansum Clinic provides something vital in our community that we can be a part of if we choose,” she says. “Everyone should have a physician that they have a close relationship with. People may think they won’t need it. But if you have a crisis, you can call your physician and be confident that they know your medical history so they can provide the help you need. The professionals at Sansum Clinic have saved my life more than once. And so I’m still here. I am medically stable, capable of living independently, and able to enjoy fulfilling activities with family and friends. Sansum Clinic has everything to help us with our lives, if we want to take the help.” 🌻

*Linda Silvestri is a native of Santa Barbara. She enjoys walks downtown and spending time with her daughter, granddaughter and great-grandson.*

# Finding Fulfillment in Eye Care

**Dr. Kirsten Wagner, Cornea Specialist**

Ophthalmologist Kirsten Wagner, MD discovered how fulfilling her field could be while shadowing a community physician in the small Midwestern town of Springfield, Ohio, home of Wittenberg University where she attended as an undergraduate. The private practice ophthalmologists took her under their wing and introduced her to every aspect of patient eye care, from the operating room to the office business. The experience was the springboard to her becoming a fellowship-trained and board-certified cornea specialist, joining Sansum Clinic's Ophthalmology Department team alongside five other physicians, each with unique training. "I wanted to be in a place with colleagues to collaborate with, to ask questions and get opinions on more difficult cases," remarks Dr. Wagner. "I liked Sansum Clinic's focus on patient care and putting patients first. With our wide network of doctors, it's easy to coordinate care between the specialties." Dr. Wagner felt her fellow physicians approached patient care with a similar mindset, recommending and diagnosing as if the patient were a family member or friend, and educating and explaining to make the patient feel that is the frame of reference.

Dr. Wagner earned her medical degree from Georgetown University School of Medicine. Her third-year clinical rotation in ophthalmology solidified her interest in the field. "I loved being able to see patients in clinic and then take them to surgery and fix something and follow them after," she comments. Dr. Wagner continued her medical education with an ophthalmology residency, where she trained in cataract surgery and in diagnosing and treating common eye conditions, using the latest technology as well as cutting-edge research. She earned Chief Resident status at MedStar Georgetown University Hospital and the Washington National Eye Center (WNEC). The diversity of healthcare organizations within Washington, DC provided a wide range of clinical experiences. Rotations through county hospitals, military hospitals, community clinics, the VA system and the National Eye Institute offered quite unique and varied learning opportunities. She then went on to complete a cornea and external eye disease fellowship at Wake Forest Baptist Health University Medical Center in North Carolina. This additional year of surgical training allowed Dr. Wagner to specialize in medical and surgical care of corneal diseases. Being the only other large academic center for hundreds of miles managing complex eye conditions, Wake Forest proved to be an excellent training ground due to a large



number of high acuity patients seen there. "Volume of patients with that pathology is most beneficial in a fellowship," says Dr. Wagner. "Studying the procedures gives you a baseline of knowledge, but it's really the repetition, and doing it with mentors like the amazing ones I had that makes you most proficient at the end."

Cornea specialists can detect and diagnose particular vision problems that are more complex than common eye conditions. Patients with eye issues that involve the cornea such as corneal ulcers/infections, corneal scarring, corneal dystrophies, and more complicated corneal conditions. Subspecialty training in corneal diseases is critically important for patients since the cornea is a quite vulnerable area of the eye, providing most of its focusing ability. Some of the surgeries Dr. Wagner performs include: full and partial thickness corneal transplants, refractive surgery such as LASIK and other laser vision correction, laser-



assisted cataract surgery and complex cataract surgery. One type of partial thickness corneal transplant called DMEK uses a donor tissue graft that is placed into the eye. “The advantage of this procedure is there is less risk of rejection to the patient, and the patient is less dependent on glasses after DMEK versus the other types of partial thickness corneal transplants,” explains Dr. Wagner. “It was great to be able to train in all the different techniques, old and new, and to be comfortable with both. “



Dr. Kirsten Wagner performs LASIK eye surgery at the Elings Eye Center at Sansum Clinic

Volunteering abroad has been a rewarding part of Dr. Wagner’s life since her first international trip to South Africa as a young college student. She traveled with a professor to the tiny country of Lesotho, whose population is stricken due to the HIV-AIDS epidemic. She worked to help children who lost parents to the disease and shadowed a pediatrician at an HIV clinic which sparked her interest in international medicine. Medical brigades to Honduras during residency and fellowship pointed up the

Sansum Clinic LASIK Eye Care offers patients increased freedom from glasses and contacts using LASIK surgery with Intralase®, the most-advanced laser-assisted vision correction technology available. This painless, outpatient procedure performed by fellowship-trained cornea specialist Dr. Kirsten Wagner takes less than 30 minutes and reduces the refractive errors caused by nearsightedness, farsightedness and/or astigmatism. To learn more about whether you are a good candidate for LASIK, call us at (805) 681-8951 or visit [www.lasik.sansumclinic.org](http://www.lasik.sansumclinic.org).

**Sansum Clinic LASIK Eye Care at Elings Eye Center  
4151 Foothill Road Building B Santa Barbara CA 93110**

pronounced health disparity in the developing world. An even greater takeaway from the experience, says Dr. Wagner, was the appreciation from patients grateful to receive care in places where the numbers of medical needs often exceeds the number of doctors there to provide it. “It felt great to offer an extra set of hands, to have the skills set needed to help the hardworking Honduran ophthalmologists,” shared Dr. Wagner.

Whether overseas or here in Santa Barbara, the immediate gratification patients receive with these eye procedures, and with their continuity of care, is extremely fulfilling, according to Dr. Wagner. The proximity to the beach or mountains in a temperate climate doesn’t hurt either, she notes. “There is an initial shock value of just how beautiful it is here. My husband (Anesthesiologist Dr. Kurt Wagner) and I enjoy outdoor activities with our dog a great deal.”

Professionally, the chance to join other ophthalmologists with “a staff who are all so patient-focused” turned out to be the right choice. She describes the team as “an incredible machine” from the front desk patient service representatives to the surgery schedulers to the clinical staff and technicians – all go out of their way to help each other, according to Dr. Wagner. “I was particularly interested in being involved in a larger group where I could hit the ground running, and jump in and help out right away,” she shares. “With such a great network of primary care doctors and optometrists and ophthalmologists, it seemed great on paper. Now that I am here, it has lived up to every expectation. 🌻



**Sansum Clinic Elings Eye Center, 4151 Foothill Road, Building B, in Santa Barbara, provides a full multi-disciplinary spectrum of ophthalmology services to meet the needs of patients of all ages with the most advanced and comprehensive procedures and treatments. Visit <https://www.sansumclinic.org/locations/location/details/foothill-eye-center-building-b> for more information on the Foothill Eye Center. Or, you can reach Dr. Wagner and our providers in the Ophthalmology Department at (805) 681-8950. 🌻**

Elings Eye Center - Foothill Building B

## Are you a candidate for LASIK eye surgery?



95% of people who undergo this laser-assisted vision correction surgery report they are greatly satisfied with the results. Sansum Clinic's fellowship-trained cornea specialist Dr. Kirsten Wagner offers patients increased freedom from glasses and contacts in a painless, outpatient procedure that takes less than 30 minutes and uses Intralase®, the most advanced technology available. Patients see improved vision within 24 hours.



The iDesign Advanced WaveScan Studio System customizes the LASIK procedure for each patient by providing a real-time, detailed map of the cornea's surface.

To learn more, call us at (805) 681-8951 or visit [www.lasik.sansumclinic.org](http://www.lasik.sansumclinic.org)



Sansum Clinic LASIK Eye Care  
at Elings Eye Center  
4151 Foothill Road, Building B  
Santa Barbara CA 93110

# Santa Barbara County is Dr. Dan Brennan



Dr. Brennan and family

**T**hroughout South County, North County, Downtown and in Old Town, Santa Barbarians are masking up and respecting social distance. Each week, more of our neighbors are rolling up their sleeves to receive life-saving COVID-19 vaccines.

## The net result?

Many of our schools and businesses are reopening and youth sports are kicking off.

When **MASKED AND MIGHTY** launched its countywide campaign in October of 2020, we started by powering up local iconic landmarks. We asked community members to create their own self-taped videos to tell us why they were **MASKED AND MIGHTY**. We flooded our airwaves, computer screens, newspapers and television sets with positive reminders that we can control the spread of COVID-19 in our community.

The results are clear. Being **MASKED AND MIGHTY** works!

## What does it mean to be **MASKED AND MIGHTY**?

**MASKED AND MIGHTY** is a countywide coalition of healthcare and education partners who believe that a concerted community effort will help Santa Barbara County progress through the colored COVID-19 tiers, allow schools to reopen, restart more kids' activities and reopen our favorite local businesses.

# MASKED AND MIGHTY!

## Sansum Clinic Pediatrician

Geared for audiences of all ages, and translated into English and Spanish, the **MASKED AND MIGHTY** campaign utilizes local imagery and local residents to engage all Santa Barbara County communities with positive messages about the importance of MASKS and the MIGHTY superpowers that physical distancing and good hygiene can have to reduce the spread of COVID-19.

### What's new with masks?

We now know that correct and consistent mask use is a step that everyone can take to prevent the spread of COVID-19. Masks work best when everyone wears them, but not all masks are equally protective. We recommend that you select a mask based on how well it fits, how well it filters the air and how many layers it has.

Wearing a well-fitting mask will help reduce the spread of COVID-19. Choose a mask with multiple layers that fits snugly around your mouth and nose. A single-layer gaiter or a mask with gaps around your cheeks or nose will not protect you or the people around you as well. Finding a mask with a bendable nose wire will help create a tighter seal and offer you a more comfortable fit.

If you choose to wear a cloth mask, please be sure it is made up of multiple layers and has a bendable nose wire to help keep it in place. Don't forget to wash it regularly.

### A new Mighty superpower

Since the **MASKED AND MIGHTY** campaign kicked off, we have added an extremely powerful, new superpower to our arsenal.

We have not just one or two, but THREE highly-effective COVID vaccines. Our healthcare coalition partners have been working around the clock to administer vaccine doses as soon as they arrive in Santa Barbara County.

Not only are these vaccines highly-effective in preventing COVID infection, but they are nearly 100% successful in preventing hospitalization and death from COVID-19 infection.

As our vaccine rates increase and we approach higher levels of community immunity, we hope to bring an end to this pandemic.

When it is your turn, the **MASKED AND MIGHTY** coalition encourages you to roll up your sleeves and get your vaccine.



Sansum Clinic Obstetrician/Gynecologist Dr. Dave Raphael and his wife, Lisa, enlisted their two beautiful canines, Oso and Shiloh, to help remind us the proper way to wear a mask

### Where do we go from here?

One year into the pandemic, we know that being **MASKED AND MIGHTY** can decrease the spread of COVID-19.

It is not yet time to take off our masks or relinquish our Mighty superpowers. We must continue our heroic efforts until we can achieve adequate community immunity levels through vaccination.

If we continue to work together, we can reopen even more businesses and schools and allow young athletes to compete.

So please upgrade to a multi-layered mask that fits securely around your mouth and nose. Stay home when you can, avoid gatherings with people who don't live in the same household, practice good hygiene, observe physical distancing of at least 6 feet and get vaccinated when it is your turn.

Thank you for being **MASKED AND MIGHTY!** 🌟

# Hero Hospitalists

## Rise to the Occasion During COVID-19

ED BAUM

**W**hen patients are hospitalized, they may expect to receive daily visits and care in the hospital from their primary physician. But those doctors must continue to provide outpatient care at their clinics. They can't be two places at once. That's where hospitalists step in. Sansum Clinic hospitalists are board-certified internal medicine physicians who specialize in providing comprehensive medical care to patients in the hospital.

The formal Sansum Clinic Hospitalist Program began in 1999, mirroring a national trend at that time as primary care providers in the U.S. realized it was too difficult to focus on both acute care medicine and outpatient medicine. "If there is a sudden change in the condition of a hospitalized patient, it's very difficult for primary care doctors to cancel outpatient appointments so they can rush to the hospital to care for someone who has urgent needs," explains Jeffrey Yim, MD, a doctor with the Sansum Clinic Hospitalist Program. "Most physicians find it difficult to provide timely, effective, quality care in multiple environments."

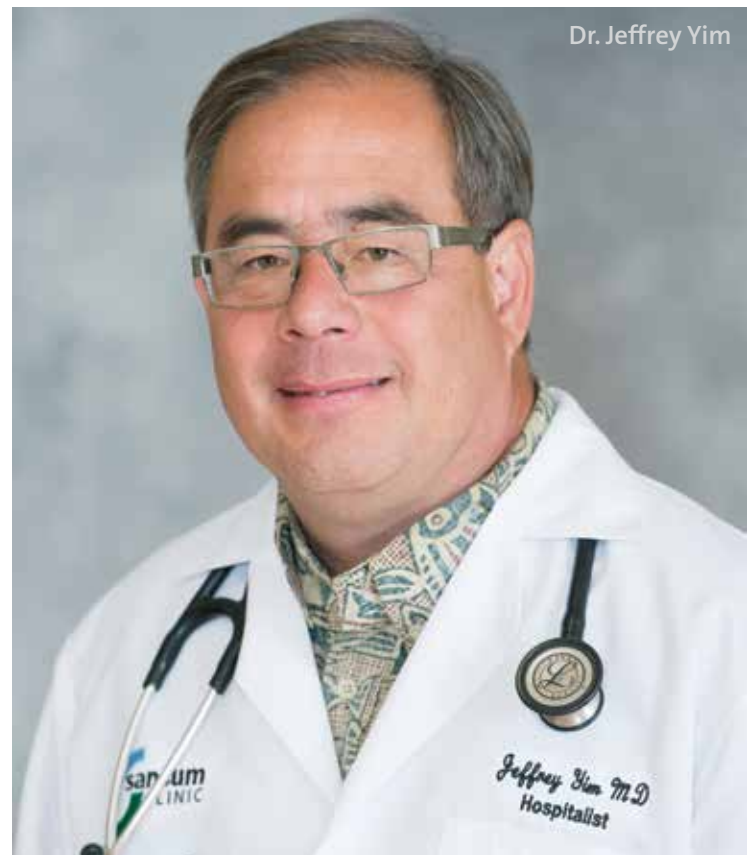
Sansum Clinic hospitalists work in teams to provide patient care 24 hours a day, 7 days a week at Cottage Hospital in Santa Barbara. "We are embedded in the hospital," Dr. Yim continues. "Because our entire day is spent there, we can better focus on managing acute care patients on an hour-by-hour basis and be available for multiple visits when needed."

Dr. Yim joined the Sansum Clinic staff in 1999 and was the first full-time hospitalist for Sansum Clinic. The program modernized the previous model that involved a panel of internal medicine doctors and family practitioner doctors who rotated through Cottage Hospital in limited shifts. Today, patients affiliated with Sansum Clinic who are admitted to Cottage Hospital for medical reasons are cared for by Sansum Clinic hospitalists. Cottage Hospital notifies primary care physicians about the patient's admission, and the admitting hospitalist forwards a copy of a document termed a History and Physical. This document details the patient's symptoms, the diagnostic plan, and the therapeutic plan. Sansum Clinic hospitalists also provide medical consultative services to surgical colleagues who care for Sansum patients. Cottage Hospital retains independent hospitalists for patients who are not affiliated with Sansum Clinic or do not have a primary care provider. Hospitalists evaluate patients upon arrival, order diagnostic

testing, and create a care plan. They collaborate with patients' primary physicians to streamline the handoff and ensure continuity of care. "There is a formal process for transitioning care to us when a patient is admitted to the hospital and back to primary providers when a patient is released," Dr. Yim explains. "We provide physicians with a discharge summary that has the relevant highlights about a patient's stay in the hospital, including what medications we are sending them home with and information about conditions that need to be resolved. We inform primary care doctors about any disorders that may have been found incidentally while the patient was in the hospital that may require outpatient follow up. Medical assistants arrange timely follow up visits with patients' primary care providers. This saves a considerable amount of time for our patients. We also communicate with patients' families to discuss patient care."

***"The hospitalized care of COVID-19 patients is evolving. We are steadily gaining knowledge about this disease."***

— Jeffrey Yim, MD



Dr. Jeffrey Yim



Patient Services Representative Jared Espinoza-Ramirez, Dr. Anh Lam, Dr. Sam Ahmad, Dr. Diane Nguyen, Dr. Sean McGuinness, Dr. Casey Rives, Dr. Ben Diener, Dr. Jeremy Lash, Dr. Lindsay Katona, Dr. Kyle Lemon, Department Coordinator Catalina Celio, Dr. Jeffrey Yim

Dr. Yim describes Sansum Clinic’s hospitalists as generalists who are capable of treating a very broad range of conditions. He says the hospitalists care for adult patients on cases that can run the spectrum of virtually any organ system. They also assist oncologists with cancer patients and consult with proceduralists for the co-management of medical issues before and after surgery. They collaborate with medical specialists as needed and work closely with critical care providers including Bryan Garber, MD, MS, who specializes in pulmonary and critical care medicine for Sansum Clinic. “Dr. Garber is the quarterback overseeing critical care cases,” Dr. Yim says. “During the COVID-19 pandemic our collaboration with the critical care providers has intensified.”

### Pandemic Places Hospitalists in a Vital Role

Sansum Clinic hospitalists have been busier than ever during the COVID-19 global health crisis. Dr. Yim says there was a lot of uncertainty in early 2020 about what was going to happen in the Santa Barbara area. “In February and March 2020 we were starting to get reports from places like New York about how chaotic it was to care for these patients,” he says. “We just didn’t know what we were going to be facing. We hadn’t had our first hospitalized case of COVID-19 in the Santa Barbara community yet. But anyone who was doing acute care medicine was very apprehensive about what we were about to encounter—from the emergency room physicians that treat urgent conditions to the hospitalists and the critical care doctors.”

Dr. Yim cites key national and local reactions to the situation. “An NBA athlete with the Utah Jazz tested positive for

COVID-19 on March 11, 2020,” he recalls. “In response, Adam Silver, who is the commissioner for the NBA immediately suspended the competitive season. His actions set a national trend, and a lot of other major sports and other industries followed suit. To me, Silver is a hero for taking that initiative. On March 13, 2020, Santa Barbara Unified School District shut down our local schools, ahead of what the California state guidelines directed. Around that time, Sansum Clinic implemented a surge plan to rapidly add hospitalist providers should the need arise.”

Sansum Clinic hospitalists follow practices that Cottage Hospital implemented for the health crisis. “Cottage Hospital has done an amazing job with how they orchestrated care for COVID-19 patients,” Dr. Yim says. “Early in the course of the pandemic, they suspended all elective procedures because they were concerned about getting inundated with patients. They designated entire floors and nursing staffs exclusively to the care of COVID-19 patients. The Cottage Hospital staff—particularly nursing and therapy staffs including respiratory, physical, occupational, and speech therapists—were impressive as they completely reengineered their workflows.”

The exclusive floors at Cottage Hospital, known as COVID cohorts, utilize technology that creates negative pressure throughout. That means if a door is opened, air does not escape and circulate with the rest of the facility. Instead it is extracted through filters to avoid possible spread of the virus. “Initially the hospital had negative pressure rooms,” Dr. Yim explains. “Then entire floors were converted to negative pressure. When the

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*Hospitalists, continued from page 11*

new Cottage Hospital facility was built, it was designed to have that potential. That was incredible foresight.”

The day after Cottage Hospital opened its first COVID cohort, the Sansum Clinic Hospitalist Program implemented three key elements that helped with the care of COVID-19 and non-COVID patients. First, the hospitalists adopted the concept of dedicated COVID cohort providers. These individuals were imbedded within the COVID cohorts and cared for Sansum Clinic patients who were hospitalized with COVID-19. “Throughout the pandemic, this arrangement fostered a collaborative relationship between physicians and front-line care providers such as nurses, patient care technicians, respiratory, physical, speech and occupational therapists,” Dr. Yim explains. “That collaborative relationship continually enhanced and advanced the understanding of the care and treatment of COVID-19 patients.”

The second element was to implement a plan to account for surges in hospitalized COVID-19 or non-COVID patients. An on-call roster was created and updated daily, allowing for a rapid and efficient up-staffing of hospitalist providers as needed, based on the total number of hospitalized patients under the care of Sansum Clinic hospitalists. “This on-call system significantly decreased the possibility that the Sansum Clinic hospitalists would be overwhelmed with patients and ensured that there would be adequate physician staffing at all times,” Dr. Yim says.

Third, the Sansum Clinic Hospitalist Program began distributing a nightly email message to hospitalist staff and key Sansum Clinic administrative staff. The message contained essential information such as the total number of patients cared for by Sansum Clinic hospitalists and number of COVID-19 patients. Most importantly it documented current staffing assignments, including COVID cohort personnel and the on-call roster. “The nightly email messages provided an efficient mechanism to convey information to key personnel on the front line of COVID-19 care,” Dr. Yim explains. “The emails became a mechanism to exchange information and keep hospitalists up to date with the current diagnostic and treatment options as well as the evolution of procedures for the care of COVID-19 patients. This was particularly useful early in the pandemic when all aspects of the care of COVID-19 patients were continually changing and rapidly evolving.”

### **Hospitalists and Staff Become COVID-19 Care Specialists**

Dr. Yim explains that COVID-19 has hit the Santa Barbara area in three distinct waves over the past year. Each wave has enhanced the hospitalists’ understanding of the virus and helped them improve the care and treatment they administer.

The first wave hit our community in March and April 2020. It was the smallest in terms of the total number of COVID-19 patients. Dr. Yim says one of the biggest issues with the first wave was a lack of access to rapid-turnaround testing. It often

took days to get results. “Because testing in Santa Barbara was very limited during the first wave, we placed anyone suspected of having the virus into the COVID cohort, based on their symptoms,” he explains. “The lack of test results made it extremely difficult to care for patients since we had to account for multiple potential diagnoses including COVID-19. Testing is very efficient now, utilizing multiple technologies and platforms that provide results in minutes to hours. Cottage Hospital tests everyone who gets admitted.”

There was a great deal of uncertainty early in the first wave. “Front-line providers had legitimate fears of being exposed to COVID-19, even with personal protective equipment,” Dr. Yim continues. “We were worried about our own health, and particularly concerned about infecting family members. Each provider faced a difficult decision: should I return home after each shift and risk exposing my family to the virus, or should I self-quarantine and be isolated from my family for days to weeks at a time?”

When treating COVID-19 patients, the hospitalists undertake a structured procedure called donning and doffing, which involves putting on and taking off their personal protective equipment in a specific order. The strict use of N95 masks, face shields, gloves, goggles, hair and shoe coverings, plastic gowns, and practices such as leaving personal items such as phones outside the cohort have proven to be very effective. As a result, the hospitalists have become much less fearful about contracting the virus as they care for COVID-19 patients.

“Our fears soon diminished to the point where we now feel safest when we are in the COVID cohort because of all the safety protocols” Dr. Yim says. “Sansum Clinic provides showers, lockers, scrubs, and a changing area for us. We change out of our street clothes and into scrubs before a shift, and then we shower and change after a shift. Both Cottage Hospital and Sansum Clinic do a phenomenal job of ensuring our safety and comfort.”

The second wave hit in mid-summer 2020. Dr. Yim estimates it was approximately twice the size of the first wave, with the census of inpatient COVID-19 cases in the care of Sansum Clinic hospitalists reaching the mid-teens at any one time and up to two hospitalists dedicated to the care of COVID-19 patients. “We were extraordinarily lucky in Santa Barbara that the first wave was relatively small, affording care providers time and capacity to understand how to better care for COVID-19 patients,” he says. “Through the first and second waves local doctors, nurses, respiratory therapists, and patient care technicians all evolved their COVID-19 care.”

Early on, providers such as critical care physicians, hospitalists, and respiratory therapists realized that it was often beneficial to reserve mechanical ventilation for only the very sickest patients. “Front-line care providers learned that the way COVID-19 affects the lungs is more of an oxygenation problem than a ventilation problem,” Dr. Yim explains. “A ventilator helps the lungs expand and contract, like a bellows. But the primary pathology with COVID pneumonia involves difficulty getting oxygen to diffuse across the air sacks of the lungs and into

the blood. That causes inadequate oxygen levels in the blood. Once we recognized that, the care of critically ill COVID-19 patients evolved from a strategy of early intubation, which is the insertion of a tube into the airway, to delayed intubation and the use of high flow supplemental oxygen through nasal cannula technologies where a lightweight tube is placed in the nostrils. This doesn't cure COVID-19, but allows the lungs time to heal."

The third wave of COVID-19 illnesses hit Santa Barbara in late 2020 and early 2021 after the holidays and was twice the magnitude of the second wave, with more than thirty COVID-19 patients receiving care from Sansum Clinic hospitalists at any given time. The total COVID-19 census at Cottage Hospital was approximately 100 patients. Cottage Hospital had five floors dedicated to the care of COVID-19 patients. The total volume of COVID and non-COVID patients in the care of Sansum Clinic hospitalists necessitated the activation of hospitalist surge staffing, with the addition of two and occasionally three additional hospitalist providers from late November 2020 through late February 2021.

"We are at the tail end of the third wave now," Dr. Yim says. "It was significant in terms of the number of admitted COVID-19 patients, severity of illness, morbidity, and mortality. A positive result of our involvement through these three waves is we have gained significant experience in the care of COVID-19 patients. Over time, the staff has learned more about how to determine what each individual patient needs and how to customize oxygen levels appropriately. The care of COVID-19 patients continues to evolve as the outcomes of clinical trials with new therapeutics become available for review."

### Advancing Medical Knowledge Builds Hope

Over time, practitioners developed a much better understanding of the natural history of COVID-19 pulmonary disease. Luckily, the majority of patients affected with COVID-19 do not develop significant pulmonary disease. Initial COVID-19 disease often presents with symptoms of fever, malaise, muscle aches, loss of taste and smell, nausea and diarrhea, and decreased appetite. While these symptoms can be extremely debilitating, patients usually do not require hospitalization. "Often it is during this phase of COVID-19 illness that patients get tested for COVID," Dr. Yim explains. "As many of these initial symptoms start to wane, a subset of patients go on to develop pulmonary symptoms including cough and shortness of breath."

Anywhere from days to weeks after the first symptoms occur, some patients seek further medical care for progressive shortness of breath and hypoxemia (low blood oxygen levels). These are the patients who are admitted to the hospital with COVID pneumonia. "The majority of patients spend days to weeks in the hospital where they are treated with moderate levels of oxygen, but go on to recover," Dr. Yim continues. "However, there is an additional small subset of patients who develop severe COVID pneumonia requiring previously unfathomable amounts of oxygen for life support."

Dr. Yim says there are three phases in patients admitted with the most severe COVID pneumonia. There is an initial active phase where the virus slowly and insidiously attacks the lungs. Over a period of days to weeks, COVID-19 causes progressive hypoxemia leading to increasing need for more oxygen through tubes in the nose or facemasks. "This phase is characterized by days or weeks of relatively stable lung function punctuated by episodes of sudden and acute decompensation in lung function requiring large increases in supplemental oxygen," he says. "The episodes occur over a period of minutes to hours. These are the patients who are often transferred to the intensive care unit and sometimes placed on mechanical ventilation. These patients also experience an extremely high mortality rate."

The second phase that occurs in patients with the most severe COVID pneumonia is a plateau phase. It is characterized by a prolonged period of time, often weeks to months, where patients are stable but require high levels of supplemental oxygen support that only acute care hospitals such as Santa Barbara Cottage Hospital can provide. "These patients often require forty or more liters per minute of oxygen delivered through specialized nasal cannula devices that were not often utilized prior to the pandemic," Dr. Yim says. "Recovery during this phase is slow with minute decreases in needs for oxygen occurring over a period of many weeks."

The third phase in severe COVID pneumonia is a recovery phase. During this period, patients experience a decrease in their need for high flow nasal cannula oxygen over a relatively rapid period of time, usually a week or so. During this phase, patients can eventually be transitioned to more traditional methods of delivery of oxygen so that they can be discharged to home or rehabilitation facilities.

Dr. Yim says one of the most challenging aspects to the care of COVID-19 patients is the isolation that patients experience due to the lack of visitation. "Seclusion presents a particular challenge to the care of our patients," he says. "Physicians and nurses have had to change how we provide care and coordinate with families. The staff at Cottage Hospital has been phenomenal at trying to alleviate loneliness through supplying patients with tablet computers that enable frequent communication with families and loved ones."

Sadly, terminally ill COVID-19 patients are typically isolated as they succumb to the disease. "One of the most difficult things for the staff is when patients end up passing away," Dr. Yim says. "Our hearts go out to the patients who unfortunately must be separated from their families and friends during their final days. We offer our deepest condolences to the families who are dealing the loss of their loved ones."

Medical experts now predict that a portion of patients will have prolonged effects from COVID-19. During their stay in the hospital and after their release, patients benefit from a team

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# A Pandemic Reframes Priorities

## Dr. Bryan Garber Treats Critically Ill COVID-19 Patients and Others in Intensive Care

Dr. Garber's story is representative of the work of all healthcare professionals at Sansum Clinic's Pulmonary and Critical Care Department in caring for patients with COVID-19

### ED BAUM



Bryan Garber, MD, MS

**B**ryan Garber, MD, MS, specializes in pulmonary and critical care medicine for Sansum Clinic. For the past year, his expertise in the management of critical illness and advanced lung disease has placed him on the front lines of our community's battle against COVID-19 in Cottage Hospital's busy intensive care unit (ICU), which is staffed by Sansum Clinic and community physicians. While he remains hopeful about the long-term trajectory of the fight

against this coronavirus, he believes it is important for people to know how serious the disease can be.

"The majority of people who get COVID-19 recover without significant problems," he says. "But some people can get very sick with pulmonary illness that can be quite debilitating for a long time. If you are one of the unlucky few who end up with severe COVID pneumonia, it is not something you will recover from quickly. Consequently, these patients don't move through the system as quickly as typical critical care patients, whose stay in ICU is relatively brief. This prolonged length of stay puts enormous pressure on ICU care, even more than the volume of new patients."

Dr. Garber was initially drawn to pulmonary medicine and lung health because of his own childhood experience with asthma. "My early career path was driven partly by self-interest," he says. "Research is me-search. Later, my interest expanded to include critical care medicine because it is a branch of internal medicine that requires doctors to think about the complete patient."

Critical illness often impacts the entire body, including the brain, lungs, kidneys, circulatory system, and more. Critical care doctors require a thorough understanding of all the major organ systems, and they frequently collaborate with other specialists to extend their knowledge in a team-focused environment. "I couldn't do my job without the assistance of others," Dr. Garber says. "We rely quite heavily on numerous medical professionals. The list is extensive and includes virtually every type of medical specialist and a team of nurses,

*This interview was conducted in January 2021, at the peak of COVID-19 in Santa Barbara*

residents, interns, pharmacists, dietitians, social workers, and spiritual caregivers." Along with Dr. Garber, three other physicians treat patients through Sansum Clinic's Pulmonary and Critical Care Department. Benton Ashlock, MS, MD; Ann M. Lee, MD; David A. Zisman, MD, MS, FCCP and Dr. Garber provide medical services for patients with critical illness and disorders of the lungs.

### The Personal Implications of Providing Critical Care

Along with their current heavy caseload of COVID-19 patients, Dr. Garber and the team commonly treat a variety of critical illnesses including septic shock (which is a profound inflammatory response to infection within the body), heart failure, gastrointestinal bleeding, severe respiratory failure, and many other life-threatening disorders. Essentially, critical care encompasses any patient whose body can no longer sustain its normal physiologic responsibilities resulting in the need for life support. When patients from the emergency room or hospital ward do poorly and their condition declines, they are transferred to the ICU for closer monitoring and further invasive care.

Types of treatment for critical conditions can include blood pressure support using medicines called vasopressors that constrict blood vessels to increase blood pressure, antibiotics, and noninvasive and invasive breathing apparatus. "These are modes of supportive care that allow the human body to recover from whatever insult has occurred," Dr. Garber explains. "Therapies such as antibiotics and other medications, blood pressure support and breathing machines essentially buy time to allow the body to recover from acute illness."

Dr. Garber enjoys working in a field of medicine where every case is unique. "Critical care is intellectually stimulating and quite challenging," he says. "Events I witness in the ICU often stay with me and this COVID-19 pandemic has affected me deeply. When I go home at the end of a shift, I can only sleep knowing I have honestly tried to provide the best care that I am capable of. I approach each patient as if they were my own family."

The doctor's family life was impacted in the early days of the pandemic. In March 2020 when there was still so much unknown about the transmission of the disease and the effectiveness of personal protective equipment (PPE) such as face masks, disposable paper medical gowns and exam gloves, Dr. Garber completely isolated himself from his wife and three young children for several months to avoid potentially spreading the virus to them. His in-laws traded places with him and he moved





In the early days of the pandemic, Dr. Garber and his wife, Marisa, made the difficult decision to separate themselves. To keep their family safe, Marisa took care of the kids while Dr. Garber cared for patients hospitalized with COVID-19.

Photo: Cold vs Black @goldvsblack

into their home so he would have no direct contact with his family members during his ongoing work caring for critically ill COVID-19 patients. “Any sacrifice like this that we make is miniscule compared to the things that patients and families suffering with a bad case of this disease go through,” he says. “My isolation from my family pales in comparison.”

As time passed and he became more trusting of PPE and the efficacy of personal behavior, Dr. Garber was able to adjust his restrictions and return home. “My wife has taken on a huge burden and has been an incredible support, holding our family together as my work hours have changed and my physical and psychological stress levels have increased during the pandemic,” he continues. “Almost all my colleagues have families and feel similarly. We are grateful for the support of our significant others.”

## A Growing Knowledge Base Supports Difficult Decisions

Dr. Garber says prevention is crucial as the number of COVID-19 cases remains high. He echoes the messages of public health officials about the importance of physical distancing, mask wearing, and hand washing. “The spread still seems to be driven by social gatherings,” he warns. “But there are many cases where we can’t pinpoint exactly where the inciting event was. Like most other infectious diseases, it circulates in families and groups. There are super-spreader events. But it also spreads simply through day-to-day existence.”

He acknowledges that this risk creates a huge psychological and economic toll as people adjust their lifestyles and behaviors to avoid potential infectious contact. “As a society, we’re trying to find the right balance,” he says. “I would not want to be one of the officials who need to make the difficult decisions about social and

business restrictions because I don’t think the issue is clear cut. There are no absolutes.”

One piece of good news the doctor shares is that the precautions people have been taking for COVID-19 work for other infectious diseases. “We are seeing a lot less of other preventable illnesses and infections, such as influenza, because of the protective actions people are taking,” he explains. “Humans are naturally social creatures and we long for interaction, but that may not always be the best thing for our health.”

Dr. Garber explains that while the cause of complications with COVID-19 can often be traced to preexisting conditions such as diabetes, obesity and pulmonary disease, sometimes the reason for severe cases remains a mystery. “There is probably some underlying risk factor that we have yet to identify,” he says. “We sometimes simply attribute severe cases to bad luck, because we don’t fully understand the virus. Eventually we may discover more definitive reasons. We have learned a lot about this disease and how to care for patients, but there are still a lot of unknowns.”

## Staying Hopeful Amidst the Challenges

The severe conditions Dr. Garber has witnessed in ICU over the past year have impacted his perspective on life. “No matter how demanding my work is, at the end of the day I get to go home,” he says. “And the unfortunate reality is, if you’re a patient with severe COVID, you’re not going home. And you may never go home. Seeing the worst-case scenarios of the virus makes it easy to not sweat the small stuff in day-to-day existence. A pandemic reframes priorities. My Sansum Clinic colleagues in critical care agree. We feel privileged to have our

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## Dr. Priti Gagneja Named President of Central Coast Medical Association



The Central Coast Medical Association announced Internal Medicine Physician Priti Gagneja, MD, was selected as president of the 2021 Central Coast Medical Association Board of Directors. Dr. Gagneja has been a member of the Central Coast Medical Association since 2010. She has also been active with

### Dr. Priti Gagneja

CCMA's state affiliate, the California Medical Association, where she has worked on policies and legislation that affects physicians and patients.

Dr. Gagneja was born and raised in San Fernando Valley, California. After high school, she went abroad for studies and received her MBBS (Bachelor of Medicine, Bachelor of Surgery) and Doctor of Medicine with honors from Rajiv Gandhi University in Bangalore, India. She completed her internship in general medicine and preventative medicine there and then returned to the United States. Dr. Gagneja was an internal medicine resident at Santa Barbara Cottage Hospital and was chief resident of internal medicine her final year. After residency, Dr. Gagneja joined Sansum Clinic where she currently practices internal medicine.

Besides her involvement with the Central Coast Medical Association, Dr. Gagneja is a part of the American College of Physicians and is a 4-H Alumni. Dr. Gagneja lives in Santa Barbara with her husband, Sansum Clinic Endocrinologist Dr. Salman Haq, and their three children. When not practicing medicine, she enjoys spending time at the beach with her family, cooking, and working towards her interest in martial arts. 🌟

## Dr. Toni Meyers Award-Winning Pianist Performs with Santa Barbara Symphony

The Santa Barbara Symphony returned on Saturday, February 27 with a special presentation to honor the medical community. Local physician-musicians joined the Symphony socially-distanced on stage, including award-winning pianist and Sansum Clinic ophthalmologist Dr. Toni Meyers (sister of acclaimed violinist Anne Akiko Meyers.)

Before the show, Symphony Board Chair Janet Garufis hosted a talk with Sansum Clinic CEO & Chief Medical Officer Dr. Kurt Ransohoff and Ron Werft, President & CEO of Cottage Health, about the connections between music and healing.

Maestro Nir Kabaretti, Music and Artistic Director, led Symphony musicians and guest soloists in the concert program which included Mozart, Beethoven, movements from Bramwell Tovey's Santa Barbara Sonata for Brass Quintet, and Russian physician and composer Alexander Borodin's Nocturno. 🌟

*The performance is still available for online access by emailing Elizabeth Cutright at [info@thesymphony.org](mailto:info@thesymphony.org).*



Sansum Clinic Ophthalmologist  
Dr. Toni Meyers performs with  
Santa Barbara Symphony

## Behind the Frontlines



Nichole Ketting-Olivier, Alex Bauer, and Lynnai Kennedy

The behind-the-scenes work of a medical billing coder is an essential part of how we take care of our patients. This complicated process of transcribing a patient's visit or treatment into a series of codes before a claim is sent to insurance companies is constantly being honed by those in this profession to increase reimbursement. Coders work hand-in-hand with doctors

and staff members so claims are completed in a careful and correct manner. "These Coding Department team members are genuinely hidden champions," remarks Nichole Ketting-Olivier, Medical Coding Manager. "They track tens of thousands of codes used by healthcare organizations, following all the specific guidelines on their use." New codes are constantly being added as medical fields advance. Ten of the clinic's 28 coders carry specialty credentials and work closely with the corresponding medical departments, so they are more fluent with the types of services offered there and the accompanying codes. The job is challenging but different every day, and the medical education is endless.

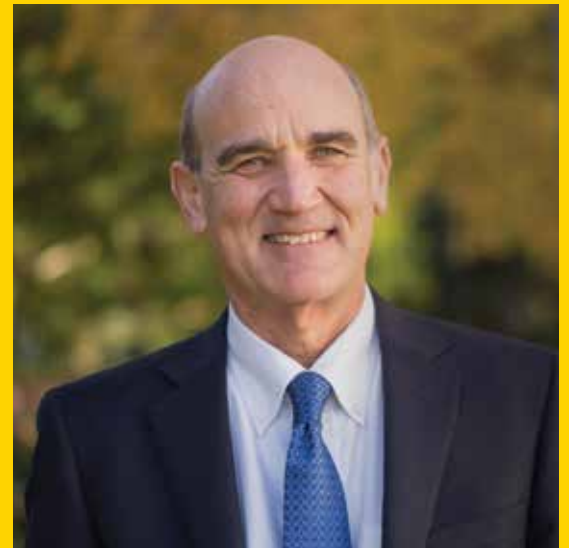
At Sansum Clinic, coders hold a variety of certification levels and the department's expertise is stellar. Certified coders play a significant role in the revenue cycle and contribute substantially to patient care and compliance. The training and experience offered to Sansum Clinic's coders allows them to better assist patients and to grow within the organization. A rigorous education program from the American Academy of Professional Coders™, the world's largest training and credentialing organization for the business of healthcare, provides the classwork. Students devote hundreds of hours over many weeks and must pass a final exam. Recent graduate Lynnai Kennedy took the course and is performing exceptionally, according to Ketting-Olivier. *Quote/Details from the coder.* 🌻

SANSUM CLINIC

## Congratulates

**KURT N. RANSOHOFF, MD, FACP**  
**CEO and Chief Medical Officer**

**for being recognized among the**  
***MOST INFLUENTIAL PEOPLE***  
***IN THE TRI-COUNTIES.***



Kurt N. Ransohoff, MD, FACP  
 CEO and Chief Medical Officer

## Esteban Alfaro Awarded

### Dr. Erno S. Daniel Legacy Award for 2021



Esteban Alfaro

Esteban Alfaro was awarded the 2021 Dr. Erno S. Daniel Legacy Award by Dr. Bryce Holderness, Chair, Pesetas Internal Medicine Department (both pictured above). Esteban has been working in Pesetas Internal Medicine since October 2018.

Sansum Clinic meant so much to Dr. Daniel who passed away in February 2015. Dr. Daniel was a knowledgeable, kind and caring internist who worked at Sansum Clinic for more than 37 years, taking care of thousands of patients, in

many cases, several generations of the same family. Martha Daniel and the Daniel Family established this award with gifts given to the Clinic in memory of Dr. Daniel. This award is given annually to an employee in the Internal Medicine Department at Pesetas who exemplifies compassion, dedication, and integrity. 🌻



Dr. Bryce Holderness and Esteban Alfaro

# Dr. Ron Golan Joins Sansum Clinic's Urology Team

## Specialized Treatments Improve Patients' Quality of Life

ED BAUM



Dr. Ron Golan

The luck of the draw can be life changing. Ron Golan, MD was on a career path toward trauma surgery and disaster medicine. As a Fulbright Scholar at the University of Pennsylvania School of Medicine, he studied healthcare management during disasters and mass casualty events. He thought disaster medicine would be his life's mission. But when the medical school's system assigned him to the urology service during his surgical rotation, his trajectory changed.

"Once I saw what urologists do, my connection to the field was immediate," he says. "The aspect of the field that attracted me initially, and that I still love, is its distinct parameters and results. In urology, patients typically seek help for a specific problem, and there are many well-defined treatments with proven endpoints and outcomes. For example, if someone has a complex kidney stone, we will identify a solution to break the stone and improve their quality of life almost immediately."

Sansum Clinic's Urology Department offers patients a wide array of treatment options including complex medical management and surgical choices for the entire spectrum of urological conditions. The department comprises a full

team of collaborative professionals including nurses, medical assistants, and front desk staff who support five doctors. Along with Dr. Golan, who joined the team in September 2020, the department is anchored by Alexandra Rogers, MD; Alex Koper, MD; Scott Tobis, MD; and Daniel Curhan, MD.

"We have an agile group that delivers high-quality care to a very diverse patient population," Dr. Golan says. "Patients benefit from the expertise of the entire team. We all work together at Sansum's Foothill Clinic, and can discuss complex cases and review imaging to share professional opinions. Having that sounding board really improves the quality of patient care and contributes to the success of the entire department. Further, within Sansum it is really easy to share data and communicate across departments, which patients greatly benefit from as there is reduced redundancy in testing and more rapid access to critical information. Less fragmentation in healthcare results in better healthcare."

Sansum Clinic's Foothill Medical and Surgical Center recently completed a major renovation that provides the urology team with expanded state-of-the-art space and resources.

### Personalizing Treatment Methods

Dr. Golan's expertise is minimally-invasive surgery along with kidney stone disease. He also treats a wide variety of conditions related to general urology including the medical and surgical management of prostate gland enlargement, voiding dysfunction, erectile dysfunction, male sexual health, male fertility issues, blood or infections in the urinary system, diagnosis and management of both benign and malignant conditions involving the prostate, bladder, kidney, testes, or urinary tract.

Many procedures are office-based or performed in an outpatient setting at the Foothill Medical and Surgical Center. Those may include minimally invasive endoscopic procedures or other ambulatory urological procedures. Cases that require more involved open, laparoscopic or robotic surgery are usually performed at Santa Barbara Cottage Hospital and may require post-operative care during recovery.

Dr. Golan has a patient-centric approach. "I tailor treatment methods based on the individual characteristics of the patient, their condition, and their goals of treatment," he says. "Not everyone is a good candidate for every procedure. I am very direct and honest with patients about their options and the risks and benefits of each option. And then we make decisions together."

This methodology is important in Dr. Golan's treatment of

kidney stones. “Not every treatment of kidney stones is right for every patient,” he explains. “A lot depends on stone size and stone location. It’s important to balance the estimated success rates against the complication rates, with consideration of an individual’s risk tolerance profile. With more information, patients and their families can feel as though they are as well informed as possible before proceeding with any given intervention.”

## Modern Care for Kidney Stones

Kidney stones are hard deposits of minerals and salts that form inside the kidneys and can cause problems along any part of the urinary tract from the kidneys down to the bladder. Dr. Golan says stones are formed due to a combination of diet, environment, and genetics. “The types of food people eat, the amount of fluids they drink, their lifestyle and even their profession can all contribute to the formation of stones,” he says. “For example, long-distance runners may be habitually dehydrated. Professions such as teaching in a school or working outdoors on a construction site may place people in situations where they can’t get to the bathroom often, so they reduce their fluid intake. That can contribute to the risk of forming stones.”

Dr. Golan says once a kidney stone has formed, it is very difficult to dissolve. The key then becomes taking the right steps to prevent the stone from growing, as well as preventing the formation of new stones. This involves a thorough metabolic evaluation of blood and urine parameters to identify how to best achieve this goal. According to the guidelines, patients who have had more than one kidney stone, have a family history, or are motivated to identify their risk factors should undergo a thorough metabolic evaluation.

### IMAGING FOR KIDNEY STONES

Dr. Golan prefers using ultrasound for imaging of kidney stones when possible because it provides valuable information without exposing patients to radiation. “I am very judicious with X-ray and radiation exposure,” he says. “Patients who form stones have a risk of increased radiation exposure over the course of their lives because the likelihood of stone recurrence is so high, and therefore they will likely have more X-rays and CT scans. Whatever we can do to minimize this risk of ionizing radiation is beneficial to patients.”

### OBSERVATION OF KIDNEY STONES

In the case of small, non-obstructing kidney stones, observation is a viable option as not every kidney stone will cause problems. Risks of observation include stone growth, stone passage resulting in pain, or risk of kidney injury due to chronic blockage. For those who are in high-risk professions such as pilots and flight attendants, truck drivers, or those who travel to remote or rural destinations, treatment may be preferable to observation.

### SHOCKWAVE LITHOTRIPSY

A non-invasive method for treating kidney stones is shockwave lithotripsy, which uses focused sound waves to break up stones. “It is a great option, for the right stone in the right patient,” Dr. Golan says. “But it doesn’t work in all cases. As many as twenty to thirty percent may be unsuccessful. Therefore, patients must be okay with the possibility of needing an additional treatment when electing this procedure.”

### URETEROSCOPY

Ureteroscopy is another minimally-invasive method for treating stones whereby the surgeon inserts a very small camera into the urinary system through a natural orifice, and then uses lasers to fragment the stone so it can be easily removed. This process does not require an incision and has much higher success rates than shockwave lithotripsy, but at the expense of being more invasive. It also allows doctors to retrieve a fragment of the stone for metabolic evaluation.

### LASER TECHNOLOGY

Dr. Golan is an expert in the safe and optimal use of laser technology in urology. “There are two types of lasers that are typically used in kidney stone procedures: holmium lasers and the newer thulium lasers,” he explains. “They both achieve the same goal of fragmenting the stone. The thulium laser is one of the biggest advances in the field right now, and we regularly use it here in Santa Barbara. It’s a really powerful laser and also minimizes retropulsion, which is the upward movement of the stone in the urinary system that can add significant time to a procedure. That allows us to more efficiently pulverize the stone into fine dust that patients can pass spontaneously.”

### PERCUTANEOUS NEPHROLITHOTOMY

For larger stones over two centimeters, percutaneous nephrolithotomy (PCNL) may be recommended. In this method, the surgeon creates a very small incision in the patient’s back to allow surgical entry into the kidneys to more efficiently fragment and extract the stones. “PCNL provides us with the best chance of treating a large stone in a single procedure,” Golan says. “But it is more invasive. A lot depends on the patient’s anatomy and their stone characteristics, but this procedure gives them the best shot of getting stone-free in the shortest amount of time.”

### MINIMALLY-INVASIVE SURGERY IN UROLOGY – ADDITIONAL APPLICATIONS

Dr. Golan strives to offer patients minimally-invasive surgery whenever feasible. The robotic-assisted Da Vinci System is offered for many urologic surgeries, in both benign and oncologic procedures. With traditional laparoscopic surgery, surgeons control the camera and surgical instruments by hand. With robotic-assisted laparoscopy, they move surgical tools and a 3D camera using robotic arms that are controlled via a console. “Robotic surgery offers incredible visualization and optimizes our control and movement of the surgical instruments within the abdominal cavity,” he explains. “It is less invasive than open surgery, generally requires shorter hospitalization and recovery time, and is usually less painful after surgery.”

*continues on page 26*

# Cooking Up a Plan for Dietary Health

## Sansum Clinic Dietitians Provide Patient-Centric Nutritional Care

ED BAUM



Registered Dietitian Nutritionists, from left to right, Christina Archer, MS, RDN, IFNCP & Gerri French, MS, RDN, CDCES

**D**iet is an essential aspect of good health. As children, we may have craved lip-smacking sweets and junk food munchies without understanding the consequences. But as we get older, most of us become aware of the direct relationship between the food we eat and how we feel. The implications can be significant. Poor dietary habits can lead to health problems including obesity, which potentially increases the risk for heart disease, stroke, type 2 diabetes, and certain cancers. When personal efforts to regulate diet are insufficient, people may seek help from medical experts. Sansum Clinic's Health Education Department includes Registered Dietitian Nutritionists (RDNs) and a full team of professionals who provide nutritional guidance and personalized care.

Registered Dietitian Nutritionists Christina Archer, MS, RDN, IFNCP and Gerri French, MS, RDN, CDCES support patients before and after bariatric weight loss surgery as well as those who want help with nutrition associated with diabetes, kidney disease, cardiovascular health, high cholesterol, food allergies, weight management, longevity, and digestive issues. Patients are referred by physicians from Sansum Clinic as well as from other clinics and private practices.

The dietitians use a patient-centric methodology, providing care that aligns with patients' needs, desires, and values. "Patient-centered care requires a partnership between practitioners and patients," Ms. Archer says. "It is important that patients participate in their own care and contribute to decisions about their health."

To provide patient-centric care, the dietitians need to understand patients' lifestyles, habits, and personal goals. "We gather a lot of information to get a picture of all contributing factors in a patient's life," Archer says. "In our first meetings with a patient we ask them what a typical day's diet is for them, and to recall what they ate over previous days. We inquire about their cooking equipment at home, whether exercise is a component of their life, and other considerations."

Through education, counseling and guidance, the dietitians strive to provide a sustainable and personalized program that will enable each patient to eat the foods they enjoy and still reach their health goals. "We do something called motivational interviewing," Ms. French explains. "It focuses on the patient's perspective instead of our agenda. We share and we listen. And sometimes we try to hear what they're not saying."

### A Lifestyle Approach

Archer emphasizes the importance of patient awareness and involvement. "I remind patients that I'm only half the equation," she says. "They need to take accountability for their own actions. They can't simply rely on the dietitian to manifest change. Patients must groom their environment and mindset to make a lifestyle change. It's a lifelong commitment. The dietitian only gets you so far, and then it's up to you."

"Patients who achieve success in their weight loss goals and other nutrition-related health objectives are those who eat well and exercise not because they have to but because they want to," French adds. "They do it to get the life they want."

The dietitians help people adopt that outlook by increasing awareness and cultivating mindfulness about what and how they eat. For example, they recommend that their patients keep a food record to track their dietary behavior and correlate it with results about how they feel. They also advise people to not multitask with food such as watching TV while they eat, but instead to allow the brain to focus on the taste of the food and the process of eating.

"We are not psychologists, but our work involves counseling," French says. "Patients may create excuses and encounter obstacles. We work with people to help them move forward through the challenges. Our job is to provide positive reinforcement and support for that process."

Referrals extend the reach of the care the dietitians provide. They refer patients who need formal psychotherapy to

community resources for low-cost counseling. They also refer people to programs such as adult education classes for exercise. Lately, since gyms and in-person fitness sessions are closed due to the COVID-19 pandemic, they suggest home solutions such as apps and online instruction.

Both Archer and French began their professional paths with a love of cooking and a respect for the preventative aspects of wholesome dietary routines and sensible household nutrition. “Because both my parents died prematurely, I started early into preemptive health actions related to diet,” French says. “I would rather prevent people from needing to go to a hospital than treat them in a hospital. I advise a lifestyle approach. Learning to cook healthy meals from scratch, establishing good habits such as getting up and moving after you eat, these are things anybody can do.”



Ms. French has a master’s degree in physical education and wellness. She enjoys talking with people about finding exercise activities that they can maintain, and often promotes yoga for flexibility, strength, and relaxation. “Yoga-type breathing can be very beneficial during stressful times and when having food cravings,” she explains. “Pausing before eating can also help you slow down so you can savor your meal, and possibly eat less.”

“I became interested in health and wellness in high school when I became a vegetarian,” Archer says. “Out of personal necessity, I learned about taking care of myself through healthy cooking. The culinary program at Santa Barbara City College increased my understanding about how food relates to health. When I took a course on nutrition for the food service professional, I realized this could actually be a career. Today I enjoy being in the role of educator as I instruct people about how to cook healthy meals and what types of food to include in their diet. And I advise them to include exercise in their daily routine.”

## Support for Bariatric Surgery Patients

Providing support for bariatric weight loss surgery patients is a key responsibility for the dietitians. Sansum Clinic’s Bariatric Surgery Center integrates surgical technology, dietary and nutritional counseling, emotional support, and long-term follow-up care.



Sansum’s medical weight loss clinic is led by board-certified surgeon Marc Zerey, MD, CM, MSC, FRCSC, FACS, who specializes in minimally invasive procedures such as laparoscopic gastric sleeve, gastric bypass, and LAP-BAND surgery.

Ms. Archer leads the support group for bariatric surgery. The group meets monthly (currently virtually during the COVID-19 pandemic) to provide pre- and post-operative guidance for bariatric surgery patients. “The frequency of visits with the dietitians including the monthly support groups is very helpful in maintaining patient success,” Archer says. “That sets Sansum’s program apart from many others. We follow up with bariatric patients at two weeks, one month, three months, six months, a year, and beyond. This long-term care is applicable to all our patients. There is still a lot of relevance in working with dietitians even after patients reach their health goals and are doing well.”

***“There is still a lot of relevance in working with dietitians even after patients reach their health goals and are doing well.”***

Patients who recently underwent bariatric surgery and those who are preparing for it attend the bariatric support group sessions. People who had the surgery years earlier also attend to fortify long-term success. “The more information patients have before surgery, the more successful they will be afterwards,” Archer continues. “They know what to expect and they are able to plan accordingly. Due to COVID, people’s schedules are thrown way off. Bariatric patients who listen to the advice of implementing a schedule and routine have better post-operative results. The monthly support groups cultivate that structure and help establish lasting habits to help patients stay on track with diet, exercise, lifestyle, and mindful awareness.”

Bariatric Coordinator Jessica Orozco plays a significant role in patient success. She ensures that patients are informed about

*continues on page 27*

# Skilled Surgeon & Advanced Robotics Combine to Provide Better Outcomes for Men with Prostate Cancer

CHRISTOPHER WILLIAMS



Doug Zylstra and his companion Bodie oversee operations at their family-owned commercial nursery in Goleta.

**S**anta Barbara area residents, Len Price and Doug Zylstra both recently found themselves to be among the approximately 1 in 8 American men who will be diagnosed with prostate cancer in their lifetime.

Treatment for prostate cancer ranges from conservative management, hormonal treatments, cryosurgery, radiation therapy, to surgical removal of the prostate. The best course or treatment depends on a number of factors, including the stage of the disease, age, overall health and personal preference.

For such a critical moment, Len and Doug each sought a surgeon with the utmost skill and experience – and superior outcomes. Their search led them both to Santa Barbara's own Dr. Scott Tobis, a urologist and surgeon specializing in robotic-assisted prostatectomy at Sansum Clinic.

The decision to surgically treat prostate cancer involves many considerations and Dr. Tobis took the time to carefully explain the best treatment options to help his patients decide the best course of action for them.

“The advances in minimally-invasive robotic-assisted surgery provides a superior surgical approach to prostate cancer removal,” explains Dr. Tobis.

Dr. Tobis performs more robotic surgery and radical prostatectomies than any other urologic surgeon on the Central Coast. He is one of a small number of area urologists trained in the use of the da Vinci® Surgical System, which allows him to operate by controlling tiny medical instruments via a computer console. Surgeries performed with da Vinci typically involve just a few small incisions which results in less postoperative



Prostate cancer survivor, Len Price, is back in the groove at his music studio in Carpinteria.



Dr. Scott Tobis

pain and hospital stays that are usually about a day for robotic prostatectomy patients.

Two important post-surgical factors for prostatectomy patients are continence and sexual potency. Over last several years, Dr. Tobis has treated hundreds of patients utilizing the da Vinci System. This experience is important in not only removing

the prostate cancer completely, but in minimizing the side effects associated with prostate cancer treatment.

In prostate cancer surgery, millimeters matter. Nerve fibers and blood vessels are attached to the prostate and must be delicately separated from the prostate before its removal. The precision, vision and control of the da Vinci System helps Dr. Tobis to spare nerves that are vital to normal function.

“The da Vinci is extremely responsive and very precise,” Dr. Tobis explains. “Robotic surgery is more refined and has great magnification, you see better and are able to preserve more tissue for sexual function and there’s also faster recovery of urinary continence.”

This advanced approach, combined with his surgical skill allows Dr. Tobis’ patients to enjoy a faster, more full recovery and get back to their normal life sooner.

Len recalls, “I was back to work within a week. I walk often and within, I think, two or three weeks I was hiking again. So, the physical impact and side effects were pretty minimal.”

“When I received my diagnosis, I had a few well-meaning friends telling me I need to go to Los Angeles or even to Chicago right away for the best treatment,” explains Doug. “I knew deep down in my heart that I would find somebody here in Santa Barbara. And I knew right away that I had found that person when I met Dr. Tobis.”

“Somebody told me that he is a great guy, and I said, ‘I don’t need a great guy, I need a great surgeon.’ and, I found both in Dr. Tobis.” 🌟

*Dr. Scott Tobis graduated from Dartmouth Medical School and has fellowship training in robotic surgery and urologic oncology from City of Hope National Medical Center. He is certified by the American Board of Urology and has significant experience in the minimally-invasive surgical treatment of many benign and malignant urologic conditions. Dr. Tobis treats patients for many urologic conditions including urologic cancers, prostate enlargement/BPH, vasectomy, kidney stones, frequent/urgent urination, erectile dysfunction, incontinence, and blood in the urine.*

*For more information, contact the Sansum Clinic Urology Department at (805) 681-7564 or visit [www.sansumclinic.org](http://www.sansumclinic.org) for more information about therapy options.*

Online! 

# Ridley-Tree Cancer Center Community Lectures

## The Science of Sleep and Its Effect on Health

**Ann M. Lee, MD**

**Sansum Clinic Pulmonary & Critical Care Physician**

Both doctors and medical researchers understand that getting the right amount of sleep is essential to the health of your body and mind. Sansum Clinic pulmonary and critical care physician, Dr. Ann Lee hosted *The Science of Sleep and Its Effect on Health* as part of Ridley-Tree Cancer Center's Community Lectures program. She discusses the effects of sleep deprivation, the various conditions and lifestyle choices that can impact the quality of your sleep, and the appropriate testing and treatment options for insomnia and sleep disorders.

**Watch the video at: <https://bit.ly/3Is0IWb>.**

*Ridley-Tree Cancer Center Community Lectures are co-sponsored by the Cancer Foundation of Santa Barbara, the Cancer Center's fundraising partner. To learn more about our upcoming lectures or to access our library of past lectures, visit [lectures.ridleytreecc.org](https://lectures.ridleytreecc.org).* 🌻



## Your Prescription: Spend Time in Nature



Kevin Gleason, *Lake Los Carneros After the Rain*, Oil on linen on panel, Courtesy the Artist.

Time spent in nature is good for our body and our mind. Especially during difficult times, nature is good medicine to alleviate stress and to improve our sense of well-being. To inspire you, Sansum Clinic, as part of Healthy People Healthy Trails, partnered with the Wildling Museum of Art and Nature for the upcoming exhibit, *Art from the Trail: Exploring the Natural Beauty of Santa Barbara County*, celebrating local outdoor treasures. The exhibit will debut online on April 17, 2021. We hope for in-person viewing later in spring, as soon as it is safe to do so.

*Art from the Trail* features the work of local artists of Oak Group, SLOPE (San Luis Obispo Painters for the Environment) and SCAPE (Southern California Artists for the Environment) in an exhibit showcasing healthful and beautiful trails in Santa Barbara County. Many trails featured in the exhibit are easy to access and close to home including Carpinteria Bluffs, Goleta's

Lake Los Carneros and Ellwood Mesa, La Purisima Trail in Lompoc and more.

"Through the pandemic, I think we've all begun to look for new ways to explore our own backyard," says Lauren Sharp, Assistant Director at the Wildling Museum. "Seeing these trails through the eyes of our talented community of artists is an inspiring reminder to get outside and up close with the rich nature surrounding us."

A key goal of the exhibit is to inspire visitors and community members to explore the trails and gain the health benefits of being in nature and active outdoors. Benefits may include lowered blood pressure and heart rate as well as long-term weight management and reduced risk of ongoing illness. Additional benefits are lower stress, anxiety, sadness and fatigue while concentration and self-esteem may improve.

For more motivation Healthy People Healthy Trails will offer a virtual challenge to accompany the exhibit. The challenge encourages people to spend time in nature, whether it be in the mountains, at the ocean, or in your neighborhood. Prizes will be included! For information on places to go in nature, or on how to get started walking outdoors visit [www.HealthyPeopleHealthyTrails.org](http://www.HealthyPeopleHealthyTrails.org). Use the "contact" tab to sign up to receive an announcement about the nature challenge and other activities. 🌻

**For information on *Art from the Trail: Exploring the Natural Beauty of Santa Barbara County*, visit: [www.wildlingmuseum.org/news/art-from-the-trail](http://www.wildlingmuseum.org/news/art-from-the-trail).**



**sansum**CLINIC  
**Visiting Professor**  
OF SURGERY

Due to COVID-19, we had to cancel our Visiting Professor of Surgery for 2020 and change the format for 2021. Thanks to advanced technology, we were able to line up four guest visiting professors for presentations on March 17 and 18. Sansum Clinic's Visiting Professor of Surgery Education Program was established in December 2010 to advance educational opportunities for local surgeons and surgical residents in training at Santa Barbara Cottage Hospital. The Program Administrator is William Charles Conway, II, MD, FACS. We hope to reschedule our 2020 Visiting Professor of Surgery, Fabrizio Michelassi, MD, FACS in March 2022.

**Deanna J. Attai, MD, FACS**

Associate Clinical Professor, Department of Surgery

David Geffen School of Medicine at UCLA

**PRESENTATION: *Full Circle: Lessons From and Unconventional Academic Career***



**Wen T. Shen, MD, MA**

Professor of Clinical Surgery

Program Director, Endocrine Surgery Fellowship  
University of California, San Francisco

**PRESENTATION: *Operating on Shadows: How to Manage the Adrenal Incidentaloma***



**Jennifer Suzanne Davids, MD**

Department of Surgery

Division of Colon and Rectal Surgery  
University of Massachusetts Memorial Medical Center  
Worcester, MA

**PRESENTATION: *Surgical Evaluation and Management of Constipation***



**Alfredo M. Carbonell, II, DO, FACS, FACOS**

Vice Chairman of Academic Affairs

Program Director, Minimally Invasive Surgery Fellowship  
Co-director Hernia Center

Department of Surgery, Prisma Health-Upstate  
Professor of Surgery, USC School of Medicine Greenville  
Greenville, SC

**PRESENTATION: *Controversies in Incisional Hernia***



Title Sponsor



Dr. Ron Golan, continued from page 19

## An Ounce of Prevention

Dr. Golan supports lifestyle modifications whenever possible to address kidney stones and other urological issues. “For the motivated patient, proceeding without medicine or surgery is the safest and most sustainable approach whenever feasible,” he says. “I’m very supportive of diet and exercise combined with behavioral modifications, and I always discuss that with my patients. The best thing you can do is be proactive.”

For example, it is known that diabetes, high blood pressure, and an unhealthy diet can exacerbate erectile dysfunction. “The number one thing men can do to prevent erectile dysfunction is to maintain a healthy diet and exercise routine,” Golan says. “In a similar manner, when I meet men with voiding issues for the first time, it’s always important to start with behavioral changes including voiding more frequently and with patience to ensure complete emptying, hydration, avoiding constipation and doing Kegel exercises, which involves strengthening the muscles of the pelvic floor to build strength.”

Golan advises preventative measures to reduce repeated kidney stone formation. “Fifty percent of people who have had one stone in their life will get another one,” he explains. “Metabolic evaluations that analyze factors such as urine, blood, and diet can help us determine why a patient formed a stone and how they can prevent them from recurring. But even if you have a healthy diet, that doesn’t mean you won’t form stones. Certain nutritious foods such as spinach and nuts have high oxalates, which may predispose people to forming kidney stones. Also paradoxical is that even though most stones are calcium-based, a low calcium diet may increase your stone risk if combined with high oxalates.”

A healthy lifestyle is not always sufficient for preventing disorders. Dr. Golan advises people to not delay seeking medical care for persistent symptoms. “Because urologic conditions and sexual health are private matters, a lot of people will suffer silently because they are embarrassed to discuss their condition or think there is no treatment available for them,” he says. “They may be unaware that we deal with these things professionally on a regular basis. And we have so many options that can help them. I treat people all the time who tell me they wish they had talked to a professional sooner about their condition. This goes back to being proactive. With awareness, anticipation, and planning, a lot of issues can be caught and treated early.” 🌟

*Dr. Ron Golan is a fellowship-trained urology specialist. He completed his residency at Weill Cornell – New York Presbyterian in New York City, and an endourology fellowship at Columbia University Medical Center. The Jersey Shore native graduated from the University of Pennsylvania School of Medicine. He began working with Sansum Clinic in 2020. Dr. Golan has published more than 20 articles in major urology journals and is the co-author of a textbook titled Operative Dictations in Urologic Surgery, which is a step-by-step guide for more than 120 common urologic surgical procedures. Along with his interests of reading and writing, he enjoys an active Santa Barbara lifestyle and spending time with his family.*

*For more information or to schedule an appointment, please contact the Sansum Clinic Urology Department at (805) 681-7564.*

*Sansum Clinic Foothill Medical & Surgical Center is located at 4151 Foothill Road - Building A, Santa Barbara, CA 93110.*

## Writing as a Tool for Health

Everyone has a story of health, illness or a life event. Writing about your thoughts and experiences is a way to move through these times and can bring a sense of calm and wellbeing. In *Writing as a Tool for Health*, Melissa Broughton gives instruction and tips to make it easy to express your story in writing. Beginners are welcome! In just 2 hours, you will learn techniques to use writing as a healing tool.

Melissa Broughton, program facilitator, is a teacher, writer and lavender farmer. Her background in education and counseling and her love of words and storytelling come together in her therapeutic writing workshops. As one participant said, “Having the guidance and structure for what to write about during this time was extremely valuable.”

The first workshop will be held on **Thursday April 22 from 10:00 AM to Noon**. Participants can attend one or all of the monthly sessions. Journal supplies will be provided and the program will be *a virtual meeting you can do from the comfort of home, by computer or telephone. Free of charge and open to the community.*

Sign up today to get the log-in information.

Visit [SansumClinic.org/health-and-wellness](https://SansumClinic.org/health-and-wellness)

Or call 866-829-0909

*Writing as a Tool for Health is co-sponsored by Ridley-Tree Cancer Center and Sansum Clinic.* 🌟



*Cooking Up a Plan, continued from page 21*

appointments, and she alerts them via text messages about events such as the monthly bariatric support group meetings so there are never interruptions in care. The dietitians, bariatric coordinator, nurses, managers, and surgeons meet monthly to maintain continuity and communication between departments.

## Latest Discoveries Help Dietitians Personalize Nutritional Guidance

Looking ahead, French and Archer believe nutrigenomics is an important direction in the field of dietary health. Nutrigenomics is the study of the effects of food on gene expression and the relationship between the human genome, nutrition, and health.

The completion of the Human Genome Project in 2003 provided medical science with a map of approximately 20,500 genes and how they function in the human body. Among other insights, the project helps medical professionals understand how food interacts with our genes. “Certain foods can influence how our genes operate and express themselves,” French says. “Using this information, we can provide our patients with deeper guidance about nutrition and health. For example, certain bioactive ingredients found in colorful plant foods can change gene expression and reduce inflammation in the body.”

Ms. French explains that the lining of a person’s digestive tract is covered in microscopic beneficial bacteria, fungi, and other microorganisms. This microecosystem, called the microbiome, exists throughout the human body and plays a large role in health. A healthy microbiome promotes a healthy immune system, supports weight management, and may play a role in preventing or improving symptoms of many common disorders including allergies, asthma, colon cancer, and more.

“Christina and I are fascinated by the microbiome and new research identifying and describing molecular-level interactions between nutrients and the human genome,” French says. “You can maintain a healthy microbiome by adding living microbes directly into your system through probiotics such as yogurt, kefir, fermented vegetables, and kombucha.”

By applying new research and discoveries about nutrigenomics, dietitians can assist patients in a much more personalized way. “We don’t want to apply a cookie-cutter approach to nutrition,” French continues. “Every patient is different. That’s why communication is so important between patients and care providers. Once we understand the details about who we’re treating, we can help them support their microbiome with wholesome foods. The first step is increasing awareness about current food habits by evaluating not only what people eat but when, where, and how. One recommendation may be to consider some type of intermittent fasting where food is eaten during specific hours. Intermittent fasting has been found to assist in modifying our cells and biological pathways that may increase longevity and reduce late night eating habits.”



Ms. Archer warns people to be careful with trendy diets that become popular in mainstream culture and may be perceived as general-purpose plans. “Programs such as the ketogenic diet, which is high-fat, moderate protein, and low-carbohydrates are not necessarily appropriate for everyone,” she explains. “That diet forces the body to burn fat, but it wasn’t intended to be a universal weight-loss program. It was primarily designed to treat hard-to-control epilepsy in children and other medical necessities. Nutrition therapy has the best chance for success when it is administered under the supervision of a medical professional who understands the specific needs of the patient.”

Some people avoid professional nutritional care due to fear or shame around seeing a dietitian. “Patients may worry that we’re going to wag a finger at them and give them a strict program,” Archer says. “That’s a misconception. We are here to educate, to brainstorm ideas, and to help people get onto a healthy path. My advice is don’t let fear hold you back from putting your health first.”

“We’re here to help patients understand themselves better,” French summarizes. “We love people and we want them to be successful. Everybody deserves to be the weight they want to be. Over the years I have told my patients: On the other side of that door there’s the new you. You can do anything you want to do.” 🌟

*Christina Archer is a clinical dietitian, diabetes educator, and bariatric support group leader who was born and raised in Lompoc, California. She has worked with Sansum Clinic since 2017. During her undergraduate education she worked as a nutrition educator in rural communities and as a hospital dietary aide. She received her master’s degree in nutrition science from California State University, Chico.*

*Gerri French is a clinical dietitian, culinary nutritionist, diabetes educator, and cooking instructor. She has worked with Sansum Clinic since 2002. She also sees clients in her private practice, teaches nutrition at Santa Barbara City College, and is the food and nutrition editor for Diabetes Health Magazine. She received her master’s degree in wellness and physical education from California Polytechnic University San Luis Obispo.*

*To schedule an appointment with the dietitians, please contact Sansum Clinic’s Pueblo Multi-Specialty Clinic at (805) 681-7500. To schedule an appointment with Sansum Clinic’s Bariatric Surgery Center or to sign up for an upcoming weight loss surgery seminar, please call (805) 898-3472.*

Dr. Garber, continued from page 15

health, a roof over our head, and employment—which cannot be said for everybody.”

Despite the gravity of the pandemic, Dr. Garber remains hopeful. “I am optimistic that as vaccination efforts increase, we will see improved control of the virus,” he says. “The data from the available vaccines looks quite promising as far as their efficacy against the studied variant of COVID-19, and hopefully against the newer strains as well. I’m impressed by the speed with which they were developed and I’m confident that the rollout of the vaccine will get smoother as availability increases.”

Medical science is steadily advancing in its understanding of COVID-19. Dr. Garber tracks the ongoing research and discoveries about the virus closely. “There are some interventions that have been proven to be effective, but there is yet to be a cure,” he says. “Right now, the best cure is prevention. Maintain a healthy lifestyle and diet. Wear a mask and practice social distancing. Get the vaccination when it becomes available to you.”

As the vaccine rollout moves forward, Dr. Garber believes society will eventually be able to return to some sense of normalcy. “Most people in our community have done a good job adopting the recommendations that the CDC and the Department of Public Health have shared,” he says. “I am optimistic that the

restrictions on our lives that we have all experienced will be limited in duration. But this is still something that is affecting our community profoundly, so I advise people to stick to those restrictions. It is not worth the risk of getting this illness.”

Extreme demands and challenges notwithstanding, Dr. Garber feels honored to have the opportunity to practice in the critical care environment. “The reality of critical care medicine is patients either recover from a very serious illness and return to a normal life, or they don’t,” he says. “Unfortunately, sometimes the outcome is not a cure. In those cases, we can help people as they reflect on what they want at the end of their life. Oftentimes patients are so sick that we are unable to have much direct interaction with them. We work with family members and help them cope with these challenging issues. Caring for these patients and interacting with their families at a watershed time in their lives is a privilege.” 🌻

*Dr. Bryan Garber specializes in pulmonary and critical care medicine with an emphasis in management of advanced lung disease. He graduated from UCLA David Geffen School of Medicine and is certified with the American Board of Internal Medicine in Internal Medicine, Critical Care Medicine, and Pulmonary Medicine. He joined the Sansum Clinic medical staff in 2018.*

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*Hospitalists, continued from page 13*

approach where specialists share their expertise. Nurses, patient care technicians, respiratory, speech, physical, and occupational therapists have risen to the task of helping to rehabilitate patients who have prolonged symptoms. They give patients the mechanisms to get their strength back and on the road to recovery and independence.

“A multi-disciplinary approach has been implemented,” Dr. Yim says. “These front-line care providers deserve a lot of recognition and credit for their roles in helping patients get through their illness. Nurses, therapists, ancillary staff, and pulmonary critical care doctors like Dr. Garber have been instrumental in helping us with COVID-19 patients. There is absolutely no way we could have done this without them.”

Sansum Clinic CEO and Chief Medical Officer Kurt Ransohoff, MD, FACP adds his support for the hospitalists and staff during the crisis. “It is impossible to fully capture the personal and emotional toll that comes with taking care of these patients when they become critically ill,” he says. “Even though arrangements are sometimes made for family members to visit when the end of life is near, for the most part patients go through their struggle separated from their families, with the doctors and nurses acting as intermediaries between family members who are overwhelmed with grief and fear and patients who are struggling to survive.”

Having to handle that difficult role while simultaneously managing severely ill patients has been a unique challenge for care providers during this pandemic. “Doctors and nurses are working in a strange world of their own isolation and removal from normalcy, worried about what they might bring home from their work shift,” Dr. Ransohoff continues. “We are all very grateful for the Sansum Clinic hospitalists and all the doctors, nurses, and staff who have stepped up and done the work during this crisis to care for these patients.”

As our community anticipates solutions to the pandemic, people can be confident that Sansum Clinic hospitalists are on duty to care for COVID-19 inpatients and those who require hospitalization for any illness. Dr. Yim concludes with a message of optimism. “As an acute care physician, I can attest to the fact that the hospitalized care of COVID-19 patients is evolving,” he says. “We are steadily gaining knowledge about this disease. As the vaccines roll out I think there will be light at the end of the tunnel regarding transmission of cases and hopefully decreased morbidity and mortality associated with COVID-19. Meanwhile, preventative practices are helpful in slowing the spread. One of the most interesting effects of the combination of social distancing, sheltering in place, masking, and hygiene has been the virtual absence of patients hospitalized for non-COVID respiratory viruses such as influenza, metapneumovirus and rhinovirus, which implies that these measures can be effective in limiting the transmission of COVID-19 as well.” 🌻

*Jeffrey Yim, MD is an internal medicine specialist and Sansum Clinic hospitalist. He graduated from University of Hawaii Medical School and is certified with the American Board of Internal Medicine. Dr. Yim joined Sansum Clinic in 1999. In 2000 he was Teacher of the Year in internal medicine at Cottage Hospital.*

*Kurt N. Ransohoff, MD, FACP is an internal medicine specialist. He has been CEO of Sansum Clinic since 2002 and Chief Medical Officer of Sansum Clinic since 2012. Dr. Ransohoff graduated from medical school at University of California, Los Angeles and is certified with the American Board of Internal Medicine. He joined Sansum Clinic in 1992.*

*Sansum Clinic Hospitalist Program; P.O. Box 1200 Santa Barbara, CA 93102-1200; (805) 898-3077*

## Sansum Clinic Full-Time Rotating Hospitalists

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Ross University School of Medicine

### **HIWOT ARAYA, MD**

Stanford University School of Medicine

### **BENJAMIN DIENER, MD**

St. Louis University School of Medicine

### **LINDSAY B. KATONA, DO**

University of New England

### **ANH LAM, MD**

University of Pittsburgh School of Medicine

### **JEREMY LASH, MD**

University College Cork School of Medicine, Ireland

### **KYLE LEMON, MD**

University of California Los Angeles School of Medicine

### **SEAN R. MCGUINNESS, MD**

St. George's University School of Medicine

### **DUNG-HOA (DIANE) NGUYEN, MD**

Tufts University School of Medicine

### **CASEY RIVES, MD**

University of Missouri—Kansas City School of Medicine

### **JEFFREY YIM, MD**

University of Hawaii Manoa School of Medicine

*A rotating panel of internal medicine physicians provide additional support on nights, weekends and holidays.* 🌻



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- Medicare Seminars by HICAP
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**TINA SCHUKART, MD**



**MICHELLE STEWART, MD**



**JUSTIN VOOG, MD**

**Asma Anwar, MD**, board certified medical oncologist and hematologist, joined Ridley-Tree Cancer Center's Hematology and Oncology Department in December of 2020. Dr. Anwar earned her medical degree at Fatima Jinnah Medical College for Women in Pakistan. After an internal medicine internship at the University of Connecticut and an internal medicine residency at the University of Washington, Dr. Anwar completed a hematology and oncology fellowship at the University of Washington/Fred Hutchinson Cancer Research Center. Prior to joining Ridley-Tree Cancer Center, she worked as a medical oncologist at Ironwood Cancer & Research Centers in Arizona.

**Kristin DeHahn, NP-C** began a new role in January as a certified nurse practitioner at Ridley-Tree Cancer Center's Medical Oncology and Hematology Department, after working for five years as an infusion nurse. Kristin graduated from the University of Southern California's (USC) Family Nurse Practitioner Program. She also received her master's degree in nursing from USC, and her bachelor's degree in nursing from Rush University. She previously worked as a nurse at The Methodist Hospital in Texas.

**Kevin Kapadia, MD**, board-certified neurologist, joined the Neurology Department in November of 2020. Dr. Kapadia earned his medical degree at Wayne State University School of Medicine in Detroit and then went on to complete his neurology residency at the University of Wisconsin Hospitals and Clinics where he also went on to complete a fellowship in clinical neurophysiology. Since completing his fellowship in 2014, Dr. Kapadia has worked as a neurologist in a general neurology group practice in Wisconsin performing both inpatient and out-patient neurology consultation.

**April Kennedy, MD**, board-certified medical oncologist and hematologist, joined Ridley-Tree Cancer Center's Medical Oncology and Hematology Department in Solvang in February. She received her medical degree from the University of Oklahoma College of Medicine. Dr. Kennedy completed her residency at the University of California Davis followed by a hematology and oncology fellowship at the University

of Oklahoma Health Sciences Center/Stephenson Cancer Center. She previously worked as a medical oncologist at First California Physician Partners in San Luis Obispo and Central Coast Medical Oncology in Santa Maria.

**Stephanie Rashti, CRNP** joined the Palliative Care and Advanced Care Planning Department in December of 2020. Stefanie earned her master of science in nursing and adult gerontology-acute care nurse practitioner degree at the Thomas Jefferson University in Philadelphia, and is currently enrolled in the Doctor of Nursing Practice Program at West Chester University of Pennsylvania. Prior to joining Sansum Clinic, she worked at Thomas Jefferson University Hospital in Philadelphia as a palliative care inpatient nurse practitioner.

**Tina Schukart, PA-C** joined the Surgery Department in October of 2020. Tina earned her Masters of Public Health in epidemiology at the University of California, Los Angeles. She then went on to complete her Master of Physician Assistant Practice at the University of Southern California. She has worked in several different practice settings in south/central California, most recently at American Indian Health & Services in Santa Barbara where she managed care for patients in family practice, women's health and geriatrics.

**Michelle Stewart, FNP-BC** joined Sansum Clinic's Internal Medicine Department in February. She's board certified by the American Nurses Credentialing Center and received her degree from West Virginia University.

**Justin Voog, MD, PhD**, board-certified radiation oncologist, joined Ridley-Tree Cancer Center's Radiation Oncology Department in January. Prior to joining Ridley Tree Cancer Center, Dr. Voog held academic positions at Memorial Sloan Kettering Cancer Center and the Massachusetts Institute of Technology. He earned his medical degree from the University of California San Diego. Dr. Voog completed his internship at Scripps Mercy Hospital in San Diego, followed by a residency at Harvard's Radiation Oncology Program. 🌻

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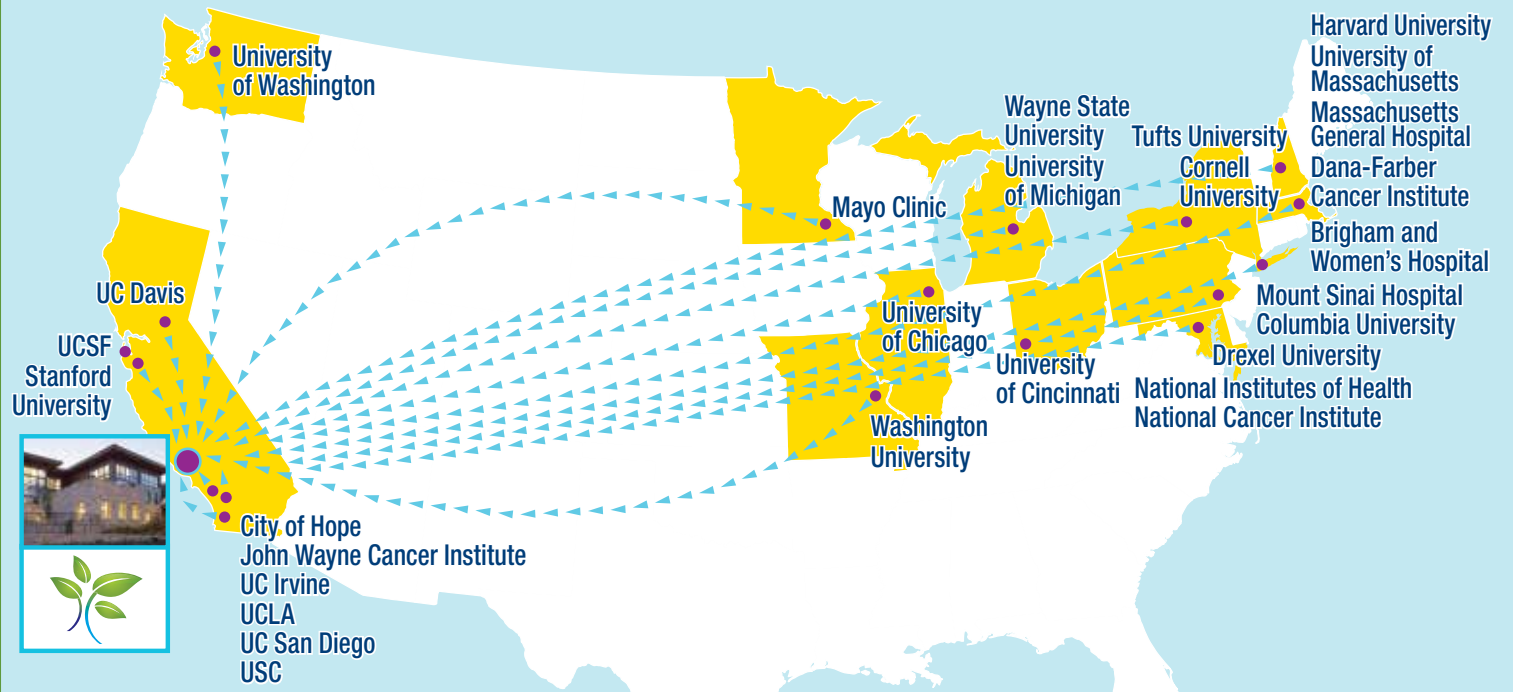
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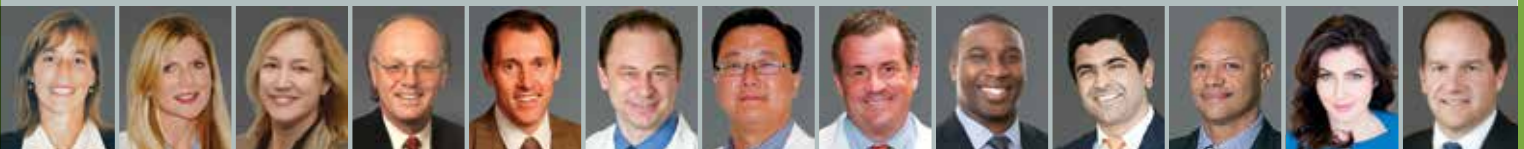
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*For more information, visit [covid19.sansumclinic.org](https://covid19.sansumclinic.org).*

