

MEDICAL

May 2022

PROFESSIONALS

TREASURE VALLEY

**DR. CHARLES
DAVIS,**

**Chief of Medicine,
Boise VA Medical Center**

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from the PUBLISHER

By PUBLISHER **Becky Jones**, Becky.Jones@medprosmag.com

Welcome to Medical Professionals Treasure Valley

I hope that you enjoyed the first issue of the *Medical Professionals Treasure Valley* magazine! In our May issue, we are highlighting Dr. Charles Davis of the Boise VA Medical Center. What an amazing and caring leader in our community. When I first met Dr. Davis, I instantly thought, what a kind and gentle soul. He keeps three key things in mind as he leads and interacts with colleagues: clarity, cohesiveness and kindness. He is truly inspirational. I hope that you will take the time to read the full interview in this month's issue; there is so much to learn about Dr. Davis.

As we will honor those who died serving our country on Memorial Day, I hope you appreciate that, in this publication, we are celebrating those who served our country and continue to serve our people.

Over the next few months, I want to also take the time to revisit the purposes for this magazine and what it is. I know that each of you are taxed on time, so I'm hoping that this won't seem too repetitive as I want to reinforce some of the founding purposes and intentions of this new vehicle for the medical community.



The purpose of the publication?

This publication was born out of countless hours of conversations with many physicians and medical professionals, regarding the growing needs and challenges faced by healthcare practitioners in our local market, especially in the last few years. One of the main concerns we heard over and over again, was the lack of a good communication vehicle providing opportunities for collaboration between independent private practices, clinicians, specialists, family practices, and hospitals.

Thus, this magazine serves as a monthly forum, written by and for, those steeped within the various fields of the medical industry, in order for them to learn and share with one another in more efficient and effective ways. The more one knows about his or her own market, the more opportunities there are to collaborate, learn and apply new and progressive ideas for the practice, and therefore, in the end, helping to provide a healthier business and, of course, better quality patient care.

I wanted to remind all of you that this is also an open-source publication that offers exposure and dialogue for you and your practice. The articles are submitted by the physicians, and if you would like to share anything regarding your life, hobbies, interests, as well as anything dealing with the office, business or practice aspect of your life, please don't hesitate to reach out to me directly.

Until next time,
Becky Jones ✨



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HEALTHCARE WORKERS: SUPERHEROES OR ORDINARY MORTALS?



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This is not an article about resilience. Nor is it another simplistic self-care checklist sending a subtle message that if we are not OK at the moment, then we must be doing something wrong. Instead, this is a callout to what many in the healthcare industry are experiencing — grief, frustration, burnout — and to remind ourselves that it's OK to not be OK right now.



So, what has the past couple of years been like for you or your colleagues? That is a loaded question, no doubt. It's safe to say that the 2020s have required tremendous flexibility as we constantly had to pivot and adapt with each Covid surge. Many have also endured abuse or violence from patients and community members who originally were hailing healthcare workers as heroes. Add to that the constant exposure to suffering and death, whether seeing it on television, online, or in person. We witnessed financial, social, and political upheaval. So, let's call this out for what it is – heavy, distressing, a difficulty like we've never experienced in our lifetime.

Here is a truth: None of us is the same person we were in January of 2020. We have all changed in profound ways, and yet, along the way we tapped into something that kept us showing up even when we felt like crawling into a hole until the storm passed. That something is called grit – the strength of character, purpose and resolve to pursue a course despite challenges. Interestingly, that also fits one definition of courage: moving toward something we would rather avoid.

Despite the grit, courage, strength of character or whatever you might call it, many are also experiencing some level of grief, anger, helplessness, and hopelessness. As a community, a nation, and across the globe, we are experiencing collective grief and trauma with the accompanying emotions: denial, anger, bargaining, depression. This is common after any kind

of major crisis or disaster, but especially after epidemics and pandemics. You may find that you are burned out, suffering from compassion fatigue or moral distress. Whatever feelings you may be experiencing, they are *normal* considering all that you have endured, and you are not alone in those feelings. Those strong emotions are not a sign of weakness or that you are not a good healthcare provider. They are signals that you are tired, and your internal reserves are nearing depletion. They are also reminders of your dedication and compassion which makes you good at what you do, but also susceptible to secondary trauma.

When we are busy and stressed, the tendency is to jettison our own physical, emotional, and psychological needs because it would somehow feel selfish to do otherwise. We may also try to maintain some semblance of control over our emotions by numbing, avoiding, or stuffing them down. Remember the above-mentioned definition of courage: moving toward something we'd rather avoid. So rather than being a weakness, it is courageous to move toward those difficult emotions by acknowledging and validating whatever we are feeling. And yet, healthcare is notorious for having a culture of "I'm fine," and the pervasive message that we tell ourselves is that we shouldn't experience "negative" feelings or be struggling because, after all, "This is what I signed up for, so suck it up, buttercup." Sound familiar?

The result is we end up ignoring our own humanness as we berate ourselves because we're not measuring up to a perfectionist ideal. The fact is that healthcare workers

are not superheroes in a blockbuster movie where the heroes fight through a battle of destruction and mayhem only to be unscathed and "a-okay" in the very next scene as if it was just another day. No, we are ordinary mortals who get bruised and injured and need time to heal. We have the *responsibility* to give ourselves and others the grace to mend our injuries and to grieve what we have collectively lost: loved ones, friends, colleagues (from illness or suicide), patients, unity as a community and a nation, and loss of a way of life.

THE DEFINITION OF COURAGE: MOVING TOWARD SOMETHING WE'D RATHER AVOID

So, rather than holding ourselves up to some unattainable notion that we should plow through every challenge or crisis without acknowledging the struggle, we instead openly recognize that each of us is *human* in all our beautiful vulnerability. As we look ahead to whatever comes next, we must overcome the stigma of asking for help and seeking out support resources. We must also allow

ourselves to experience joy, awe, love, and to notice and savor those little moments of social connection.

About the author:

Michelle Arnett is a Manager in the Employee Wellbeing Center of Excellence at St. Luke's Health System. In her role, she works to support and foster a culture of psychological/emotional safety and wellbeing. She leads the Critical Incident Response Team (CIRT) to support staff after critical/clinical events, including suicide or death of a colleague. Her role also includes teaching peer-to-peer support techniques and psychological first aid.



She is trained in Critical Incident Stress Management and Suicide Awareness through the International Critical Incident Stress Foundation, Psychological First Aid through Johns Hopkins, and is a Compassion Fatigue Educator through the Green Cross Academy. Michelle is a Certified Lifestyle Medicine and Wellbeing Coach through WellCoaches® and the American College of Lifestyle Medicine. She obtained her Master of Health Science degree through Boise State where she also worked as a Research Associate in the Center for the Study of Aging. When she is not working, you can find her hiking in the hills and mountains, cycling, skiing or whatever fun outdoor adventure awaits. ✨

If you would like to submit an article on the well-being of our healthcare community, please contact becky.jones@medprosmag.com.



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We hire professionals in their respective industries because they are trusted advisors and considered an expert in their field of work. An expert is defined as someone who has “comprehensive knowledge or authoritative knowledge of or skill in a particular area.” Real estate professionals may not spend as much time as lawyers in obtaining their expertise, but it does take time and discipline to be a true trusted advisor for buyers and sellers who seek guidance on important life changes.

Not all real estate agents are created equal, just as all lawyers aren't. Here are three important questions to help you find the right agent for your needs:

1 WHAT IS YOUR AVAILABILITY?

Real estate provides the flexibility for Realtors to be autonomous with their schedules. Often it can be added as a secondary income source. Will it be important to you to have a full-time agent, or will your needs or schedule allow for someone with part-time availability?

Depending on the Realtor's schedule, some agents have support staff in place to help with showings and coordinate logistics. Asking who will be in charge of showing you the homes is a great question to ask if you prefer one-on-one interaction.

2 TELL ME ABOUT YOUR EXPERIENCE.

Maybe you are looking to build your dream home and need an agent who is well-versed in the new construction process. Or, you have a unique home in a niche area of your market. Does this person have the skill or experience to handle this type of sale?

Does the agent have months or years of experience? Is total volume or number of homes sold important to you? Are specific accreditations important?

3 HOW DO YOU COMMUNICATE WITH YOUR CLIENTS?

Each real estate transaction is unique - just like our personalities. If looking at data is important to you, be sure to ask if your agent can support you throughout the process with analytics that help you with decision-making.

Compatible communication styles can be the difference between loving and not loving an agent and your experience with them. Be sure to explain your communication preferences and preferred frequency of communication so expectations can be properly met.

The Treasure Valley has a wonderful network of talented real estate professionals who serve different needs in the marketplace. Taking the time to find the right one for your needs could not only save you time and headache, but also prove to be more profitable.

By: Dr. Charles Davis
Photographs By:
Foxbear Photography

“The most rewarding aspect [of being a physician] is the privilege to improve people’s lives, not always through the medicine but through the decency of caring.”

DR. CHARLES DAVIS

Chief of Medicine Boise VA Medical Center

FUN FACTS:

- Grew up in Star Valley, WY
- Has been in Boise for 15 years
- At age of 19, he served as a missionary in Chile for two years for his church.
- Initially went to college to become an archeologist and even received a degree in Anthropology
- Received a “special commendation medal” for his work as a military officer and physician in the Iraqi War
- Just celebrated his 26th wedding anniversary
- He has four awesome kids, two boys and two girls
- Enjoys cooking, especially grilling and smoking meat
- Since his appointment as Chief of Medicine, Boise VAMC was named “the best place to work” out of all 141 VA’s around the country

PROFESSIONAL QUESTIONS:

How did you start in medicine? Who or what influenced your decision to become a doctor?

I actually had not really considered a career in healthcare until late in my undergraduate years. I initially went to college to

become an archeologist and even received a degree in Anthropology. While working on that degree, and after spending some quality time with a pile of rocks and a toothbrush looking for charcoal, I realized it was, in the long run, not for me.

As I reconsidered my future, I thought back to the small Wyoming town that I was raised in and how the only physician in town was such a critical member of our community. His name was Dr. Perks, and he did so much good for our little town that it inspired me to look closely at medicine.

How did you choose your specialty?

I feel like my specialty chose me. My initial intent was to go into anesthesiology, but I found that as I trained and learned in primary-care clinics, the variety of cases and the relationship building that occurred with the continuity of care, became very attractive to me. I ultimately opted to pursue family practice.

Have you ever been close to quitting? How did you stay engaged and push through?

I didn’t ever really feel like quitting was an option. By time was halfway through

medical school, I was married and had a child, and they were counting on me to be successful. I am grateful to my wife for all of her support and sacrifice in helping me get through medical school and residency. It really was a team effort.

What are some of the most rewarding aspects of being a physician?

I think that the most rewarding aspect is the privilege to improve people’s lives, not always through the medicine but through the decency of caring. Although we can diagnose and treat and do a lot of good for people, it is not uncommon to see a patient whose fundamental needs or medical situation is beyond what you can fix medically. Even then, you can do something to make their day better. I always want my patients to leave the visit feeling better than when they came in, even if it’s just because they were treated with dignity and compassion.

Tell me about your role as Chief of Medicine for the Boise VA.

I have been at the VA for just over two years, and it has been a great experience. My main area of responsibility is over the in-patient services, the emergency room, specialty clinics and internal medicine residency program. I work with fantastic colleagues and staff that help make sure that we are providing the best care for our veterans. We have a wonderful culture here. As a matter of fact, last year, the Boise VA was named “the best place to work” out of all 141 VAs around the country.



Why do you think your patients trust you as their physician?

I think it's a combination of sincerely caring for them as people, following through on what I say I am going to do to help them, and engaging them in what matters to them as the patient. I often say that my job is to give them my best medical advice, and that is what I am going to do. They still get to choose what to do with that advice, and I respect their choice.

How do you maintain a work-life balance?

It can be a real challenge, and in previous leadership and clinical roles, I have really struggled. One of the things I really appreciate about the VA is that the culture here really supports efforts to keep that balance. At the end of the day, I refer to the adage "The most important thing is to make sure the most important thing is the most important thing." For me, that is family, faith, and work, in that order. I am always striving to keep that balance and not let one overtake the others.

How has practicing medicine changed since med school? In what ways do you hope to see practicing medicine evolve in the future?

Those of us who have been in practice over the last 20 years have been through a healthcare revolution. Medicine has moved from what was essentially a "cottage industry" to, in many ways, a corporatized business. There has been disruption of the financial, technological and relational aspects of healthcare along the way, not to mention the advances in healthcare itself. Not all of this



has been bad, and there have been many benefits from these changes. Hopefully, at the end of the day, we are providing better care to more people. I think that is yet to be seen.

If you could offer any advice to younger physicians, what would it be? How have you grown as a physician since med school?

When I started my training, the first piece of advice I received was "Trust nobody; if your mama says she loves you, double-check." As I've matured as a physician and executive, I have learned that good medicine is a team sport, and it requires a high level of collaboration, humility and dedication to working well with others. My advice would be that learning to play well in the sandbox is as important as learning the science of medicine. Learning your role on the health care team, doing it well, and respecting and trusting the others that also have important roles is crucial to future success.

How important is continuing education for you?

The science of healthcare is changing so fast, with major advancements occurring in every field. Staying up to date with continuing education is critical to both provide the best evidence-based treatment for your patients but to be able to be a strategic and forward-thinking leader. Along with staying current on healthcare innovation, I strive to stay current on my training and thinking as a healthcare leader.

What methods do you employ to keep improving your knowledge and experience?

One great thing about working at the Boise VA is the chance to be part of such a great learning environment. We are the largest provider of post-graduate medical education in the state, so there is always teaching and learning of some sort going on. I also have sources that I check on an almost daily basis that keep me updated on the latest issues in healthcare.

What makes your business/practice unique in our community?

The VA has the incredible mission to fulfill President Lincoln's promise "to care for him who shall have borne the battle, and for his widow and his orphan." We provide robust inpatient and outpatient services to the tens of thousands of veterans that live in this area. We also have a great research program and, as I mentioned, we are the largest provider of post-graduate medical education in the state with fantastic training programs.



What are your goals for your practice leadership?

The Boise VA Medicine Service prides itself as being focused on the needs of our veterans by providing the highest quality medical care and education in a dignified and efficient way. All of our efforts and our goals are geared toward achieving this vision. As the Treasure Valley grows, so too does our veteran population. We know that we must continue to grow our services and partner with the community in order to deliver on our promise to veterans.

What is the culture that you infuse into your practice leadership? What is special about your work team?

Before I came to Boise, I was in the Air Force. This gave me the opportunity to deploy on multiple occasions to Iraq. One of the things I learned on these deployments is *how critical the culture of the team is to our ability to be successful and also enjoy our jobs.* As a physician leader, I have a responsibility to help set the tone for that culture. I personally try to keep three key things in mind as I lead and interact daily with my colleagues. They remind me of my role as a leader and where my focus should be. These keys are clarity, cohesiveness and kindness.

What is your definition of quality care?

That has really changed over the years. When I started out as a physician, I viewed my patients as the people that were sitting in my exam rooms when I was at the office. Now we recognize that when a person is in their home, at an outside care facility, in the hospital and in our clinics, they are always our patients. There is always something we can be doing to improve their long-term health. I think that quality care is pro-



viding the best medical care at the right time, in the right place and the in right way. This change in focus has allowed me to be much more proactive in delivering health care, especially to the most vulnerable. I would add that it has become increasingly clear that not only is it important to get the medical decision-making right, but the actual interaction with the patient is also a critical aspect to delivering high-quality care.

Are there some practical actions you've initiated into your doctor/patient time to make help your patients have a more productive experience?

With the pandemic, we were obligated to further develop and perfect our remote-care modalities like telehealth and video visits. This has proven to be of real benefit to our veterans, especially those that live remotely. We will continue to improve and implement our virtual offerings even after the pandemic ends. Personally, I have learned that in order to help my patients have a more productive experience, I need to have thoroughly reviewed their records and reminded myself of where they are in their treatments, before the visit. There is nothing worse than seeing your doctor and spending most of the visit just trying to remember what was done last time!

What concerns keep you up at night? What are the staff's foremost concerns?

The pandemic and its impact on our patients and colleagues are still a major concern. How do we move forward in the face of such uncertainty? What awaits us three months, six months, or a year from now? That's anyone's guess. How do we catch up on the backlog of care that has arisen while we were all hands on deck for these several surges? This is still the predominant stressor for me and for our staff.



Covid-19 lessons learned? What will you adopt going forward?

For me, one of the biggest surprises with Covid is how quickly it was politicized and how severely it has polarized our communities. I think the medical community has learned that it needs to be much more proactive in extending its influence during healthcare crises. It has been wonderful to see the different health systems, medical groups and public health leaders work together in a coordinated effort. I hope that the spirit of cooperation and collaboration persists long after Covid is gone.

PERSONAL QUESTIONS:

Family life?

I just celebrated my 26th wedding anniversary to my wife, Anne. We have four awesome kids, two boys and two girls. The oldest are attending college in Eastern Idaho at BYU, and the youngest are in school here in Boise.

Fun facts: Where are you from/where have you lived/favorite holiday?

I grew up in Star Valley, WY. We have lived in Boise for almost 15 years, since moving here after I finished up my Air Force commitment.

What are some of your hobbies/interests outside of work?

Hobby-wise, I do enjoy cooking, especially grilling and smoking meat. Most evenings and weekends you will find me outside at the grill no matter the time of year.

What are some movies you really enjoyed?

My favorite books of all time also lead to my favorite movies of all time, the JRR Tolkien's *The Hobbit* and *Lord of the Rings* books and movies. There is nothing I enjoy more than watching all six movies in a marathon with my kids. Of course, we have to make sure it is the extended editions!

What amazing adventures have you been on? Travel/philanthropy.

At the age of 19, I was able to serve as a missionary in Chile for two years for my church. That was a truly humbling and life-changing experience. As a newly trained Air Force physician, I served two tours in Iraq



during the height of the Iraqi War. That experience really shaped my ideas of impact that leadership can have on healthcare delivery.

What motivates you to get out of bed every day to come to work?

Coming to work is pretty easy for me. I know my family is counting on it, and I also know the veterans I serve and my work team is counting on me as well. Staying true to those responsibilities drives me.

What are some accomplishments that you are most proud of?

I am proud of my time as a military



officer and physician. On my second deployment to Iraq, I was given a special assignment from my hospital commander to improve the patient flow in our large tent hospital. Working with others in a collaborative and positive way, we were able to increase the number of patients we served by 1,000 over a six-month period. I was awarded a "special commendation medal" for that effort, and I learned the value of good healthcare leadership and how it can impact many lives.

I am proud to be part of the tremendous effort and accomplishments that the VA and our medical community have been able to achieve as we have worked through our Covid surges.

Here at the VA, we were able to almost double the number of in-patient beds to accommodate not only a growing number of sick veterans, but even dozens of non-veterans that had nowhere else to go for care as hospitals across the region surpassed their bed capacities.

I am also proud of my time as a leader and president of Saint Alphonsus Medical Group. When I joined the group in 2007, there were 60 clinicians in the group. When I left in 2020, there were around 600 clinicians. I am honored to have been part of that growth, and I cherish the team and culture we were able to build along the way.

If you had to eat one thing for every meal going forward, what would you eat?

I would have to say pizza. There are so many possibilities and combinations of flavors that I think it might never get old. Of course, that's assuming that I could also magically keep my waistline in check.

What was your first job, and what life lessons did it teach you? If you were not practicing medicine, what career would you choose?

My first job was digging ditches by hand for sprinkler lines. I would start at 5 am and work until it became too hot to dig. One morning I accidentally stuck my pick through a city water line and flooded the yard I was working in. I wanted to run away, but instead, I went and woke the homeowner and took responsibility for my mistake. He was grateful, and we fixed the line. Afterward, he hired me to work for his construction company because of my integrity. I learned that doing the right thing may not be easy, but it is certainly worth it.

I also learned that I was not cut out for digging ditches my entire life and to get serious about school and my future.

What was the worst job you've ever had?

The worst job I ever had was on a scaffolding crew. I spent a summer setting up and taking down scaffolding for a construction company. I am still not sure how I didn't die with the hazards we faced and the lack of safety protocols back in the day. I certainly had a few falls that could have gone very poorly.

What's one thing your mother/father taught you that completely changed your life?

I grew up on a ranch in Wyoming. My parents always told me that I could be whatever I wanted to be. They never shot down my dreams, no matter how crazy. Without that encouragement, I would not have been able to enjoy the accomplishments and successes I have seen over the years. ✨

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THE BENEFITS OF JUST WALKING



By Dr. Zane Sterling



We see people all over town – from our neighborhood sidewalks to our parks to the guy next to us on the treadmill at the gym. They are “just walking!” Not even trying to jog or pick up the pace to a slow run. They are “just walking!” What good is “just walking” doing for their physical fitness? Is it doing them any good at all?

The benefits of “just walking” are amazingly underrated and phenomenally positive. “Just walking” is likely the most underrated form of exercise. Science shows that placing one foot in front of the other leads to some seriously impressive mental and physical benefits.

When comparing the results of the most recent National Runners’ Health Study with the National Walkers’ Health Study, researchers found that the energy used for moderate-intensity walking and vigorous-intensity running resulted in similar reductions in risk for high blood pressure, high cholesterol, diabetes and heart disease over the study’s six-year period.

This means when it comes to some prominent markers of our health, walking at a moderate intensity can get the job done just as well as running, as long as we’re expending the same amount of energy. Great news for those of us that dread going for a jog.

Past studies have supported this notion, finding that a daily walk can reduce the risk of stroke in both men and women, reduce the days spent in a hospital each year and can even lower our risk of death by up to 39 percent (when compared with no leisure-time physical activity).

A study published in the British Journal of Sports Medicine found that those who adhered to a walking program showed significant improvements in blood pressure, slowing of resting heart rate, reduction of body fat and body weight, reduced cholesterol, improved depression scores with better quality of life and increased measures of endurance.

While the physical benefits are notable, the mental boost that can be gleaned from adding a walk to our daily routine may be more immediate.

One Stanford University study found that walking increased creative output by an average of 60 percent. Researchers labeled this type of creativity “divergent thinking,” which they define as a thought process used to generate creative ideas by exploring many possible solutions. According to the study, “walking opens up the free flow of ideas, and it is a simple and robust solution to the goals of increasing creativity and increasing physical activity.”

Walking has also been shown to improve memory and prevent the deterioration of brain tissue as we age. Plus, psychologists studying how exercise relieves anxiety and depression also suggest that a 10-minute walk may be just as good as a 45-minute workout when it comes to relieving the symptoms of anxiety and boosting mood.

We can summarize the amazing benefits of “just walking”:

- Increased cardiovascular and pulmonary (heart and lung) fitness
- Reduced risk of heart disease and stroke
- Improved management of conditions such as hypertension (high blood pressure), high cholesterol
- Reduced joint and muscular pain or stiffness, reduced chance of developing diabetes
- Stronger bones and improved balance
- Increased muscle strength and endurance
- Reduced body fat
- No equipment necessary
- No membership required and no one gawking at us in the gym
- We can do it on vacation, at work and at home
- Improved creativity, mental acuity and decision making
- Can increase intensity at our own pace
- Can carry weights or add incline to increase the challenge

We really could go on forever talking about the unlimited benefits of “just walking.” Anyone can add this to their life, at any time. With the Idaho warm weather upon us, today would be a great day to tell your patients to get started “just walking.” ❄️

 If you would like to submit an educational article, please contact becky.jones@medprosmag.com.

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JOSEPH R. LYNCH, MD

Partner at The Shoulder Clinic of Idaho

By Joseph Lynch, MD

Dr. Lynch is a partner at The Shoulder Clinic of Idaho and graduate of Harvard University. He completed medical school at Oregon Health Sciences University graduating first in his class. His post-graduate training in orthopedic surgery, as well as his fellowship in shoulder and elbow surgery, were completed at the University of Washington in Seattle.

In addition to being a fellowship-trained, board-certified shoulder and elbow subspecialist, Dr. Lynch maintains a Certificate of Added Qualification in Sports Medicine from the American Board of Orthopedic Surgery. He is a former Associate Professor of Surgery



Joseph Lynch, MD, Shoulder Specialist. (Photo taken by Shivyon Mitchell, professional photographer.)

from the Uniformed Services University of the Health Sciences, and current Affiliate Faculty member at Idaho State University. He brings a wealth of expertise and experience to Idaho and the surrounding region. His passion outside of his professional career includes his family and the outdoors.

Why/how did you get your start in medicine?

Growing up, my mother worked as a laboratory technician at the VA hospital in Portland, OR. While in high school, I volunteered and worked with her at the VA. Since those early days, I was enamored by patient care (and the VA patients, in particular), and medicine was a natural choice for me after college. Having attended college on a military scholarship, I was fortunate the Navy supported my desire to pursue a career in medicine.

How did you choose your specialty?

Orthopedic surgery — and specifically shoulder surgery — captivated my fascination. I thrive on the complexity and intricacy of the shoulder as it can present problems for people of all ages and backgrounds. Young active patients commonly present with labral pathology and problems with shoulder instability; middle-aged patients may experience difficulty with rotator cuff disease, biceps pathology, and stiffness; whereas older patients are commonly challenged by long-standing degenerative conditions, such as glenohumeral arthritis and rotator cuff tear arthropathy. Being a shoulder specialist presents a unique opportunity to care for a diverse population of patients with unique problems. Though I specialize in the treatment of a single joint, my day is filled with an assortment of unique and complex problems that affect each of my patients differently.

Tell me about your practice. What makes your practice unique in our community?

The Shoulder Clinic of Idaho is the first practice in Idaho devoted exclusively to treating conditions of the shoulder. Our practice is comprised entirely of subspecialty orthopedic shoulder surgeons and musculoskeletal specialists who are board-certified and fellowship-trained. We are not only leaders in the field of shoulder surgery locally and regionally, but also nationally. Personally, I participate actively in research and development of new procedures, techniques, and surgical implants which are clinically useful to our patients. Our group is currently involved in a multi-center study looking at patient outcomes following total shoulder arthroplasty using a specific implant designed for patients who present with metal allergies. I am also involved in the development of a new shoulder prosthesis which promotes simplicity and efficiency in the operating room — this particular implant has both an anatomic arthroplasty as well as a reverse arthroplasty option, and has promise to change shoulder arthroplasty as we know it using an ellipsoid head and stemless design, which is more anatomic and

less invasive when compared a traditional shoulder arthroplasty system. In addition to my active practice, I commit substantial resources of time and energy advancing the body of medical knowledge related to the care of the shoulder; and feel fortunate to be involved on a national level in education and training of new, as well as established, orthopedic surgeons desiring to know more about the shoulder.



Joseph Lynch, MD, CDR, MC, USNR. Dr. Lynch served as the Director of Sports Medicine and Shoulder Surgery for the United States Navy and the West Coast Navy Orthopedic Residency Program prior to returning to Idaho to practice medicine. (Photo taken by United States Navy.)



Photo taken by Shivyon Mitchell, professional photographer.

Does your practice have a mission statement?

Yes, we do. Our mission is to provide the most up-to-date, evidence-based, patient-focused care possible. The last portion of this statement cannot be over-emphasized. We pride ourselves in being surgical subspecialists as it relates to the shoulder, but we also believe it is important to be good doctors, not just good surgeons. We want our patients to feel as though they are cared for like family, not just another shoulder problem or another shoulder operation.

What is your definition of quality care?

For a subspecialty surgical practice, one may assume that quality relates directly to the technical ability to perform a certain procedure or operation. Indeed, this is a large portion of what comprises quality in our practice. However, I personally believe that “quality” requires more than just technical perfection and great surgical outcomes. It requires technical perfection, great surgical outcomes, and a bedside manner that treats people with courtesy, respect and kindness. We have a goal of treating our patients like family. We hope those who choose our practice for their subspecialty shoulder care feel as though they are cared for in a manner that is consistent with our personal definition of “quality care.”

At The Shoulder Clinic of Idaho, I am very blessed to be surrounded by not just good people — but GREAT people. Our staff is motivated, hardworking and unbelievably talented. From the front desk administrative specialists, to our medical assistances, radiology technologists, billing and coding specialists, and our nursing staff — all perform at the top of their game and understand the importance of “quality” patient care as I understand it. My perception is they are as motivated as I am to provide the best patient experience possible. It shows that they are proud of their work, proud of our clinic, and, most importantly, proud of our patients’ success as each of them individually have an integral role in our patients’ recovery.

How has practicing medicine in your specialty changed over the years?

The biggest change I have seen in my time as an orthopedic surgeon is the transition to subspecialty care. There are 11 different areas of specialization in orthopedic surgery, and shoulder and elbow surgery is just one of these 11 areas. In the field of orthopedic surgery, it is very difficult to be a “jack of all trades.” Like most areas of medicine, the growth of knowledge and innovation in a particular field is exponential. It is very difficult to keep up with this growth, even within my own specialty



Photo taken by Shivyon Mitchell, professional photographer.

of shoulder surgery when this is all that I do. The analogy that I give our patients is comparing a surgical specialty, like shoulder surgery, to a trade in the residential construction industry. When you build a house, you often hire a flooring contractor, an electrician, a painter, a framer, a roofer, a plumber, etc. The team that installs your flooring very likely could also paint your walls, and do a decent job – but do you really want to settle for “decent” when it involves your health care and a sharp object like a scalpel? Certainly, a full-time painter will be more efficient, more knowledgeable regarding product, have more experience, and likely better skill. There are nuances of his or her trade that he or she will understand much better than a plumber or flooring contractor.

Complication rates for procedures in the shoulder are related to surgical volume. Shoulder surgeons with higher average annual caseloads of shoulder replacement procedures have decreased complication rates, decreased hospital lengths of stay, and better outcomes (to include mortality!) compared to patients of surgeons who perform fewer of these procedures (Hammond et al. JBJS 2003;85:2318; Jain et al. JBJS 2004;86:496). When it comes to surgery, we believe it is important for patients to ask their doctor how many shoulder surgeries they perform? Do they have a regular team? What is their complication rate? Are they capable of revising the shoulder if the replacement or procedure fails or has problems? Is their condition something the doctor is familiar with and treats on a regular – better yet – daily basis?

In today’s world of orthopedic surgery, the trend has been toward subspecialty care – and for good reason. Medical knowledge grows quickly, and technological advances in orthopedics can be overwhelming to those practitioners trying to master them all. Attaining mastery in any pursuit takes significant time, dedication and repetition. Professional athletes do not compete in multiple sports, and elite musicians do not play every instrument. Why should you expect your shoulder surgeon to be any different?



Dr. Lynch; Michael Nieraeth, PA-C; and April Reed, RN, BSN. Providing care to Robert “Obie” Oberst – World Strong Man competitor and touted as the World’s Strongest Shoulder.



Photo taken by: Brad Hollenbaugh, Professional Photographer



Dr. Lynch's clinical team comprised of himself; Michael Nieraeth, PA-C; and Caitlyn Grote, RN, BSN. (Photo taken by Brad Hollenbaugh, professional photographer.)

What would you like to communicate about your specialty to PCP and referring practitioners?

We appreciate your trust. Please know that it is our goal to provide your patients with the best surgical experience possible. We believe in patient-focused care provided with courtesy, respect and kindness. We believe that “knowing the patient” is as important as “knowing the shoulder.” Patients who visit our clinic are grateful, not just for the expert subspecialty shoulder care they receive from our fellowship-trained, board-certified shoulder specialists; but more importantly, they are grateful for the friendship and support they find in all of our providers and staff who believe and embody the principles of being good doctors, not just good surgeons.

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Aaron Zimmerman,

Founder and President, TotalCare IT

TotalCare IT has been making technology support and security easy for Idaho businesses since 2007.

Our easy process:

- We help CEOs and Practice Managers understand their risk tolerance, compliance needs, and liability in incident prevention/response/recovery.
- We guide your leadership team through alignment to data security standards.
- If you have internal IT resources (CIO, Director of IT, etc.), we support and enhance this function with added expertise, bandwidth, and cybersecurity.
- We support your employees with technical services (IT help desk) and cyber hygiene.

Schedule a consultation with us at www.totalcareit.net/discoverycall.

Where did you grow up? How long have you lived in the area?

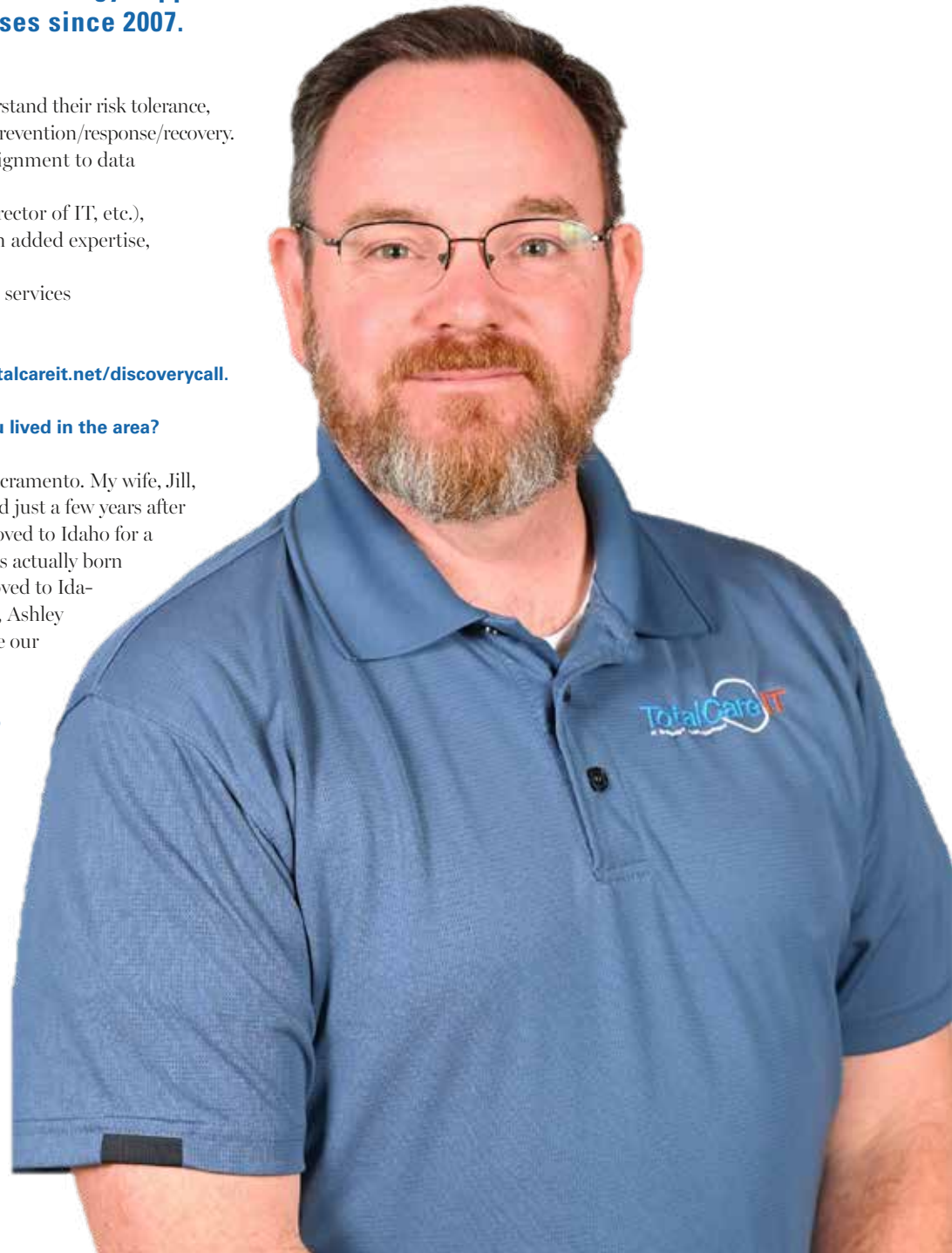
Tell us about your family.

I grew up in Auburn, CA, which is north of Sacramento. My wife, Jill, grew up in the same area, and we were married just a few years after high school. During our early marriage, we moved to Idaho for a brief three-year stint (our second daughter was actually born in Idaho), but it wasn't until 2006 that we moved to Idaho permanently. Jill and I have two daughters, Ashley and Chelsea, and one son, Ethan. We also have our family dog, Teal'e, and three grandchildren.

Tell us about the journey that has led you to where you are now.

I have been in the IT industry for 31 years now, the first 17 of which I spent working in large corporate environments. I worked as a contractor for HP and managed two Delta Dental campuses between Rancho Cordova, CA, and San Francisco. At Delta Dental, I led a team of eight to 10 systems engineers who managed about 2,400 desktop computers and 200 servers. We oversaw security, application installation, application development testing, and managed and monitored the environment 24/7 to make sure the company's data and resources were available.

There was a lot of travel and commute to the Bay Area in this job, and I had a



young family. So, I seized an opportunity to take a job further north where I could spend more time with my family. During that time, I was the IT Director for a high school district, where I managed a team of four people and around 1,000 devices.

Going from an enterprise environment to a school district let me see a whole other world of IT management. From student safety, to budgeting, to board meetings, I

saw more clearly how technology could influence my community.

After three years at the school district, my wife and I decided to move our family to Southeast Idaho so we could be closer to her parents. I spent the next seven years as a field engineer with Nuance Communications. In this role, I installed voice-to-text voice-recognition software in radiology departments within hospitals throughout the Pacific Northwest.

What is your business, and how/why did you start your business?

At this point, I had a deep understanding of how an enterprise manages IT and experience bringing IT resources to a local community. I wanted to make what I was doing in corporate America accessible to small and mid-sized business owners in Idaho, and I knew I could do this using today's modern toolset that has been designed for the small/medium business. I set my core focus as uptime, data availability, and data protection, and then added user support and infrastructure support. This was the birthing point of TotalCare IT.

The name TotalCare IT came from that desire to support and protect the small to medium business owner in a way that really wasn't being offered at the time. The idea of bringing the enterprise level down to the SMB was relatively new and tremendously increased the productivity and profitability of my clients. TotalCare IT grew quickly in Eastern Idaho, and we opened service for Western Idaho in 2017.

What is unique about your business (what sets you apart from the rest)?

As of today, TotalCare IT is the only IT support company in the area specializing in the robust combination of cybersecurity, HIPAA compliance, technology policy, and disaster recovery. We still support and protect our clients against productivity killers like data loss and downtime, and our methods evolve with the changing threat landscape. We operate with strict security procedures (such as recently federally suggested Zero-Trust computing), and we educate our clients about cyber safety and data compliance regulations. And we do this all with Idaho's fastest response time.

How do we do it?

By constantly learning, researching, and attending industry events and conferences – much like you probably do in your industry. I take every opportunity I get to surround myself with and learn from the best minds in the western world. For example: Once a week we have a conference call with the top cybersecurity researchers in the United States.

I belong to several communities of other IT firms (in the UK, USA, Canada, Australia, and Nordic region) who audit and review my company to make sure I am providing top-level service to my clients and that my company is secure internally. And I do the same for them.

I read as much as I can – leaders are readers. Feel free to ask me for book recommendations – I have an extensive library (no, they are not all IT books).

I invest in the best tools on the market to service my clients.

And, lastly, I hire men and women who are crazy smart and love to learn. I am proud of my team and the work they do every day to secure Idaho businesses.

Given your business expertise and the nature of what you do, what advice can you offer to our healthcare practitioners?

The cost of securing your environment and protecting patient data is going up. The reason for this is there are new threats every day. Cybersecurity isn't an expense anymore; It's an investment into protecting what you've built, protecting your personal net worth, protecting your business's income, protecting your business's savings. You need to invest in cybersecurity to secure your patients, employees, and profits.

You need to take a preventative approach to protecting your environment, specifically the recommendations from Health and Human Services as it relates to HIPAA compliance. The goal of the security rule is to make your practice a difficult target, encouraging the bad guys to move on because they see they are wasting their time on you.



Aaron Zimmerman with John Dijulius



Aaron Zimmerman and Jeff Hoffman

Here's five things you can do now to increase your resiliency to a cyber-attack:

1. Invest in cybersecurity. This is more than a firewall and anti-virus software. Investing in cybersecurity means you know your cyber risk, you are aligned to a cybersecurity framework, and you have protections in place to prevent cyber incidents in your practice.
2. Get cyber insurance. If you do not have cyber insurance, you need to get it ASAP. No security plan is foolproof. In the event you do suffer a cyber-attack, cyber insurance will be a key part of your response plan and recovery.
3. Make sure your vendors are evolving with the new threats. One overlooked vendor with poor security can shut you down completely if they are victim to a cyber-attack. Know your vendors' security posture, and what they are doing to protect YOU in their practices. This is something you have the right to know and should know – especially if you want to be approved for cyber insurance.
4. Employee vulnerability training should be part of your security stack. The number one cause of data breaches and hacker attacks is human error. Cyber hygiene training is critical to keep your systems and client data protected from unintentional breaches. It's also required by HIPAA.
5. Protect anything that touches the internet – whether it's a thermostat, copier, vending machine, infusion pump, X-ray or MRI machine, even your VoIP phones – if it's connected to the internet, it is vulnerable and needs to be protected as much as a server or workstation.



If you need help implementing any of these things, please call or email:
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The two biggest pain points TotalCare IT have helped us solve are security and scaling. First, TotalCare IT has set up secure networks for us that are appropriate for the Healthcare environment. It makes us feel comfortable and confident in the security of our clients' information. Second, TotalCare has always met us where our business needs are at. From starting up as a one-person business, to growing into many providers, administrative staff, and locations (including out-of-state support), scaling their service to meet our growing needs has been invaluable.

TotalCare IT is an overall great firm to work with. They always have quick response times, resolve all our issues, and meet all our needs. They are easy to work with, flexible, and quick to complete the job – especially when there is a technical issue prohibiting us from functioning efficiently as a business. Aaron is always upfront about his ability to meet our needs and lets us know when we need to move in a different direction. We appreciate the professionalism and courtesy of the entire team.

Luke Einerson

Chief Executive Officer
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I have complete peace of mind regarding IT with TotalCare managing our clinic's infrastructure and security. Their team operates as an extension of our employees with thorough communication and accountability.

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Over the time that I have worked with TotalCare IT, I have been approached by other companies that all claimed to be "just as good" but at a lower cost. When I look at the resources and expertise being offered, it's easy to see that it would be a mistake to change.

The TotalCare team understands the word "stewardship" as it relates to their jobs. The way TotalCare IT "owns" their responsibilities is refreshing compared to the way I need to supervise other vendors.

My trust in TotalCare IT has been rewarded on every occasion as they come through on service expectations without fail. I also know that if I am ever concerned with anything, Aaron takes my concerns very seriously.

Please give Aaron and the team a call today.

David Mecham

Practice Manager
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Dates: May 21-May 31, 2022

Where: Merrill Park in Eagle, Idaho

Donation Cost: \$30 per flag

Come join us for American Legion Post 127, Coffee With A Vet – May 21, 2022, from 10am to 12pm at the Field – ANYONE IS WELCOME!

Heather Paredes and Kathy Coburn are two sisters with a heart for veterans. Every May for the past 16 years, we all look forward to seeing this tribute to the men and women who have served or are currently serving our country. But how did it get started?



The tribute was originally started by Nancy Merrill. At the time she was the Mayor of Eagle and had been inspired by a Field of Honor she had seen in Washington, D.C. She initiated the first Eagle Field of Honor. Heather and Kathy had volunteered to help on this project. Kathy stated, "Seeing that many flags flying is a beautiful site; it makes you proud to be a part of the country."

When the mayor's term was over, the two sisters were informed that the tribute was not going to continue. That's when they decided to make this a family volunteer project. They felt it was very important for the community and wanted to help keep it going. This year will mark the 16th year that the Eagle Field of Honor has been running, which makes it the longest consecutive running Field of Honor in the U.S.

Since the inception, 600 flags are displayed with each flag representing someone who has served or is currently serving our country. As you can imagine, organizing the placement of all these flags and the ceremony takes quite a bit of work, and the family members that participate all have



If you would like to sponsor a flag for \$30, go online to: www.eagle-fieldofhonor.org. Since this is a tribute, flags can be sponsored in the name of those who have served or those who are currently serving with the U.S. military. Flags are made in the USA.

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- Operation Grateful Hearts – <https://operationgratefulhearts.us/>
- Legacy Corps – <https://www.jannus.org/program/legacy-corps>

www.eaglefieldofhonor.org

their tasks. Heather's daughter, Kati, is in charge of the ribbons; Kathy's daughter, Marina, is in charge of social media; Heather and Kathy's father, Fred Coburn, is in charge of maintaining the flags.

This truly is a labor of love for Heather and Kathy. When asked what their "why" was, it was hard to narrow down to just one reason as there are just so many. But at the end of the day, the one thing that really stands out is how much the Eagle Field of Honor means to the veterans.



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How to Handle Market Volatility

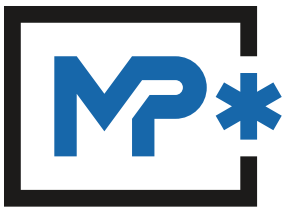
Investing is crucial to retirement planning. However, the stock market can be a wild ride without properly managing your expectations. Here are a few guidelines to help you handle the stresses of investing during volatile markets:

- Wisely diversify your portfolio
- Focus on the long-term
- View declines as an opportunity
- Keep your emotions in check
- Tune out the noise
- Hire a financial planner

Jared C. Empey, MSFS
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