



# the M e s s e n g e r

YUKON-KUSKOKWIM HEALTH CORPORATION

"Working Together To Achieve Excellent Health"

Volume XXV No. 8 · August 2020

## WHY DO YOU WEAR A MASK?



As we learn more about the novel coronavirus, or COVID-19, and how easily it spreads, YKHC and the Centers for Disease Control recommend everyone wear a mask in public when physical distance cannot be maintained. Because we can never know when a COVID-19 infection could lead to serious illness or death, wearing a mask can help save lives during this global pandemic. What or who inspires you to wear a mask?

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## COVID-19 RESOURCES

Covid-19 Nurse Triage Line

**543-6949**

— If you are feeling sick, or seeking medical advice.

Behavioral Health COVID-19 Emotional Support Phone line

**543-6272**

— Talk to a behavioral health team member and get some help to alleviate your worries.  
9 a.m. to 5 p.m., Monday-Friday

Behavioral Health Emergency Services

**543-6499**

— For suicidal ideation, severe depression, decompensation, or serious issues call 24/7

SAMHSA (Substance Abuse and Mental Health Services Administration) Disaster Distress Helpline

**1-800-985-5990**

— or text TalkWithUs to 66746 to connect with a trained crisis counselor.

YKHC Website

**www.ykhc.org/covid-19**

Centers for Disease Control & Prevention

**https://www.cdc.gov/coronavirus/2019-nCoV/**

## RESOURCES

YKHC main switchboard ..... 543-6000  
 Toll Free ..... 1-800-478-3321

## APPOINTMENTS

Outpatient Clinics ..... 543-6442  
 Dental ..... 543-6229  
 Optometry ..... 543-6336  
 Audiology ..... 543-6466

## SUBREGIONAL CLINICS

Aniak ..... 675-4556  
 Emmonak ..... 949-3500  
 St. Mary's ..... 438-3500  
 Toksook Bay ..... 427-3500  
 Hooper Bay ..... 758-3500

## SERVICES

Inpatient (North Wing) ..... 543-6330  
 Pharmacy Refill Line ..... 543-6988  
 Toll Free ..... 877-543-6988  
 Physical Therapy ..... 543-6342  
 Women's Health ..... 543-6296  
 Irvivik Birthing Center ..... 543-6346  
 Behavioral Health Services ..... 543-6100  
 BH CRISIS RESPONSE LINE ..... 543-6499  
 Substance Abuse Treatment ..... 543-6730  
 Sobering Center ..... 543-6830  
 Developmental Disabilities ..... 543-2762  
 Emergency Room ..... 543-6395  
 Office of Environmental Health & Engineering,  
 Injury Control & EMS ..... 543-6420

## ADMINISTRATION & SUPPORT

Administration ..... 543-6020  
 Human Resources ..... 543-6060  
 Public Relations ..... 543-6013  
 Travel Management ..... 543-6360

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For questions, comments, submission of articles, or subscription information, write to Messenger Editor, Yukon-Kuskokwim Health Corporation, P.O. Box 528, Bethel, Alaska 99559; or call 907-543-6039. E-mail: [publicrelations@ykhc.org](mailto:publicrelations@ykhc.org)

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The Messenger is also available for download on our website at [www.ykhc.org/messenger](http://www.ykhc.org/messenger). Please ask permission to reprint articles or pictures.

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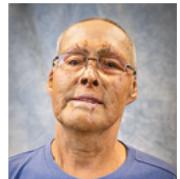
**ATTENTION:** If you speak Yup'ik, free translations services are available to you. Call 907-543-6603.

## YKHC BOARD OF DIRECTORS

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Alakanuk



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Kotlik

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St. Mary's

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VACANT

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#### Member



James Charlie, Sr.  
Toksook Bay

# Message

## from the President & CEO



Dan Winkelman, President and CEO.

As we gear up for fall time subsistence activities like berry picking and hunting, I will provide you an update on our latest COVID-19 response across the YK Delta.

As of July 24, 2020, we have tested nearly 9,000 people for the coronavirus across the Yukon-Kuskokwim Delta. We have several great teams that perform tests in our villages and here in Bethel.

Standing behind them is a very long line of YKHC staff that provides support in a variety of ways — cleaning facilities; ordering testing supplies and PPE; scheduling tests; registering customers; health aides, nurses, nurse practitioners, physician assistants, physicians and other providers detecting signs and symptoms and caring for positive cases; processing COVID-19 tests in our lab or forwarding to the State or commercial labs; performing contact tracing; administrators planning, organizing and paying for these important activities.

I commend our healthcare personnel and all YKHC staff for our testing program!

In four months, performing nearly 9,000 tests in a region of about 30,000 people who mostly live in remote areas, is a phenomenal achievement. This is even a greater achievement when you consider the numerous obstacles we encounter. For example, not enough testing supplies; not enough PPE for a possible future COVID-19 surge; lab times that continue to grow longer while waiting for testing results, making our testing program less effective; not enough regularly scheduled flights to some villages to transport testing staff and testing supplies timely; and not everyone opting for testing at the Bethel airport upon arrival. This last issue warrants more discussion.

In July, I testified at the Bethel City Council meeting and advocated for the City of Bethel to mandate a reasonable ordinance requiring passengers to either have documentation of a negative COVID-19 test upon arrival to the Bethel airport or opt for a free test at the Bethel airport or isolate for a pe-

riod of time. This is based upon the same criteria the State of Alaska requires for all incoming travelers to the State.

Since then, YKHC has discussed this possibility with the State of Alaska and City of Bethel's attorneys and is actively continuing those discussions. As we continue to see community spread of COVID-19 worsen outside of our region, testing upon arrival to Bethel becomes even more important, especially when Bethel is the gateway to our Yukon-Kuskokwim Delta.

Let us not wait to act. Let us not wait until community spread is in Bethel or another village. Instead, let's act as a community and a region to prevent it by enacting a reasonable City of Bethel ordinance requiring incoming passengers to either have documentation of a negative COVID-19 test upon arrival to the Bethel airport within 72 hours, or opt for a free test at the Bethel airport upon arrival, or require isolation for a period of time.

In addition to a reasonable City of Bethel testing ordinance, we can also do our part individually by continued universal masking around others, frequent hand washing, good personal hygiene, and social distancing. Not one of these tactics alone will prevent COVID-19. However, if we can do all of them as a community, it will reduce our risk of community spread in our region. All of us practicing these simple measures will give businesses the best chance to remain open, protect our civil liberties and protect our health.

Sincerely,

A handwritten signature in black ink, appearing to read "Dan".

# COVID-19 UPDATE

During the global COVID-19 pandemic, YKHC remains here for you and your family. Since early 2020, well before the virus arrived in Alaska, we have been working hard to prepare our health system and region to respond to COVID-19 in the YK Delta. As we continue to learn about this new virus and measures that protect us against it, we'd like to offer the following information to help our readers understand what you can do to help protect yourself, your loved ones, and your neighbors.

## WHAT IS CONTACT TRACING?

There are many steps we can take together to control the spread of COVID-19. We often hear about the importance of wearing masks, washing hands, and maintaining six feet of physical distance from others whenever possible. Some of the few tools healthcare and public health officials have to help control spread of the virus include testing, isolating individuals with COVID-19 infections, and contact tracing.

### Why is contact tracing important?

When doing contact tracing, a health professional will interview someone who is known to have an infectious disease to identify where they have been and who they may have been in contact with during their infectious period. The individual with the infectious disease is called the “index” case. There are two types of contacts with index cases—close contacts and general population contacts.

*Close contacts* are typically defined as anyone who has been less than 10 feet from an index case for more than 15 minutes. They could also be people who were coughed or sneezed on by the index case, or someone who was in very close proximity to the index case with minimal air circulation for an extended period of time, such as a small airplane ride. To prevent further spread of COVID-19, we ask all close contacts identified through tracing to quarantine for two weeks

(from the date of the last close encounter with the index case), because it can take that long after exposure to the virus for a close contact to develop symptoms of their own if they were infected. Someone from YKHC will call close contacts each day to see how they are doing, and what support they may need while on quarantine.

*General population contacts* are individuals who may have been around the index case during their infectious period, but not close enough to be considered close contacts. General population contacts are advised to monitor themselves for symptoms for two weeks and wear a mask whenever they're in public, but are not required to quarantine like close contacts.

YKHC's Office of Environmental Health (OEH) is assisting the State of Alaska with contact tracing when someone in the YK Delta tests positive for COVID-19. These calls can often feel invasive and it can be frustrating not to be told where you were exposed or who the index case was that you were around. We recognize these calls are not easy. The trained team from OEH does everything possible to protect your identity and the identity of the index case, but that information is withheld to protect the privacy of everyone involved.

## QUARANTINE VS. ISOLATION

Throughout this pandemic, we have frequently heard terms such as *hunker down*, *isolation*, and *quarantine*. These terms are similar, but have slightly different meanings. All three are public health practices used to prevent people from exposure to individuals who have or may have a contagious disease.

*Hunker down* limits residents to staying home as much as possible. They can leave the home to work in critical jobs, get food and important goods, seek health care, and recreate outside. During a hunker down, communities are asked to

mon	tue	wed	thu	fri	sat	sun
Last close contact with person who has COVID-19	.....	1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31	14 DAY QUARANTINE	

*Please note if your quarantine starts at noon on day 1, then it would end at noon on the last day.*

see COVID-19 UPDATE, page 5

## COVID-19 UPDATE, from p. 4

close all non-critical businesses. While similar to quarantine, hunker down is less restrictive. We limit unnecessary interactions, such as attending public gatherings or going to the store, but don't completely avoid them.

*Quarantine* and *isolation* require individuals to stay home; or, if they go outside, they must not be in a public space or within six feet of other people.

*Isolation* is used to separate individuals with COVID-19 from others, or to separate sick people with a contagious disease from people who are not sick. If you are sick with symptoms of COVID-19 or test positive for COVID-19 you will be asked to self-isolate.

Individuals who are isolating should stay in another room of a home when possible. If you have to be around other people, like sharing a room or going to the clinic, wear a mask. Medical providers will give individuals who are isolating specific advice on when you may end home isolation.

*Quarantine* separates and restricts the movement of people who might have been exposed to COVID-19 away from others, so they can monitor if they become sick. Quarantine helps to prevent spread of disease. People are asked to quarantine when they may have been exposed to a disease and do not know it, or they may have been infected with the virus but do not show or feel symptoms. People in quarantine should stay home, separate themselves from others, monitor their health, and follow directions from their state or local health organizations.

<https://www.hhs.gov/answers/public-health-and-safety/what-is-the-difference-between-isolation-and-quarantine/index.html>

[https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html?CDC\\_AA\\_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fif-you-are-sick%2Fquarantine-isolation.html](https://www.cdc.gov/coronavirus/2019-ncov/if-you-are-sick/quarantine.html?CDC_AA_refVal=https%3A%2F%2Fwww.cdc.gov%2Fcoronavirus%2F2019-ncov%2Fif-you-are-sick%2Fquarantine-isolation.html)

## UNDERSTANDING TESTING, RESULTS, AND IMPORTANCE OF QUARANTINE

The most common tests for COVID-19 look for isolated sections of the virus from a swab taken from a person's nose or throat. Tests taken at YKHC are typically sent to ANTHC to be processed on the Abbott m2000 RealTime system, but they can also be sent to the State of Alaska to run a real time Reverse Transcriptase (RT) Polymerase Chain Reaction (PCR) diagnostic panel. YKHC also has limited availability to conduct two types of on-site rapid testing using the Abbott ID-NOW and Cepheid Xpert Xpress PCR tests.

All of these tests look for a specific section, or sections, of the virus' genetic material. Depending on lab backlogs and transit times, tests may require several days, and possibly up to two weeks, to return results. Test results for on-site rapid testing completed at YKHC may come back between two and six hours. Because of how the tests work, if a test result

### Who needs to quarantine?

- Anyone who has been in close contact with someone who has COVID-19. If you are unable to separate from other household members while on quarantine, the entire household will be asked to quarantine with you. *Remember, close contacts must have been within six feet of someone with COVID-19 for at least 15 minutes.*
- You provided care at home to someone sick with COVID-19. You had direct physical contact with the person (touched, hugged, or kissed them). You shared eating or drinking utensils.
- Someone with COVID-19 sneezed, coughed, or somehow got respiratory droplets on you.

### When to start and end quarantine

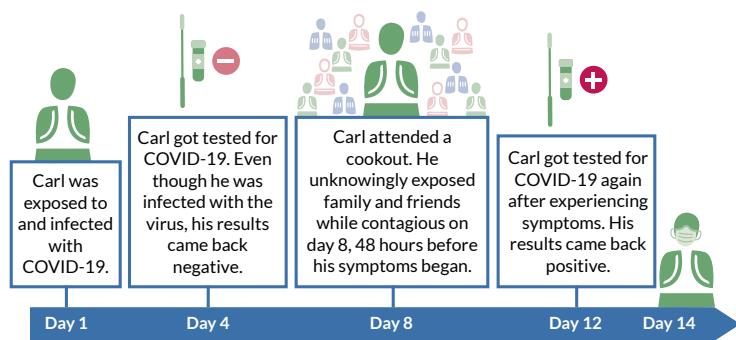
You should stay home for 14 days after your last contact with a person who has COVID-19. Even if you test negative for COVID-19 or feel healthy, you should continue to quarantine since symptoms may appear 2 to 14 days after exposure to the virus.

### Steps to take

#### Stay home and monitor your health

- Stay home for 14 days after your last contact with a person positive for COVID-19.
- Watch for fever (100.4°F), cough, shortness of breath, or other symptoms of COVID-19. If possible, stay away from others, especially people who are at higher risk for getting very sick from COVID-19.

comes back positive, it is almost certain that the person has contracted the virus.



### 14 Day Incubation Period of COVID-19

Testing negative for COVID-19 does not guarantee you are not infectious with the virus. It can take up to 14 days from time of exposure for you to test positive for COVID-19.

see TESTING, p. 11

# Healthy Living

WORLD  
BREASTFEEDING  
WEEK

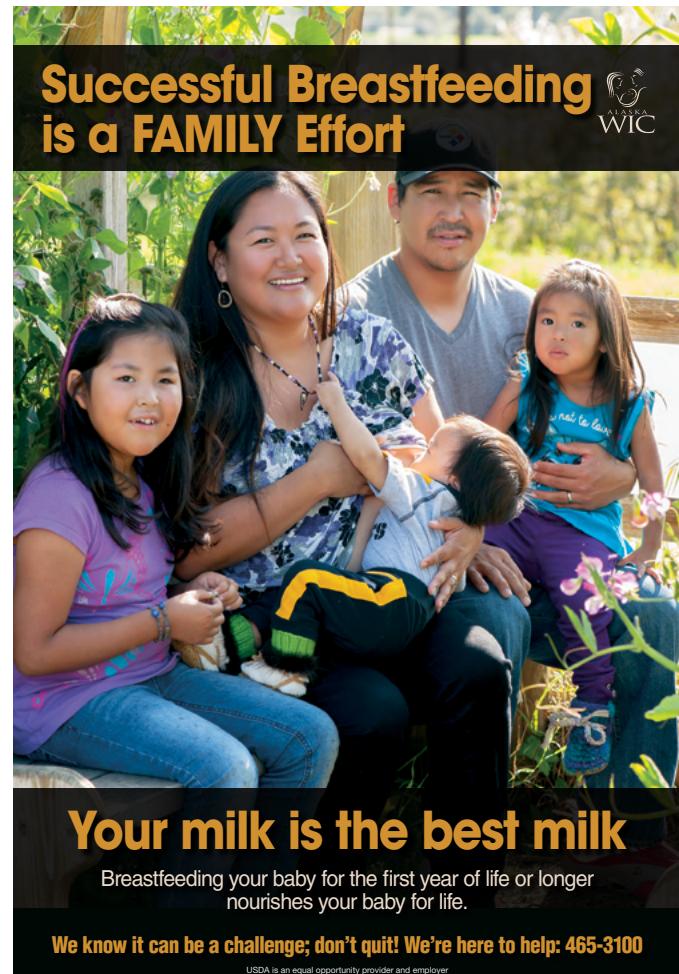
## BENEFITS OF BREASTFEEDING FOR MOM AND BABY

### Mom

- Aids in losing “baby weight” faster.
- Closer bond with baby body produces oxytocin- bonding hormone.
- Decreased risk of breast cancer with prolonged breast-feeding duration.
- More sleep vs bottle feeding and more time to rest through the day during feedings due to no measuring, mixing, or sterilizing.
- Decreased risk of Post-Partum Depression as body produces serotonin, known as the “happy hormone.”
- Decreased post-delivery bleeding; and uterus returns to normal faster.

### Baby

- Breast milk is easier to digest, leading to fewer instances of diarrhea and constipation.
- Fewer ear infections and higher immune system function due to antibodies found in breast milk.
- Less likely to develop diabetes or obesity later in life.
- Higher IQ due to specialized enzymes and growth hormones which aid in brain development.
- Decreased risk of SIDS (Sudden Infant Death Syndrome)
- Less likely to overfeed when fed at breast or using paced bottle feeding with expressed milk.
- Breast milk may aid in clearing skin problems/rashes when added to bathing water.
- Breast milk applied to “gooky eyes” and stuffy noses can help clear the issues faster.



### Recipe of the Month: PEANUT BUTTER BALLS

#### Ingredients

- 1 cup dry oatmeal
- 1/4 cup peanut butter
- 1/4 cup honey or maple syrup
- 1/4 teaspoon vanilla (optional)
- 1/2 cup chocolate chips

#### Instructions

Mix all ingredients in a large bowl. Form mixture in 1-inch balls and place onto plate. Place plate into refrigerator to chill before eating.



## AUGUST IS NATIONAL IMMUNIZATION AWARENESS MONTH

by Andrew Palm, MSN RN CNE,  
Well-Child/Immunizations RN Coordinator

### Flu Vaccination

Good news for the upcoming flu vaccination season starting in September. The flu vaccines will all offer protection against four expected strains of Influenza. This includes the high dose vaccine for elders aged 65 and older.

YKHC has been working very proactively to protect our patients, staff, and community from the flu this season. We are pleased to report that 99% of our health care personnel received their seasonal flu shot this year, up six percent over last year.

With the flu vaccination season's end on June 30, we gave a final total of 10,214 doses of flu vaccine to our patients, staff, and community. This is an increase of 49 percent over the 2018–19 flu season and shows a continuing increase in the acceptance of flu vaccination as protection. This was a remarkable result, which is due to the efforts of many YKHC health aides, providers, nurses and other staff. Thanks to all of you for a job well done!

Flu vaccination is even more important this year because of the risk of being infected with both the flu and COVID-19 at the same time. As we start a new flu vaccination season in September, it will be very important to make sure you get your seasonal flu shot which will provide your strongest protection from the flu. We look forward to seeing you then!

### Children's Vaccines

Keeping children safe includes keeping vaccinations up to date to prevent serious diseases that we have mostly eliminated from the Delta. If you do not know if your child is protected, please call your local YKHC clinic and ask if he or she is due for any vaccines.

The entire YKHC team has been working very hard to maintain and increase childhood vaccination rates in the YK Delta

despite the disruption caused by the COVID-19 pandemic. Village clinics changed hours so well visits, including vaccination updates, are separated by time from sick visits. Clinic staff have been receiving updated lists of children in each village who are due for vaccinations and calling them to come in for needed vaccines. The Well-Child/Immunization office has been sending letters to parents and guardians letting them know their children have vaccinations due.

CHAP Itinerant Providers have been making trips to villages without health aides. In addition, outpatient providers have been increasing their visits to villages to make up for the Medicaid travel restrictions that limit trips from villages to the Bethel hospital. The CHAP program has float health aides who fill in for village clinic health aides in their absences as well as Basic Training Instructors who travel to villages and support health aides. All of these YKHC practitioners are able to give vaccines and would be pleased to see you while they are there.

### Adult Vaccines

Adults need to keep their vaccinations for certain diseases current even as they get older. We all know about the risk of tetanus and getting a "tetanus shot" every few years after we become adults. What you get is usually a Tdap vaccination that protects you from tetanus, diphtheria, and pertussis. You need it every 10 years.

The Alaska Vaccine Assessment Program (AVAP) expanded eligibility for adults in 2020 so all vaccines on the ANTHC recommended list, which follows CDC recommendations, are available to all Alaskan adults at no charge. These include the Tdap, Hepatitis A and B, Meningitis, Human papillomavirus, Pneumococcal, Measles/Mumps/Rubella, Chickenpox, Shingles, and Influenza vaccines.

It is important for adults to be protected from these diseases both for themselves and for children and other adults they have contact with. We encourage you to do your part and keep your vaccinations up to date!

## POLIO, ATOMIC BOMBS, AND THE UNFORESEEN CONSEQUENCE OF COVID-19

In the 1950s, a U.S. civilian's two biggest fears were nuclear annihilation and the polio virus. Thanks to Jonas Salk and his non-patented vaccine, polio has been eliminated from the U.S. since 1979.

(<https://www.cdc.gov/polio/what-is-polio>.)

Smallpox, which, by some estimates, wiped out 90 percent of the population of the Western Hemisphere 400 years ago, has—thanks to vaccinations—been eradicated from the planet. (<https://www.pbs.org/gunsgermssteel/variables/smallpox.html>)

From the dawn of mankind until around 100 years ago, the global child/infant mortality rate hovered close to 50 percent. Today it's less than five percent, largely due to vaccinations. (<https://ourworldindata.org/child-mortality>)

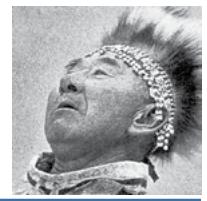
### Vaccines work.

August marks Immunization Awareness Month, which is why the publication on July 15th by the World Health Organization (WHO) is so alarming:

see VACCINES, p. 10

August 2020

For more information about PJCP, visit  
our website: [www.calricaraq.org](http://www.calricaraq.org)



# DR. PAUL JOHN CALRICARAQ PROJECT

**Guiding Principles:** Represent the Y-K region's Culture & Identity | Promote Customer Centered Care | Affordable Cost & Sustainable Operations

## PJCP CONSTRUCTION

At the Connector Link, installation of exterior siding systems continues. Casework, relite windows, built-in radius benches and fireplace stonework in the Gathering House were completed and the space was certified substantially complete on June 30. The Connector includes the Gathering House, Gift Shop, Patient Financial/ Travel and Phase 2 of the Outpatient Pharmacy. However, currently, the Connector is only being used for access from the main clinic entry to the Emergency Department waiting room, Diagnostic Imaging and the Cafeteria.

A decorative radius wood ceiling will be completed in the waiting area for Outpatient Pharmacy this month. In the Clinic, temporary en-



Gathering House with fireplace and Cafeteria beyond.

closed dental suites remain in place for treating patients with additional means of separation, versus open operatories, during this pandemic period.

The electrical contractor has been working throughout July to tie-in emergency power from the new generators to the new hospital emergency power electrical room transfer switch and panels.

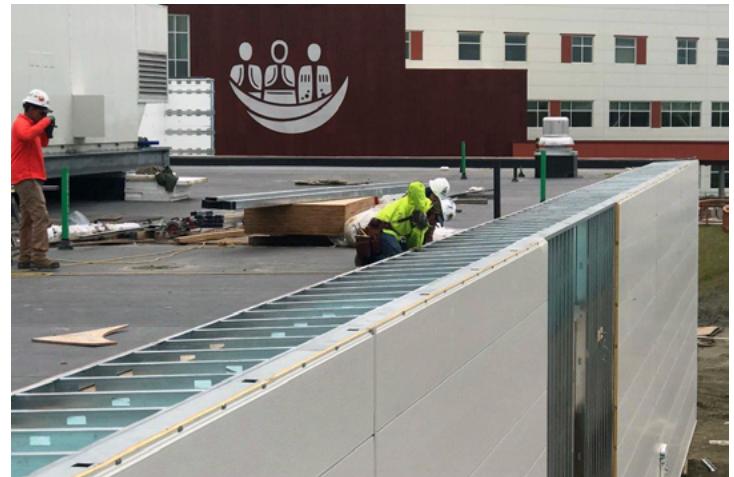
## HOSPITAL RENOVATION

The hospital parking lot closure and demolition of the old main entry and boardwalks began in early July to make way for the newly designed entry area. The new entry will include an interior (heated space) ramp for access to the emergency room, Diagnostic Imaging and associated departments.

Testing and balancing of the HVAC system, and certification of the medical gas system for Emergency and Diagnostic Imaging was



Connector corridor open between Clinic and Gathering House



Installation of metal panel veil over existing siding at hospital

completed in June. Skytron was on-site to install the procedure lights in the Emergency Department trauma room and exam rooms. Final cleaning touches and punch-list item corrections were made, and cultural wall art placed. Nurse call, door security access and fire alarm systems were tested and commissioned in late June. YKHC installed medical and IT equipment as the Emergency Department was relocated from their temporary space to the new renovated space and reopened on July 1. The renovated ambulance bay reopened at the same time.

In the Surgery and Central Sterile remodel areas, plumbing, mechanical, electrical and insulation at above ceiling spaces is proceeding. Drywall tape and paint, wall protection finishes, and flooring continued in July. Above-ceiling ductwork installation at the operating rooms is being completed this month. Structural testing of the OR equipment and anesthesia boom supports was successful. The extension of the Servery, Café and Dining area continues.

## AUGUST IS CHILDREN'S EYE HEALTH AND SAFETY MONTH

Along with school supply shopping and purchasing those back-to-school clothing items, it's time to make comprehensive eye exam appointments for the kids. Conveniently, August is designated as Children's Eye Health and Safety Month!

A good rule of thumb is to have your child's eyes examined during well-child visits, beginning around age three. Your child's provider can help detect refractive errors such as nearsightedness, farsightedness and astigmatism as well as the following diseases:

- Amblyopia (lazy eye)
- Strabismus (crossed eyes)
- Ptosis (drooping of the eyelid)
- Color deficiency (color blindness)

If you or your provider suspects that your child may have a vision problem, you can make an appointment with your local optometrist for further testing. There are some specific warning signs that may indicate that your child has a vision problem. Some of these include:

- Wandering or crossed eyes.
- A family history of childhood vision problems.
- Disinterest in reading or viewing distant objects.
- Squinting or turning the head in an unusual manner while watching television.



Keeping your children's eyes safe is another part of maintaining healthy vision. Eye injuries are the leading cause of vision loss in children. There are about 42,000 sports-related eye injuries every year in America, and children suffer most of these injuries. Help prevent your child from being one of the more than 12 million children who suffer from vision impairment by remembering a few basic rules of safety:

- All children should wear protective eyewear while participating in sports or recreational activities such as boating, four wheeling or snowmachining.
- Purchase age-appropriate toys for your children and avoid toys with sharp or protruding parts.

Help your children have a successful school year by scheduling a comprehensive eye exam and taking safety measures to ensure their eyes are free from injury.

**For more information about children's eye exams, visit <https://yoursightmatters.com/prevention/comprehensive-eye-exams/> or call YKHC Optometry at 907-543-6336**

## USING THE MyYKHealth PORTAL

The HealteLife application, commonly referred to as MyYKHealth, is a secure, web-based service that enables collaboration between patients and providers. MyYKHealth includes the following patient services:

- **Send Secure Messages to Your Case Managers**
- **View Upcoming Appointments**
- **View Test Results**
- **Health Record.**

You can find appointment instructions, medications, immunization records, and more. Keep your record up-to-date to help you and your care providers.

*Remember; this is not a complete health record. Some results such as radiology reports or provider notes may not be viewable.*

- **Manage other accounts.**

With proper consent, caregivers can view medical records

of family members and for children up to the age of 18 years old.

Parents, this is an excellent way to track which immunizations your child has received! To do this: log into your MyYKHealth account, select the account you want to view by clicking on the dropdown arrow next to your name, and click on "Visit Summaries" and then select Health Profile or Procedures. *Minors will need to reactivate their myYKHealth account at the time of their 18<sup>th</sup> birthday.*

If you already have a MyYKHealth account, simply go to the <https://www.ykhc.org> website, and click on the "myYKHealth Log-In" button.

If you don't have a myYKHealth account, but have an email address on file with Registration, you can self-enroll by following these steps:

**See PORTAL, p. 11**

# CHAP NEWS

## Community Health Aide Program

### APRIL HEALTH AIDE OF THE MONTH

#### Josephine Henry, CHA II, Quinhagak

Josephine Henry, CHA II, is from the village of Quinhagak. Quinhagak is rapidly growing in numbers and is busy with people coming in and out of the village due to fishing. They are busy 24/7 with patients needing care.

Josephine encountered many difficult patients needing additional support in the month of April. She manages well in high stress situations, and is able to control the situation as well as give support to her fellow coworkers. She, alongside her coworkers, cared for an urgent prenatal patient that required medevac, and stabilized the patient enough to be sent. She responded to tough calls during the situation and kept her composure.

Although we are unable to disclose any information regarding what Josephine did, we appreciate the hard work. Thank you, Josephine, for the untiring help you give to your community during these difficult times. We at YKHC CHAP appreciate you! Quyana.



Josephine Henry, CHA II.

### THE HECKMANS OF PILOT STATION

Gwendolyn Heckman recently completed all the requirements for her Certificate as a Community Health Practitioner. She is skilled and experienced in a broad range of health encounters including sick and well children, emergency, acute, chronic, and preventative care. She has a gentle nature which puts her patients at ease. She goes about her work so efficiently she makes it look easy; but we know it is not.

Luckily, she lives near the clinic so she can quickly check on her three beautiful children. Her mother Dorothy and extended family members' support during her time away from Pilot Station has been a key factor in her success.

Having served her community for more than five years, she is a great example of the capable, reliable, and reassuring presence of Community Health Practitioners throughout the YK Delta. *Quyana caknek*, Gwendolyn, for your hard work and commitment to improve the health status of your community!

—Rita Kalistook FNP, Basic Training Instructor



Gwendolyn Heckman, center, is part of a strong team that includes Rose Zacharof, Office Assistant, on left; Bobby Heckman, Community Health Practitioner (in the back); and Bobby's father Stanley Heckman, Behavioral Health Aide.)

### VACCINES, from p. 7

The WHO, CDC and other health partners polled 82 countries in June. Sixty-nine percent of countries said their vaccine efforts were disrupted or suspended due to the pandemic. The most common reasons for disrupted vaccine programs were shortages of personal protective equipment, travel restrictions and a lack of available health workers.

Preliminary data for January through April also shows a "substantial drop" in the number of children receiving three doses of the vaccine against diphtheria, tetanus and pertussis, the WHO said.

Good news! The YK Delta continues to prove to be exceptional. According to Deb Magnuson, a family Nurse Practitioner in the Bethel Outpatient clinic, "Our hard-working well child/immunization department has a notable rise in fully vaccinated children at age 5 over the past year!" Well done, Delta!

Let's keep that trend going. Make vaccines a priority. Continue to push through the noise and confusion to get your children *all* of their vaccinations *on time*.

Now, if we could only figure out that nuclear annihilation thing.

[https://www.beckershospitalreview.com/public-health/missed-childhood-vaccines-could-be-bigger-threat-than-covid-19-who-says.html?origin=QualityE&utm\\_source=QualityE&utm\\_medium=email&oly\\_enc\\_id=676616034934AO](https://www.beckershospitalreview.com/public-health/missed-childhood-vaccines-could-be-bigger-threat-than-covid-19-who-says.html?origin=QualityE&utm_source=QualityE&utm_medium=email&oly_enc_id=676616034934AO)

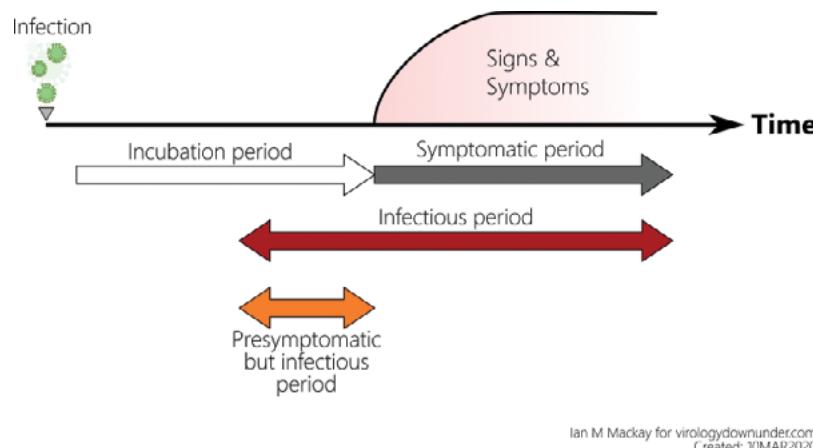
## TESTING, from p. 5

A negative test result is less definitive. A person infected with COVID-19 could get a “false negative” result if the swab missed the virus or there were errors in DNA replication with the PCR tests. Test results are also more likely to return a positive when the test is taken at certain points during the course of illness, as our bodies shed different levels of virus.

The chances that a COVID-19 test will give you a false negative—leading you to believe that you do not have the virus when you actually do—depend on the type of test you have and when in the course of your infection the test is performed. A test could

return as negative if it is performed after a person is exposed to the virus, but before becoming symptomatic because the body has not yet started to shed the virus. This period of time is different for different people and can range from three to 14 days—although most people start developing symptoms between five and eight days from exposure.

Despite a negative test, a person may still be infectious in the period of time between exposure and symptoms, which is why quarantining after travel is so important. As the graph below illustrates, an individual can be exposed to the virus on



day one, be tested on day three, and receive a negative test result a few days later. If the patient was tested again on day 10, after symptoms begin, they would get a positive result. This means an individual could spread the virus the entire duration between day 3 and 10, putting their community and the public's health at risk.

According to a Harvard report, an individual will receive a false negative about 40% of the time when tested four days after exposure to COVID-19. Even if someone has developed symptoms, false negative test rates can be as high as 20% of the time when tested three days after symptoms begin.

The risk of false negatives is well-documented. The time between exposure and symptoms is the period when viral shedding and the possibility of spreading to other people is the highest. Symptoms, even subtle, could be due to COVID-19. Anyone exposed to someone known to be infected, traveled to high-risk areas including Anchorage, or engaging in other high-risk activities that could result in exposure, must quarantine for 14 days, even if they test negative for coronavirus. Our community's health is everyone's responsibility.

<https://virologydownunder.com/politically-infectious-period/>

<https://community.pepperdine.edu/healthcenter/gethelpnow/continuing-care-during-covid19.htm>

## PORTAL, from p. 9

- Make sure the Registration department has your email on file.
- Obtain your Medical Record Number (MRN) from the Registration department or locate your MRN number on any discharge paperwork from previous YKHC appointments.
- Go to <https://ykhc.iqhealth.com/self-enroll/>.
- Fill out your information: Name, DOB, Last four digits of your SSN, and MRN.

Once you've created your account, go to your email and verify your email address. You will then be able to log in to myYKHealth.

### Frequently Asked Questions

#### How do I access myYKHealth?

Once you have an account set up, you can access myYKHealth anywhere you have access to the internet.

#### Is my information secure?

Yes, myYKHealth is HIPAA compliant and provides you with the ability to securely view, store, and share your health information.

## WHO'S COMING TO A CLINIC NEAR YOU?

The following providers will be bringing healthcare services closer to your home in the coming months. To schedule an appointment time, contact your village health clinic.

Dates are subject to change dependent on weather or other scheduling issues.

### August

#### Dental

<b>Chefornak:</b> Allison Ayapan, DHAT + 1	8/3-7
<b>Shageluk:</b> Tamija Woods DHAT and DA	8/10-14
<b>Sleetmute:</b> Tamija Woods DHAT and DA	8/24-28
<b>Family Medicine</b>	
<b>Mekoryuk:</b> Dr. Judy and Dr. Jeffers with two nurses	8/17-21
<b>Scammon Bay:</b> Anne Komulainen, PA-C, and Dr. Lisa Rotelli with two nurses	8/17-21
<b>Chevak:</b> Linda Hewett, FNP	8/4-6
<b>Mountain Village:</b> Denise Tran-Boelz, FNP	8/4-6
<b>Lower Kalskag:</b> Colleen Britt, FNP & CHAP	8/10-13
<b>Akiak:</b> Joan Daniels FNP and Angela Jackson FNP with two nurses	8/10-14
<b>Chevak:</b> Drs. Lye-Ching Wong and Emily Reilly with nurses	8/10-14
<b>Marshall:</b> Vicki Lear, PA-C	8/24-28
<b>Tuluksak:</b> Angela Waller FNP and nurse	8/24-28
<b>Tuntutuliak:</b> Tom Miller FNP and nurse	8/24-28
<b>Alakanuk:</b> Wednesday Henry, FNP with nurse	8/31-9/4
<b>Toksook Bay:</b> Dr. Lye-Ching Wong (pediatrician) and AFP resident	8/31-9/4
<b>Optometry</b>	
<b>Nightmute:</b> Drs Kalistook and Lucater	8/3-8
<b>Aniak:</b> Drs Conrad and Penaflor	8/10-14

#### Physical Therapy

<b>Kipnuk:</b> Eliza Caguioa, PT	8/26-28
<b>Tuntutuliak:</b> Erin Knowles, PT	8/11-13

### September

#### Dental

<b>Tununak:</b> Allison Ayapan, DHAT + 1	9/14-18
<b>Family Medicine:</b>	
<b>Chevak:</b> Linda Hewett, FNP	9/1-3
<b>Mountain Village:</b> Vicki Lear, PA-C	9/7-9
<b>Chuathbaluk:</b> Rachael Youngblood - FNP & CHAP	9/14-16
<b>Chevak:</b> Sandra Beeman PA-C & Gransbury	9/21-25
<b>Anvik:</b> Rachael Youngblood FNP & CHAP	9/21-23
<b>Shageluk:</b> Rachael Youngblood FNP & CHAP	9/24-25
<b>Pilot Station:</b> Denise Tran-Boelz, FNP	9/22-24
<b>Upper Kalskag:</b> Colleen Britt FNP & CHAP	9/28-10/1

### October

#### Family Medicine

<b>Russian Mission:</b> Rachael Youngblood FNP & CHAP	10/5-8
<b>Chevak:</b> Linda Hewett, FNP	10/6-8
<b>Crooked Creek:</b> Colleen Britt FNP & CHAP	10/12-16
<b>Marshall:</b> Denise Tran-Boelz, FNP	10/19/23
<b>Grayling:</b> Rachael Youngblood FNP & CHAP	10/19-21
<b>Holy Cross:</b> Rachael Youngblood FNP & CHAP	10/22-23
<b>Chevak:</b> Sandra Beeman, PA-C	10/20-22
<b>Upper Kalskag:</b> Colleen Britt FNP & CHAP	10/26-30

## AUGUST SAFETY TIP: Avoiding Heat Related Illness and Death

How you can stay healthy when the summer heat hits!

The human body is normally able to regulate its temperature through sweating, until it is exposed to more heat than it can handle. Heat exhaustion and heat stroke can escalate rapidly, leading to delirium, organ damage and even death.

People most at risk include:

- Infants and young children, especially if left in hot cars.
- People 65 and older
- People who are ill, have chronic health conditions or are on certain medications
- People who are overweight

When the body loses excessive water and salt, usually due to sweating, heat exhaustion can occur. Signs and symptoms include:

- Sweating
- Pale, ashen or moist skin
- Muscle cramps (especially for those working or exercising outdoors in high temperatures)
- Fatigue, weakness or exhaustion
- Headache, dizziness or fainting
- Nausea or vomiting
- Rapid heart rate

Uncontrolled heat exhaustion can evolve into heat stroke, so make sure to treat victims quickly:

- Move victims to a shaded or air-conditioned area
- Give water or other cool, nonalcoholic beverages
- Apply wet towels, or have victims take a cool shower

Information obtained from [www.nsc.org](http://www.nsc.org)