





THE NEED:

The need identified for the three Collaborative Impact Project events, was based upon Elkhorn Logan Valley Public Health Department's (ELVPHD) health district screening rates data. The data shows that although ELVPHD's breast cancer screening rate was slightly higher than the state average, the trend for up to date breast screening among women aged 50-74 was on a downward trend from 2012 to 2016. By 2016, the screening rate was essentially the same as the State of Nebraska overall.

Up To Date on Breast Cancer Screenings, females 50-74 years		
	Women	
	ELVPHD	State of NE
2012	75.5% 	74.9%
2014	77.2% 	76.1%
2016	73.7% 	73.4%




*Data Source: Nebraska BRFSS (Behavioral Risk Factor Surveillance System)

PROGRAM TITLE

Increasing Mammography Rates in the Elkhorn Logan Valley Public Health Department District (Madison County, Stanton County, Cuming County, Burt County) Utilizing Onsite Mobile Mammography

PROGRAM DESCRIPTION

Provide on-site mammography services to women 40-74 who are in need of breast screening and one-on-one education around breast cancer prevention. The program will also help establish a medical home for participants that do not have one.

PURPOSE

The purpose of the onsite mobile mammography screening event is to navigate up to 25 women between the ages of 40-74 to have a breast screening and one-on-one education at each one-day event on the following dates and locations:

- June 21, 2018: Midtown Health Center (Federally Qualified Health Center), Norfolk, NE
- August 30, 2018: Tekamah Mercy Clinic, Tekamah, NE
- September 14, 2018: PATCH Health Fair, Norfolk, NE

Additional women who attend the event without an appointment will receive one-on-one education regarding the importance of screening and will receive a referral for future screening. Key components of these projects center around partnering and creating relationships with Medical Imaging Consultants, medical clinics, and with the local FQHC so that community connections and relationships can be built and/or maintained.

Evidence based interventions (EBIs) are recommended due to having evidence that they are effective for getting women screened. The three projects utilized the following EBIs:

<p style="font-size: 2em; margin: 0;">1</p> <p style="margin: 0;">ONE-ON-ONE EDUCATION</p>	<p style="font-size: 2em; margin: 0;">2</p> <p style="margin: 0;">REDUCING STRUCTURAL BARRIERS</p>	<p style="font-size: 2em; margin: 0;">3</p> <p style="margin: 0;">CLIENT REMINDERS</p>	<p style="font-size: 2em; margin: 0;">4</p> <p style="margin: 0;">SMALL MEDIA</p>	<p style="font-size: 2em; margin: 0;">5</p> <p style="margin: 0;">PROVIDER REMINDERS</p>
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PROGRAM FOCUS

Breast Cancer Screening and Breast Navigation

TIME REQUIRED

The intervention takes approximately 5-8 weeks.

For the August and September 2018 events, 164 hours were utilized for coordination and marketing of the events as well as reporting activities. An additional 20 hours were used on direct client activities (navigation). Actual hours and activities were not divided and captured for the June 2018 event so unclear on how much time was required for that particular event.

The implementation of additional sites becomes easier with each event that is held as lessons learned from the prior events are discussed and implemented at the following event. ELVPHD conducted informal lessons learned evaluation by bringing together the involved staff at the conclusion of the events to discuss what went well and what could be improved on for future events. The relevant lessons learned for the projects overall are noted in the "lessons learned" section of this document.

INTENDED AUDIENCE

The intended audience include women who fall into the age range of 40-74 who have not had a breast screening in the past two years or who have never had breast screening. For the purposes of this project the women served were primarily rural, white women.

For the Midtown Health Center partnership event, the women served were primarily qualifying patients from Midtown Health Center, Norfolk, NE, which is a Federally Qualified Health Center. A unique feature of this event was the partnership with the FQHC to reach their patient population via postcard mailing to those that met the mammography criteria. Utilizing the FQHC to send this mailing to their appropriate patient population that was never or rarely screened and/or due for screening/rescreening.

This allowed for a direct advertising approach utilizing targeted media. In addition, having the marketing piece come from a clinic that they know and recognize gives the services credibility in the patient's eyes. General community advertising was also completed. The event yielded contact with 30 women. Of these, 18 women were screened with 4 being Hispanic and 14 white, non-Hispanic. Sixteen women fell within the age range of 40-75, while two others were outside of the range at 39, but had a family history and were instructed to be screened earlier.

The Tekamah screening event yielded 19 women, of which all were white, non-Hispanic. 8 were in their 40's, 7 in their 50's, 2 in their 60's and 2 in their 70's. Much like the ELVPHD / MHC event noted above, a partnership on this event with the Tekamah Mercy Clinic, Tekamah, NE, allowed for directed postcard advertising to clinic patients which met the criteria of the intended audience. This partnership allowed for directed marketing of the services to those that were either due for screening or rescreening. The information that was sent to the clients were a provider recommendation for screening. This partnership also allowed for increased credibility of the event from the patient's perspective as they were receiving event notification from a clinic/provider that they already knew and trusted.

PATCH Health Fair, Norfolk, NE screened 21 White and 1 Hispanic woman. 8 were in their 40's, 5 in their 50's, 7 in their 60's, 2 in the 70's. Intended audience was general public women that were 40+ who have not had a mammogram in the prior two years. This was a general public advertised event rather than partnering with a specific health care provider/clinic. However, any women who was interested in the event but could not be served at the prior two events (due to scheduling, etc.) were contacted for this event.

INTENDED AUDIENCE

The Onsite Mobile Mammography project is designed to be implemented at a workplace, clinic/health department, or at a community health fair. Onsite Mobile Mammography may also be suitable for implementation in churches or public housing developments.

REQUIRED RESOURCES

Required resources to have available would be dedicated staff to carry forward the plan and that are able to network and build relationships. A relationship with news media would also be effective as well to assist with marketing the events. Dollars to expend for staffing as well as the Mobile Screening Van.

ELVPHD also worked with Susan G. Komen who provided printed educational materials and give away bags for the women who participated in the August and September events. A strong working relationship with the FQHC and clinic was essential as they completed a mailing to their patients who were in need of a mammogram about the event.

FUNDING

The funding for the three Onsite Mobile Mammography Projects was provided by the Center for Disease Control and Prevention provided through the Women's and Men's Health Every Woman Matters program. Approximate cost (includes screening/mammography van, staff salaries, educational materials, small media, postcards, mileage, phone, postage, rent/facility costs) of each event are as follows:

MIDTOWN HEALTH CENTER SCREENING EVENT		TOTAL INVOICED:	\$7,901.94
	Budgeted	Match	Actual Expended
Staffing	7,752.31	1,575.17	6,584.16
Screening	250.00	0.00	300.00
Education Materials/Media	1,668.05	1,593.05	59.40
Other (mileage, postage, etc.)	941.64	0.00	958.38
Clinic Stipend	800.00	800.00	0.00

TEKAMAH SCREENING EVENT		TOTAL INVOICED:	\$3,689.13
	Budgeted	Match	Actual Expended
Staffing	7,752.31	0.00	2,781.41
Screening	300.00	0.00	300.00
Education Materials/Media	2,125.00	776.16	209.09
Other (mileage, postage, etc.)	770.00	0.00	398.68
Clinic Stipend	950.00	0.00	0.00

PATCH HEALTH FAIR SCREENING EVENT		TOTAL INVOICED:	\$5,231.06
	Budgeted	Match	Actual Expended
Staffing	8,773.98	0.00	4,026.27
Screening	250.00	0.00	300.00
Education Materials/Media	2,200.00	2,000.00	391.03
Other (mileage, postage, etc.)	695.00	0.00	513.56
Clinic Stipend	800.00	0.00	0.00

The three screening event invoices submitted for reimbursement totaled \$16,822.13. A total of 48 women received breast screening services through the Onsite Mobile Mammography project. Cost per client was approximately \$350.46.

KEY FINDINGS

June 21, 2018 an event was held in Norfolk at Midtown Health Center. The local health department, Elkhorn Logan Valley Public Health Department, had contact with 30 women and signed up 22 women for the Midtown Health Center Screening event. There were 8 people placed on a waiting list. The local health department was able to provide screening and navigation for 18 women. Of the 18 women at the event, 4 were Hispanic while the remaining 14 were White. Of the women screened, 16 fell into the age range of 40-74, while two others were just outside the age range of 39, but had a family history and were instructed to be screened earlier.

At the August 30, 2018 event nineteen women scheduled appointments for a mammogram. On the day of the event two women cancelled their appointment and four women did not show up. Four women did not have insurance and completed every Woman Matters applications and were approved. Six women reported that this was their first ever mammogram screening.

Following the screening, nine women reported normal results and 1 reported suspicious results and was referred for additional screening. Of the three remaining women, ELVPHD was unable to reach one woman to obtain her results, one woman reported that she had not received her results and one woman refused to share her results. All of the women were white, non-Hispanic with eight being in their 40s, seven in their 50s, two in their 60s and 2 in their 70s. One reported not having a primary care physician. Several women reported that they would not have completed a mammogram screening without the mobile mammogram van as they have in-home daycares and would have to close their business for the day in order to travel and complete the mammography screening as there are no mammography providers in the community of Tekamah.

September 14, 2018 was the third event held. Twenty-two women scheduled appointments for a mammogram. On the day of the event four women did not show. Nine women reported as being uninsured or underinsured, five of which completed an Every Woman Matters application and were approved. 1 completed an application and was not approved but was able to obtain insurance prior to the event, and three did not complete the Every Woman Matters application. All women were white with 1 being Hispanic. Eight women were in their 40s, five in their 50s, seven in the 60s and 2 in their 70s. Four women reported not having a primary care physician.

At this particular event, six women reported as having a normal mammogram and one was suspicious and was referred on for additional screening. Eleven women reported as not having received their screening results as of the project term date. Therefore, no additional follow up was made to these women as the contract period for the program had ended. As noted in the "lessons learned" section below, it is advised that collaborative impact projects occur at least 2 months prior to the project end date so that adequate time exists for follow-ups with the clients.

LESSONS LEARNED

- Reconsider wording used during advertising. In some cases the wording "free" was utilized on the advertising (as in "no cost to the participant due to EWM or insurance coverage). Although there technically is not an out-of-pocket cost normally to the participant, wording should be carefully considered to ensure that the participants fully understand.
- Medical Imaging Consultants (mammography screening company used) suggested a possible future event be held at a business location where women could step away from their job and go out to the parking lot to be screened. This would save hours lost at the work site.
- Amend the medical release form to stipulate that not only the participant and their provider receive the mammography results but also that the health department receives the results as well. This would be achieved by ensuring that the "release to" information signed included the health department. Because the collaborative impact projects required result status and follow-up with the participants, having this information would ensure a much more streamlined process. Events should be held at least 2 months out from the end of the contract period to assure that participants receive all services (health coaching and results) prior to the health department needing to report on the project.
- Through the registration process, determine whether or not if all clients have insurance coverage. This way there is ample time to have Every Woman Matters (EWM) and National Breast and Cervical Early Detection Program, paperwork completed if the need arises. It would save time and avoid having to rush applications through to be processed.

LESSONS LEARNED (continued)

- Some women who attended the events asked about a future event being held on a Saturday vs. during the week as some are unable to leave work. Depending upon the mobile mammography unit scheduling this could be a good potential option to look into.

MATERIALS CREATED AND USED

There were materials created and utilized throughout the projects. These materials follow this report so that they can be referenced if necessary.

- Navigation Pathways
- Signed release and paperwork for client
- Mobile mammography unit agreement
- Memorandum of Understanding with Partners
- Media promotion:
 - Press Releases
 - Social media posts
 - Event flyer
 - Newspaper ad copy
- Reminder Postcards
- Susan G. Komen Educational Materials:
 - Making an Impact in Our Communities
 - Mammography - What to Expect on Day of Exam
 - Treatment Assistance Programs
 - What Everyone Should Know - Be More than Pink
 - Breast Cancer Risk Factors

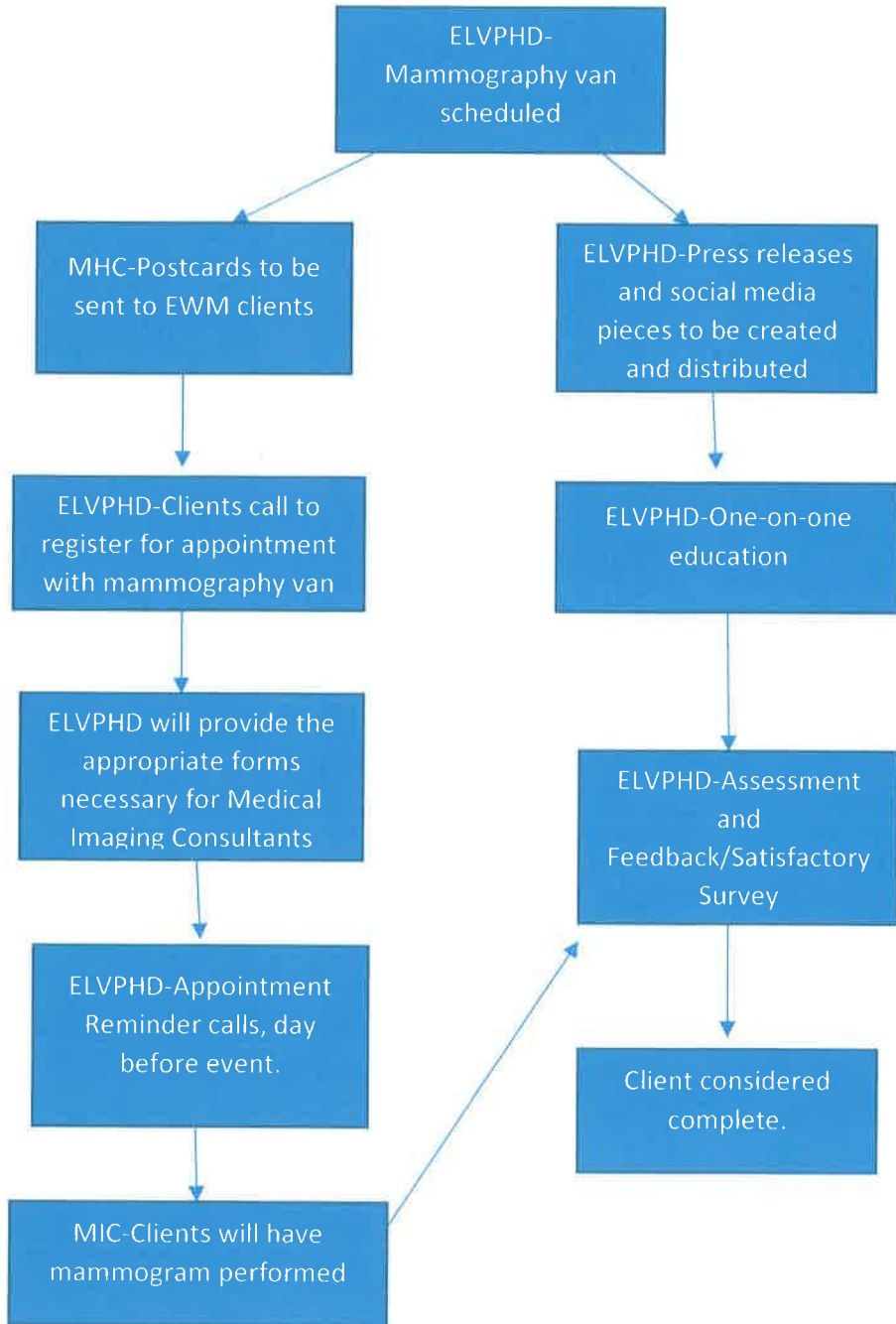


Elkhorn Logan Valley Public Health Department

Pathway to Healthy Supports

Mammography Van and Education Day for Women 40-74

Encounter Registry and Med-it

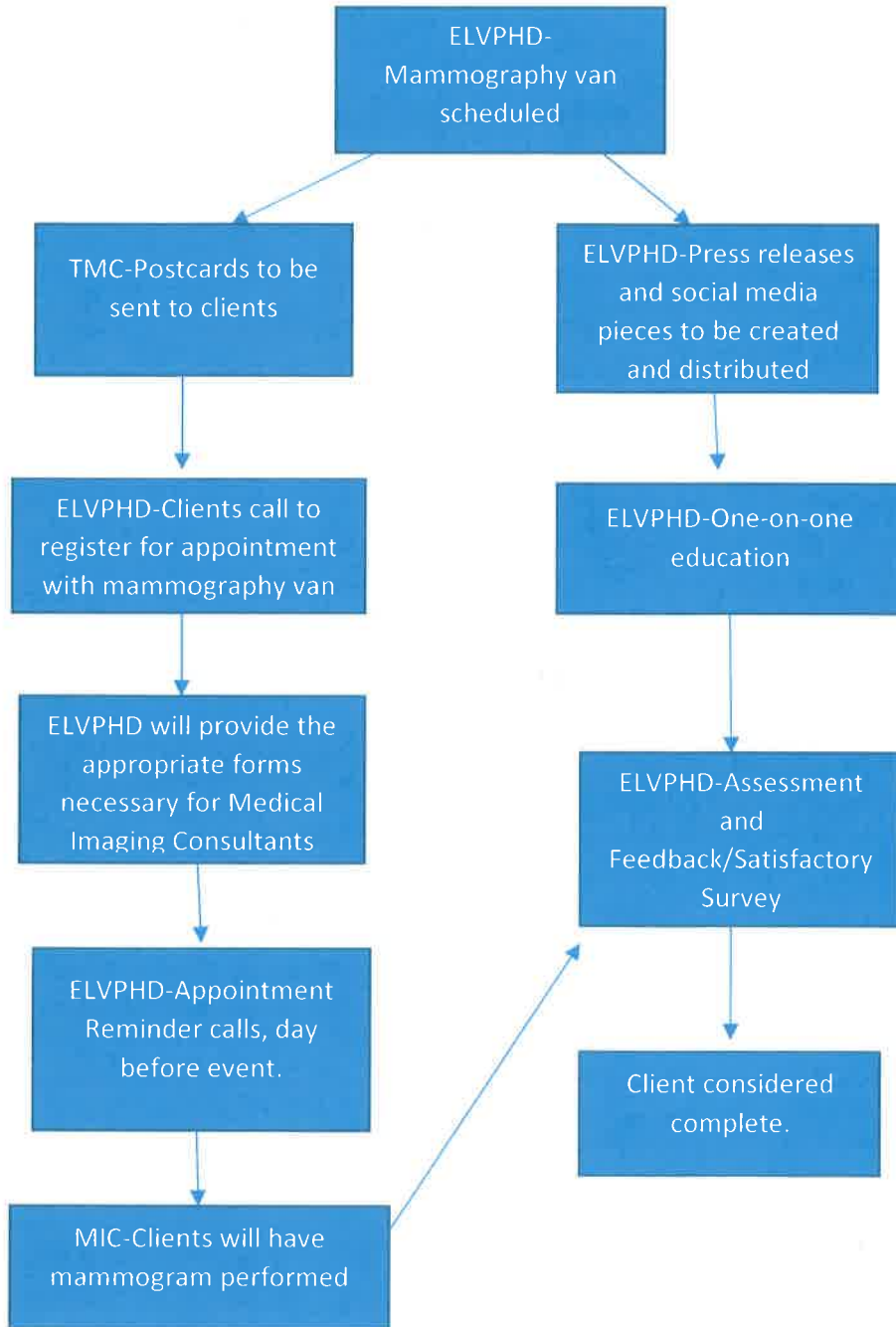


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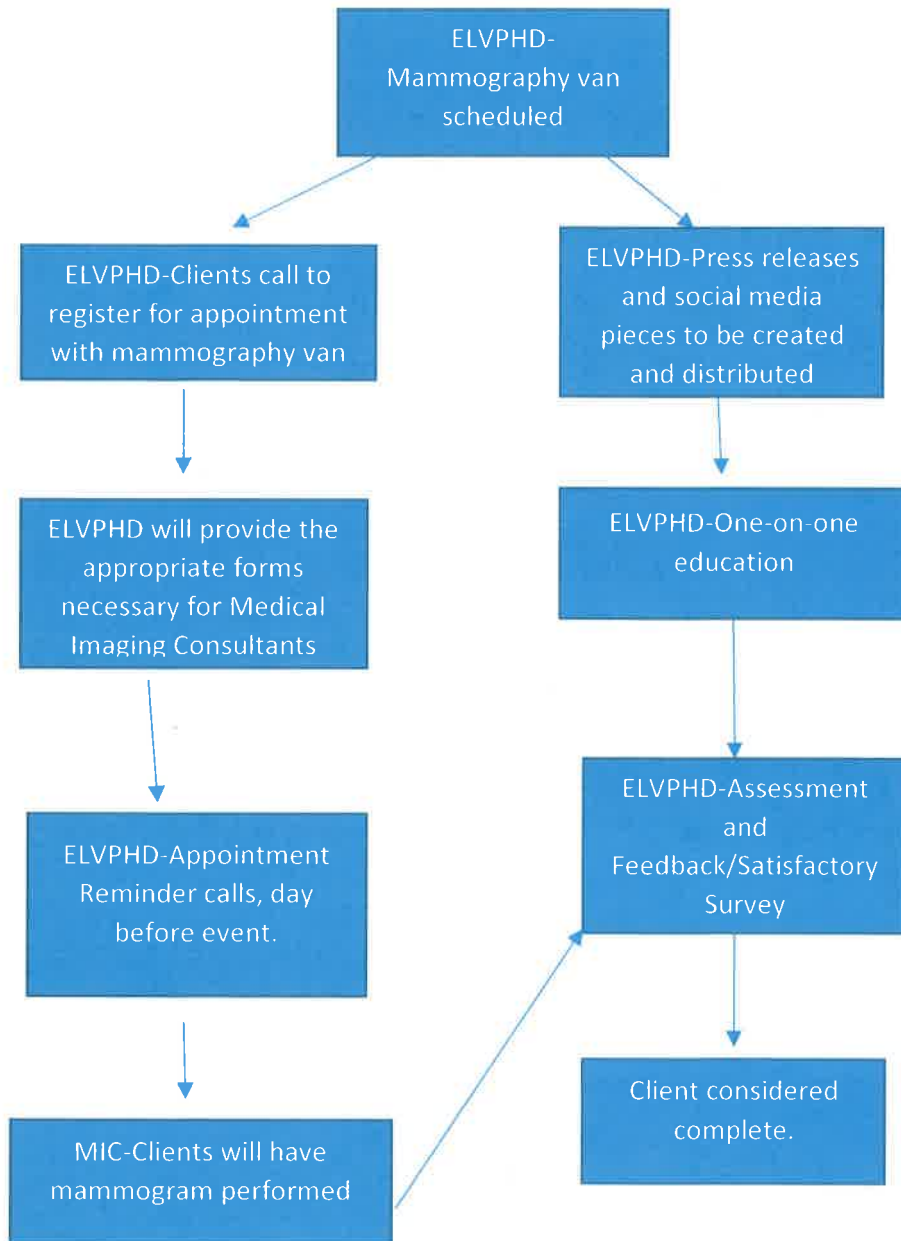


Elkhorn Logan Valley Public Health Department

Pathway to Healthy Supports

Mammography Van and Education Day for Women 40-74

Encounter Registry and Med-it



Please Print

PATIENT INFORMATION

LAST NAME _____ FIRST NAME _____ SEX ____ DOB _____ AGE ____

PREVIOUS NAME IF APPLICABLE _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____ PHONE (HOME) _____

CITY, STATE _____ (CELL) _____

ZIPCODE _____ (WORK) _____

EMPLOYER _____ OCCUPATION _____

ADDRESS _____ CITY, STATE, ZIP CODE _____

EMERGENCY CONTACT _____ PHONE _____

REFERRED BY _____ PHONE _____

EMAIL ADDRESS _____

PARENT, GUARDIAN, SPOUSE

LAST NAME _____ FIRST NAME _____ SEX ____ DOB _____ AGE ____

PREVIOUS NAME IF APPLICABLE _____ SOCIAL SECURITY NUMBER _____

ADDRESS _____ PHONE (HOME) _____

CITY, STATE _____ (CELL) _____

ZIPCODE _____ (WORK) _____

EMPLOYER _____ OCCUPATION _____

ADDRESS _____ CITY, STATE, ZIP CODE _____

INSURANCE INFORMATION

PRIMARY INSURANCE COMPANY _____

NAME OF INSURED _____ DOB _____ SOCIAL SECURITY NUMBER _____

SECONDARY INSURANCE COMPANY _____

NAME OF INSURED _____ DOB _____ SOCIAL SECURITY NUMBER _____

I understand as the Consenting Party, I am responsible for payment of this account

PURPOSE OF YOUR VISIT _____

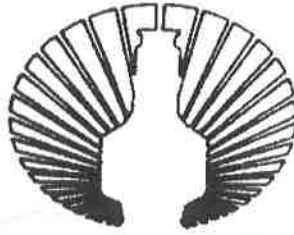
RELEASE AND ASSIGNMENT

This patient registration form must be completed in its entirety & the Release & Assignment Authorization signed by the Responsible/Consenting Party prior to treatment. Medical Imaging Consultants considers this information a condition of treatment.

1. I hereby authorize the Providers of Medical Imaging Consultants to perform such procedures as may be deemed necessary in the diagnosis & treatment of the patient.
2. I hereby authorize release of any medical information regarding this visit to my insurance and/or primary care physician & also assign to the provider all payments from my insurance company.
3. I understand that I am financially responsible for all charges whether or not paid by insurance.
4. I understand that not all providers at Medical Imaging Consultants may be a participating provider with my insurance. I understand that I am responsible for charges not covered by my insurance.
5. I understand and agree to the above conditions.

AUTHORIZATION SIGNATURE _____ **DATE** _____

THIS AGREEMENT WILL REMAIN ON FILE FOR APPROXIMATELY ONE YEAR & WILL BE CONSIDERED A CONDITION OF ALL TREATMENTS UNTIL A NEW FORM IS COMPLETED.



MEDICAL IMAGING CONSULTANTS

REQUEST FOR RELEASE OF MEDICAL RECORDS

TO: _____
NAME OF FACILITY WHERE IMAGES WERE DONE

ADDRESS

CITY STATE ZIP CODE

In accordance with the Food and Drug Administration, a patient may request their mammogram images be maintained at a facility other than the originator. This patient is requesting that we keep their mammogram images at our facility. This is to notify you that we are honoring their request.

Patient Name _____

Date of Birth _____

Please send any breast related imaging (mammograms, ultrasounds, biopsies, pathology and reports for the last 5 years to:

**MEDICAL IMAGING CONSULTANTS
7950 HARRISON STREET
OMAHA, NE 68128**

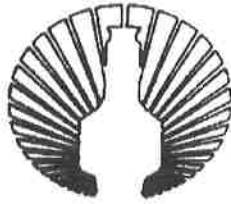
Any questions: Please contact us at 402-592-0711 phone, 402-934-9242 fax

Thank you for your prompt attention to this matter.

Sincerely,

Patient Signature

Date



*"Your Image Is Our Focus"-
Medical Imaging Consultants*

Your Information.

Your Rights.

Our Responsibilities.

Medical Imaging Consultants, PC
7950 Harrison Street, LaVista, NE 68128 (402) 592-0711 Fax (402) 934-9242

Your Information. Your Rights. Our Responsibilities.

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. **Please review it carefully.**

LAYERED SUMMARY TEXT –

Your Rights

You have the right to:

- Get a copy of your paper or electronic medical record
- Correct your paper or electronic medical record
- Request confidential communication
- Ask us to limit the information we share
- Get a list of those with whom we've shared your information
- Get a copy of this privacy notice
- Choose someone to act for you
- File a complaint if you believe your privacy rights have been violated

Your Choices

You have some choices in the way that we use and share information as we:

- Tell family and friends about your condition
- Provide disaster relief
- Include you in a hospital directory
- Provide mental health care
- Market our services and sell your information
- Raise funds

Our Uses and Disclosures

We may use and share your information as we:

- Treat you
- Run our organization
- Bill for your services
- Help with public health and safety issues
- Do research
- Comply with the law
- Respond to organ and tissue donation requests
- Work with a medical examiner or funeral director

- Address workers' compensation, law enforcement, and other government requests
- Respond to lawsuits and legal actions

Your Rights

When it comes to your health information, you have certain rights. This section explains your rights and some of our responsibilities to help you.

Get an electronic or paper copy of your medical record

- You can ask to see or get an electronic or paper copy of your medical record and other health information we have about you. Ask us how to do this.
- We will provide a copy or a summary of your health information, usually within 30 days of your request. We may charge a reasonable, cost-based fee.

Ask us to correct your medical record

- You can ask us to correct health information about you that you think is incorrect or incomplete. Ask us how to do this.
- We may say "no" to your request, but we'll tell you why in writing within 60 days.

Request confidential communications

- You can ask us to contact you in a specific way (for example, home or office phone) or to send mail to a different address.
- We will say "yes" to all reasonable requests.

Ask us to limit what we use or share

- You can ask us not to use or share certain health information for treatment, payment, or our operations. We are not required to agree to your request, and we may say "no" if it would affect your care.
- If you pay for a service or health care item out-of-pocket in full, you can ask us not to share that information for the purpose of payment or our operations with your health insurer. We will say "yes" unless a law requires us to share that information.

Get a list of those with whom we've shared information

- You can ask for a list (accounting) of the times we've shared your health information for six years prior to the date you ask, who we shared it with, and why.
- We will include all the disclosures except for those about treatment, payment, and health care operations, and certain other disclosures (such as any you asked us to make). We'll provide one accounting a year for free but will charge a reasonable, cost-based fee if you ask for another one within 12 months.

Get a copy of this privacy notice

You can ask for a paper copy of this notice at any time, even if you have agreed to receive the notice electronically. We will provide you with a paper copy promptly.

Choose someone to act for you

- If you have given someone medical power of attorney or if someone is your legal guardian, that person can exercise your rights and make choices about your health information.
- We will make sure the person has this authority and can act for you before we take any action.

File a complaint if you feel your rights are violated

- You can complain if you feel we have violated your rights by contacting us using the information on page 1.
- You can file a complaint with the U.S. Department of Health and Human Services Office for Civil Rights by sending a letter to 200 Independence Avenue, S.W., Washington, D.C. 20201, calling 1-877-696-6775, or visiting www.hhs.gov/ocr/privacy/hipaa/complaints/.
- We will not retaliate against you for filing a complaint.

Your Choices

For certain health information, you can tell us your choices about what we share. If you have a clear preference for how we share your information in the situations described below, talk to us. Tell us what you want us to do, and we will follow your instructions.

In these cases, you have both the right and choice to tell us to:

- Share information with your family, close friends, or others involved in your care
- Share information in a disaster relief situation
- Include your information in a hospital directory

If you are not able to tell us your preference, for example if you are unconscious, we may go ahead and share your information if we believe it is in your best interest. We may also share your information when needed to lessen a serious and imminent threat to health or safety.

In these cases we never share your information unless you give us written permission:

- Marketing purposes
- Sale of your information
- Most sharing of psychotherapy notes

In the case of fundraising:

- We may contact you for fundraising efforts, but you can tell us not to contact you again.

Our Uses and Disclosures

How do we typically use or share your health information?

We typically use or share your health information in the following ways.

Treat you

We can use your health information and share it with other professionals who are treating you.

Example: A doctor treating you for an injury asks another doctor about your overall health condition.

Run our organization

We can use and share your health information to run our practice, improve your care, and contact you when necessary.

Example: We use health information about you to manage your treatment and services.

Bill for your services

We can use and share your health information to bill and get payment from health plans or other entities.

Example: We give information about you to your health insurance plan so it will pay for your services.

How else can we use or share your health information?

We are allowed or required to share your information in other ways – usually in ways that contribute to the public good, such as public health and research. We have to meet many conditions in the law before we can share your information for these purposes. For more information see:

www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/index.html.

Help with public health and safety issues

We can share health information about you for certain situations such as:

- Preventing disease
- Helping with product recalls
- Reporting adverse reactions to medications
- Reporting suspected abuse, neglect, or domestic violence
- Preventing or reducing a serious threat to anyone's health or safety

Do research

We can use or share your information for health research.

Comply with the law

We will share information about you if state or federal laws require it, including with the Department of Health and Human Services if it wants to see that we're complying with federal privacy law.

Respond to organ and tissue donation requests

We can share health information about you with organ procurement organizations.

Work with a medical examiner or funeral director

We can share health information with a coroner, medical examiner, or funeral director when an individual dies.

Address workers' compensation, law enforcement, and other government requests

We can use or share health information about you:

- For workers' compensation claims
- For law enforcement purposes or with a law enforcement official
- With health oversight agencies for activities authorized by law
- For special government functions such as military, national security, and presidential protective services

Respond to lawsuits and legal actions

We can share health information about you in response to a court or administrative order, or in response to a subpoena.

Our Responsibilities

- We are required by law to maintain the privacy and security of your protected health information.
- We will let you know promptly if a breach occurs that may have compromised the privacy or security of your information.
- We must follow the duties and privacy practices described in this notice and give you a copy of it.
- We will not use or share your information other than as described here unless you tell us we can in writing. If you tell us we can, you may change your mind at any time. Let us know in writing if you change your mind.

For more information see: www.hhs.gov/ocr/privacy/hipaa/understanding/consumers/noticepp.html.

MEMORANDUM OF AGREEMENT

BETWEEN

ELKHORN VALLEY PUBLIC HEALTH DEPARTMENT

AND

MEDICAL IMAGING CONSULTANTS

This agreement is entered into between Elkhorn Logan Valley Public Health Department (hereinafter "ELVPHD") and Medical Imaging Consultants (hereinafter "MIC".) for a one time mobile mammography clinic scheduled for June 21, 2018.

I. Responsibilities of Parties Under Agreement

A. MIC will fulfill the following duties for ELVPHD:

1. Perform Screening Mammograms on women scheduled for the one-time mobile mammography clinic scheduled for June 21st, 2018 between the hours of 8 am to 4 pm.
2. To provide mammogram results to women screened during clinic within three weeks of the event*.
3. To provide Midtown Health Center the mammography results of the women screened at the event within three weeks (for those women who indicate that Midtown Health Center is their provider per client paperwork and medical release)*.
4. Process insurance for those in which insurance processing is applicable.
5. Invoice ELVPHD for a maximum set-up fee/travel charge of \$300 within one week of the event (to be received and dated no later than 6/29/18),

* Reports will be mailed/emailed to the address provided to MIC by the patient on their demographic sheet.

*MIC's policy regarding acquiring previous images states: We will request previous mammogram images within 1 business day of the mobile mammogram clinic. We will wait 14 days to receive prior mammogram images from the outside facility. If after 14 days no images have been received the current mammogram will be interpreted without priors and reports sent to the patient and provider.

B. ELVPHD will fulfill the following duties:

1. Schedule a minimum of 20 women for screening mammograms to be performed by MIC on the mobile mammography unit. Patients are to be scheduled every 20 minutes with a 40 minute lunch break for the technologist.
2. Participants/Patients will need to have the following paperwork completed prior to their exam time:
 - a) Completed Demographic sheet.
 - b) Signed HIPPA sheet.
 - c) Medical Release Completed and signed. Including the name of the facility where the imaging was done (if the patient has had previous mammograms).
 - d) Current Insurance Card and Photo ID.

If patient is participating in the Every Woman Matters Program (EWM) - the

3. ELVPHD to reimburse the invoiced set-up fee/travel charge (maximum of \$300.00) as per the invoice received on or before 6/29/18 from MIC. Reimbursement to occur within 30 days of the receipt of invoice.

II. General Provisions

A. ELVPHD and MIC agree that the terms and conditions of this Agreement shall not be shared to any other parties, unless mutually agreed upon in writing.

III. Other Terms and Conditions

1. Federal Laws. ELVPHD and MIC agree to comply with Federal & State laws and regulations relevant and necessary to the execution of this agreement.
2. Entire Agreement. This Agreement constitutes the entire Agreement between the parties with respect to the subject matter.
3. Amendment. This Agreement shall not be modified except upon written agreement of the parties.
4. Assignment. This Agreement is specific to MIC and ELVPHD and shall not be assigned or transferred.
5. Governing Law. This Agreement shall be interpreted, construed, and governed according to the laws of the State of Nebraska.

IN WITNESS WHEREOF, the parties have executed this Agreement on the date set forth below.

Elkhorn Logan Valley Public Health Department

Medical Imaging Consultants

ELVPHD Signature

MIC Signature

Printed Name

Printed Name

Date: _____

Date: _____

MEMORANDUM OF AGREEMENT
BETWEEN
ELKHORN LOGAN VALLEY PUBLIC HEALTH DEPARTMENT
AND
MIDTOWN HEALTH CENTER

This agreement entered into between Elkhorn Logan Valley Public Health Department (hereinafter "ELVPHD") and Midtown Health Center (hereinafter "MHC").

ELVPHD and MHC hereby agree as follows:

I. Responsibilities of Parties Under Agreement

A. MHC will fulfill the following duties for ELVPHD:

1. Scan electronic medical records and create a list of women between the ages of 40-74 who have not had a breast screening in the past two years or who have never had a breast screening.
2. Mail informational materials to the women identified in the step above for the Collaborative Impact Project no later than May 21, 2018.
2. Provide necessary release forms for clients upon arrival for appointment scheduled for June 21, 2018.
3. Provide location for Medical Imaging Consultants to set-up mammography van.
4. If minimum number of screening appointments (20) have not been scheduled by June 4, 2018, work with ELVPHD to contact women who have not responded to the mailing to scheduled them for a screening.

B. ELVPHD will fulfill the following duties:

1. Provide informational materials, labels and postage to complete mailing for Collaborative Impact Project by May 16, 2018.
2. Coordinate and schedule clients for the Collaborative Impact Project.
3. Enroll and educate qualifying clients in the Every Woman Matters program.
4. If minimum number of screening appointments (20) have not been scheduled by June 4, 2018, work with MHC to contact women who have not responded to the mailing to schedule them for a screening.
5. Cover the set-up fee of the mammography van, if minimum number of appointments (20) is not met

II. General Provisions

- A. Agreement may be terminated by either party with at least 90 days written notice or modified at any time by agreement between both parties.
- B. ELVPHD and MHC agree that failure of either party to fulfill their duties will result in cancellation of the Agreement.
- C. ELVPHD and MHC agree that the terms and conditions of this Agreement shall be confidential and shall not be shared to any other parties, unless mutually agreed upon in writing.

III. Other Terms and Conditions

- 1. Federal Laws. ELVPHD and MHC agree to comply with Federal & State laws and regulations relevant and necessary to the execution of this agreement.
- 2. Entire Agreement. This Agreement constitutes the entire Agreement between the parties with respect to the subject matter.
- 3. Amendment. This Agreement shall not be modified except upon written agreement of the parties.
- 4. Assignment. This Agreement is specific to MHC and ELVPHD and shall not be assigned or transferred.
- 5. Governing Law. This Agreement shall be interpreted, construed, and governed according to the laws of the State of Nebraska.

IN WITNESS WHEREOF, the parties have executed this Agreement on the date set forth below.

Elkhorn Logan Valley Public Health Department

Midtown Health Center

ELVPHD Signature

MHC Signature

Printed Name

Printed Name

Date: _____

Date: _____

Mobile Mammography
Mammograms for Eligible Women

Thursday, June 21st, 2018

The screenings will be available to eligible women ages **40-74** who have not had a mammogram in the past year. All major insurance plans are accepted. The Every Woman Matters program coverage is also accepted.

Where: Midtown Health Center, 302 W. Phillip Ave in Norfolk

Appointments **must** be made by 6/7/2018 and will be filled on a first come first serve basis.



To make an appointment please call, **402-529-2233**.





Elkhorn Logan Valley Public Health Department

Date: 08/08/2018

Contact: Tracy Benjes

402-529-2233

Tracy@elvphd.org

FOR IMMEDIATE RELEASE

To newspapers in Burt County

Mobile Mammogram Screening Event

Did you know that 1 in 8 women will be found with breast cancer in their lifetime? The CDC reported that from 2011 – 2015, there were 6,710 new cases of female breast cancer in Nebraska. Over those years there were 1,180 women who died of female breast cancer. The American Cancer Society (ACS) guidelines for a mammogram (x-ray of the breast) are as follows:

- Women between ages 40-44 have the choice to start screening with a mammogram each year.
- Women between the ages of 45-54 should get mammograms each year.
- Women age 55 and older can either switch to a mammogram every other year or they can choose to keep on with yearly mammograms.

Elkhorn Logan Valley Public Health Department is partnering with the Tekamah Mercy Clinic to host a mobile mammography screening event on Thursday, August 30, 2018 at the Tekamah Mercy Clinic, 1121 S. 23th Street in Tekamah. Women between the ages of 40-74 who have not had a mammogram in the past year are invited to take part. Appointments are needed and will fill fast, on a first come, first serve basis. Appointments must be scheduled no later than August 22, 2018. To reserve your spot, call 402-529-2233. All major health insurance plans are taken. Every Woman Matters coverage is also taken. There is other help for women with no insurance. Call for details.

For more information, please call 402-529-2233 or email tracy@elvphd.org. For more information about breast cancer, visit ELVPHD's website at www.elvphd.org. Public health aims to make people and communities healthy and safe. In doing so, ELVPHD offers many services and programs to local residents and businesses of Burt, Cuming, Stanton and Madison Counties in northeast Nebraska. Visit us online today at: www.elvphd.org.



Free* Mammograms

Thursday, August 30, 2018

Free mammograms for patients, ages 40-74, who have not had a mammogram in the past year.

Tekamah Mercy Clinic, 1121 S. 13th,
Tekamah, Nebraska

To reserve your spot, call NOW: **402-529-2233**

Appointments will fill fast on a first come, first serve basis. Appointments must be made no later than August 22, 2018.

*All major insurance plans are accepted. Every Woman Matters program coverage is also accepted. Other assistance is available for uninsured women. Call for details.



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Elkhorn Logan Valley Public Health Department

Date: 08/08/2018

Contact: Tracy Benjes

402-529-2233

Tracy@elvphd.org

FOR IMMEDIATE RELEASE

To newspapers in Madison County

Mobile Mammogram Screening Event

Did you know that 1 in 8 women will be found with breast cancer in their lifetime? The CDC reported that from 2011 – 2015, there were 6,710 new cases of female breast cancer in Nebraska. Over those years there were 1,180 women who died of female breast cancer. The American Cancer Society (ACS) guidelines for a mammogram (x-ray of the breast) are as follows:

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- Women between the ages of 45-54 should get mammograms each year.
- Women age 55 and older can either switch to a mammogram every other year or they can choose to keep on with yearly mammograms.

Elkhorn Logan Valley Public Health Department is hosting a mobile mammography screening event on Friday, September 14, 2018 during the PATCH Health Fair at the Northeast Community College Cox Activity Center parking lot. Women between the ages of 40-74 who have not had a mammogram in the past year are invited to take part. Appointments are needed and will fill fast, on a first come, first serve basis. Appointments must be scheduled no later than August 22, 2018. To reserve your spot, call 402-529-2233. All major health insurance plans are taken. Every Woman Matters coverage is also taken. There is other help for women with no insurance. Call for details.

For more information, please call 402-529-2233 or email tracy@elvphd.org. For more information about breast cancer, visit ELVPHD's website at www.elvphd.org. Public health aims to make people and communities healthy and safe. In doing so, ELVPHD offers many services and programs to local residents and businesses of Burt, Cuming, Stanton and Madison Counties in northeast Nebraska. Visit us online today at: www.elvphd.org.

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Wolf pups born in Cascade Mountains

SALEM, Ore. (AP) — Imagery from the forest near Oregon's towering Mount Hood, and hearing wolves howling.

That prospect became more real on Wednesday when state wildlife officials announced that two wolf pups were seen near the mountain for the first time since wolves were exterminated from the state nearly 70 years ago.

A remote camera on the Warm Springs Indian Reservation, whose boundary lies some 10 miles south of Oregon's highest mountain, captured images of two pups on Aug. 10, the Oregon Department of Fish and Wildlife announced Wednesday. The department's web site showed a photo taken Aug. 19 of a wolf sitting in grass, looking at two wolf pups whose coats are light brown. One of the pups is looking straight at the camera and seems to be sniffing at it.

Environmentalists celebrated the news.

"Today, we let out a huge howl knowing that a wolf pack is rightly back on the landscape around iconic Mt. Hood after the species was systematically exterminated decades ago," said Josh Laughlin, executive director of Cascadia Wildlands.

The images mark the first known reproduction by wolves in the northern part of the Cascade Mountains in Oregon since wolves began returning to the state in the past decade, said the state wildlife department, which is working with the U.S. Fish and Wildlife Service and the Confederated Tribes of Warm Springs to monitor the wolves.

Wolves in the western two-thirds of the state are protected by the federal Endangered Species Act, and the sighting falls within that area.

Cascadia Wildlands said the state needs to ensure strong state and federal protections remain in place for recovering wolves "so they can continue to re-occupy their historic territories across Oregon."

It said the Oregon Department of Fish and Wildlife is years overdue in revising its Wolf Plan, which guides recovery in the state. The environmental group said it will be present at a stakeholder meeting for the Wolf Plan revision, being held Thursday in the town of The Dalles.

The state wildlife department said Fish and Wildlife Commissioners decided earlier this year to postpone adopting a final Wolf Plan in hopes of getting consensus from stakeholders. Some ranchers in eastern Oregon have seen livestock being killed by wolves. There have been several instances of wolves being poached.

The state wildlife department has said it will reissue a "limited duration kill permit" to a rancher who recently lost a calf to wolves, the fourth depredations to his livestock in northeast Oregon since June. The new permit will allow the rancher or his agent to shoot one wolf on his public land allotment occupied by his livestock. State wildlife biologists counted 124 wolves in Oregon this past winter, an 11 percent increase over the number counted last year.

Fall is when the bite is on

It is hard to believe that the summer is gone and we are heading into the fall. But as water temperatures start to decrease, all species of fish will be packing on the pounds. When these things happen, it is a good bet that it will not be long before the fall bite begins.

Because of this, in the fall, larger live bait works best. Larger baits, chubs, larger minnows, even eels, can be a single minnow on a hook seems to attract the larger fish.

In the rivers, you will find the walleye, sauger and smallmouth bass moving shallow to clean up any remaining baitfish, crawfish that made it through the summer and smaller game fish.

In our lakes, bluegills, crappies, largemouth bass and pike will move into and along the edge of the weeds, picking up the few baitfish that are left, some insects and, of course, each other.

Those walleyes in the lake will spread out over the mud flats or cruise the weeds looking for a late-season snack.

The key to locating good numbers of fish will be to find the greenest vegetation because in the fall it attracts the fish.

There are several reasons that fish will move into these green weed beds. The first is that their food source — baitfish and other aquatic species — have relocated there. Another is this is where the most comfortable water conditions are found.

But if you have fished these weedy areas, you know they are a nightmare as weeds can tackle as fast as you can tie it on.

When fishing for bass, you will probably be working these weedy areas with some sort of weedless rig. Fall bass love to bury themselves deep inside the weeds, adjacent to the open pockets in the weeds, waiting in ambush for some aquatic creature to swim by.



Gary Howey
Outdoor report

These open water pockets are good locations to fish and run spinnerbaits over the top of the weeds. Buzzbaits are also very productive when fishing weedy areas, especially during the fall.

As water temperatures drop and late fall approaches, the metabolism of fish slows down and you will need to do the same, slowing down the way you fish and moving to smaller baits.

If you are fishing for panfish, work the pockets and along the edge of the weeds with small tube jigs or a light livebait jig.

Walleye anglers this time off the year switch from night crawlers and leeches back to minnows. Experiment a little bit with your baits during late fall as all walleyes do not change from worms to minnows at the same time or on a given date.

Those fall fishing for walleye have good luck using jigs drifting through current breaks, worked along the edge of the weeds and on the mud flats.

Pike anglers will be working the weeds as where you find weeds, you will find pike. Several baits that will pull pike from within the weeds include spinnerbaits that are run over the top or along the edge of the weeds.

When fishing for pike in the fall, you will want to hold your rod high and power or speed crank the bait over the top of the weeds, using the helicopter drop method into the open water pocket.

Slip bobber rigs with large hooks and bait drifted along the weed edge is another big

pike producer in the fall. Bottom-loving catfish make the move from their summer haunts — those cooler, deeper holes that held them in the hotter weather — and head shallower. When fishing for fall cat, anglers fish their prepared stinkbaits, cutbaits and live bait rigs into the water with less current and lower temperatures where catfish will be located.

Fall is the time of the year you do not want to make the mistake that some anglers do and put your fishing tackle away. If you are only thinking of hunting, you are going to miss some of the finest fishing there is during the entire year.

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Perry to make statement on missing Florida men

NAPLES, Fla. (AP) — Film-maker Tyler Perry will make an announcement about two Florida men who disappeared almost 15 years ago.

Perry and attorney Benjamin Crump are scheduled Tuesday to make an announcement about Felipe Santos and Terrance Williams, who vanished after being detained separately by Collier County deputy Steven Calkins.

He wasn't charged but was fired for not cooperating with investigators. Santos was Hispanic and Williams was

black. Calkins is white. Perry offered a \$100,000 reward in 2013 for information about the disappearance.

The men vanished after being picked up by Calkins. Santos was in a 2003 fender bender and Calkins arrested him because he didn't have insurance or registration.

Williams vanished in 2004 after Calkins stopped at his broken-down car.

Calkins told investigators he left both at a convenience store.

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Now that we have your attention, we would like to invite you to enjoy hors d'oeuvres & a presentation!

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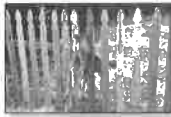
Free* Mammograms
Friday, September 14, 2018
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Northeast Community College - Cox Activity Center Parking Lot during the PATCH Health Fair, Norfolk, Nebraska
To reserve your spot, call NOW: 402-529-2233
Appointments will fill fast on a first come, first serve basis. Appointments must be made no later than September 7, 2018.
*All major insurance plans are accepted. Every Woman Matters program coverage is also accepted. Other assistance is available for uninsured women. Call for details.

Feel the Beat
Norfolk Go Red For Women
Ladies Night Out
Thursday, September 13, 2018 | 5pm-11pm
Doris Bostant Center
For more information call 402-473-7522 or visit local.org/norfolkgo-red

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ACROSS THE NATION

A brief look at what's happening in the U.S.



Baby deer rescued

EUGENE, Ore. (AP)—An animal welfare officer in Oregon is getting attention after her body-worn camera captured her rescuing a baby deer.

The Eugene Police Department on Thursday made public a video and photo of Officer Shawn McLaughlin freeing a terrified fawn that got stuck in a backyard fence. In the video, McLaughlin wraps the fawn's head in a towel and lifts it from between two narrow fence posts as she gently talks to the deer.

The fawn lies on the ground for a few seconds after being freed, apparently not aware it can walk.

McLaughlin pets it before it springs up and runs away. An open sore can be seen on the fawn's left hip.

Tiny city population

RUSO, N.D. (AP)—North Dakota's smallest incorporated city was on the verge of dissolving after the death of its longtime mayor. But now it's rebounding, with expectations to double its population — from two residents to four.

The McLean County community of Ruso was on the verge of disincorporation when its population dropped following the July death of 86-year-old Bruce Loren. It takes a minimum of three residents for a community to be incorporated, according to the North Dakota Century Code.

"We want to keep it going for Bruce's sake," Laurinda Rolosen, the city's auditor and one of Ruso's two remaining residents, told the Minot Daily News.

Eye drop poisoning

CLOVER, S.C. (AP)—Authorities said a South Carolina woman has been charged with murder after killing her husband by putting eye drops into his water for several days.

York County deputies said 52-year-old Lana Clayton confessed to investigators after an autopsy uncovered a high amount of tetrahydrozoline in her husband's body. The chemical is found in over-the-counter eye drops such as Vism.

Authorities said 64-year-old Stephen Clayton was found dead July 21 in the couple's home in Clover. Arrest warrants and the statement from deputies didn't give a motive for the alleged poisoning.

Lana Clayton also is charged with malicious tampering with a drug product or food.

Boat accident lawsuit

JEFFERSON CITY, Mo. (AP)—Attorney General Josh Hawley on Friday sued the owners and operators of a tourist boat that sank in a Missouri lake, killing 17 people, alleging that the companies violated the state's consumer protection law and put profits above safety.

Hawley asked a Taney County circuit judge to order the owner and operator—Branson Duck Vehicles, LLC and Ripley Entertainment — to pay restitution and other penalties. The attorney general's office also is asking that the judge ban the amphibious vehicle tours from operating, although a Ripley spokesman said tours stopped after the July sinking.



FIRST RESPONDERS work the scene of a collision between a Greyhound passenger bus and a semi-truck on Interstate 40 near the town of Thoreau, N.M., near the Arizona border on Thursday. Multiple people were killed and others were seriously injured.

Negligence claims after deadly New Mexico crash

ALBUQUERQUE, N.M. (AP)—A California-based trucking company and one of its drivers were accused of negligence Friday in a pair of lawsuits as investigators sorted through the wreckage from a deadly bus crash on a New Mexico highway. Eight people were killed and 25 injured, including three young children.

The Greyhound bus carrying nearly 50 people was headed west along Interstate 40 on Thursday when a semi-trailer going in the opposite direction lost the tread on its left front tire and veered across a median and smashed into the bus, police said.

The front of the bus was mangled, the cab of the semi was flipped and the trailer was on its side as debris was scattered along the highway. Passing motorists stopped to help passengers climb out of the wreckage before authorities arrived.

New Mexico State Police Chief

Pete Kassetas called them heroes, saying some pulled ladders from trucks to reach the bus windows.

"For them to stop and get involved is amazing. I commend them," the chief said. "To get ladders, to get into the bus to get people. Can you imagine?"

Investigators with National Transportation Safety Board have secured the vehicles for inspection and examined the crash scene Friday. They also will be looking at factors such as driver fatigue, training, safety records and the condition of the roadway.

"Unfortunately things of this nature occur and our job is to try to do what we can do to prevent them from happening again in the future," said lead investigator Pete Kolowski.

The legal complaints filed Friday allege negligence on behalf of the unnamed truck driver and JAG Transportation Inc. They cite data from the Federal Motor Carrier

Safety Administration that shows the company reported three crashes in the last 24 months.

Attorney Bryan Williams said there are concerns about proper maintenance and inspection of the truck's tire.

A woman who answered the phone at the company's office said no one was available to comment.

The plaintiffs are not named but one is from Arizona and the other is from Ohio.

The driver of the semi, a 35-year-old man licensed out of California, sustained non-life-threatening injuries. Authorities did not name him, saying he was not currently facing charges.

Officials at University of New Mexico Hospital in Albuquerque said nine patients remain hospitalized there, including three adults who are in intensive care, one of whom is in critical condition. Two infants are also in intensive care.



PEOPLE WHO'VE been taken into custody related to cases of illegal entry into the United States, sit in one of the holding units at a facility in McAllen, Texas.

Sex abuse claims raise pressure to reunite families

SAN DIEGO (AP)—The Trump administration is under increasing pressure to speed up the reunification of immigrant families it separated at the Mexican border, following allegations three youngsters were sexually abused while in U.S. custody.

The government of El Salvador said the three, ages 12 to 17, were victimized at shelters in Arizona, and it asked the U.S. to make their return a priority.

"May they leave the shelters as soon as possible, because it is there that they are the most vulnerable," Deputy Foreign Relations Minister Liduvina Magarin said in San Salvador on Thursday.

The U.S. government already is facing heavy criticism over its slow pace in reuniting more than 2,600 children who were separated from their parents last spring before the Trump administration agreed to stop the practice. Most have since been reunited, but hundreds remain apart more than a month after the deadline set by a judge.

Before the Trump administration reversed course, many of the parents had been deported to their home countries while their children remained in shelters in the U.S.

Attorneys for the U.S. government and the immigrant families discussed how to accelerate the process at a hearing Friday in San Diego in front of U.S. District Judge Dana Sabraw, who set the deadline.

Magarin gave few details on the three cases other than to say they involved "sexual violations, sexual abuses." She said her government is ready with lawyers and psychologists to help the families, adding, "The psychological and emotional impact is forever."

"It's unbelievable that children who were fleeing violence here were met in the United States with the worst violence a child could encounter," said Cesar Rios, director of the Salvadoran Migrant Institute.

Former spy: Russia had 'Trump over a barrel'

WASHINGTON (AP)—A former Justice Department lawyer said a former British spy told him at a breakfast meeting two years ago that Russian intelligence believed it had Donald Trump "over a barrel," according to multiple people familiar with the encounter. The lawyer, Bruce Ohr, also said he learned that a Trump campaign aide had met with higher-level Russian officials than the aide had acknowledged, the people said.

The previously unreported details of the July 30, 2016, breakfast with Christopher Steele, which Ohr described to lawmakers this week in a private interview, reveal an exchange of potentially explosive information about Trump between two men the president has relentlessly sought to discredit.

They add to the public understanding of those pivotal summer months as the FBI and intelligence community

scrambled to untangle possible connections between the Trump campaign and Russia. And they reflect the concern of Steele, a longtime FBI informant whose Democratic-funded research into Trump ties to Russia was compiled into a dossier, that the Republican presidential candidate was possibly compromised and he urged efforts to convey that anxiety to contacts at the FBI and Justice Department.

The people who discussed Ohr's interview were not authorized to publicly discuss details of the closed session and spoke to The Associated Press on condition of anonymity.

Among the things Ohr said he learned from Steele during the breakfast was that an unnamed former Russian intelligence official had communicated that Russian intelligence believed "they had Trump over a barrel," according to people familiar with the meeting.

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 NORFOLK DAILY NEWS

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 Cox Activities Center at Northeast Community College
 Friday, Sept. 14 7:00 a.m.-5:30 p.m.
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 *Coloring Contest Available for youth! (Download Coloring Page)
 See full details in Wednesday, Sept. 13th Edition of the Norfolk Daily News and the Daily News Plus



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Friday, September 14, 2018

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Northeast Community College –
Cox Activity Center Parking Lot during the
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Making an Impact in our communities

Because you give, memories are being made.

Little ones are making sugar cookies with grandma, having mommy tuck them into bed at night, and celebrating birthdays with family members.



I'm not old enough to remember.

All I know is that you are here today because your breast cancer was found early while you were breastfeeding me. All I care about right now is snuggling with you – feeling your warm breath and your heartbeat. What would I do without you?

Youngest of three children of a 42-year-old mom diagnosed with breast cancer who received a grocery card to help feed her family.



Visiting Nurse Association helps moms make more memories and alleviate the financial stress of a cancer diagnosis.



I almost canceled my mammogram.

I just had one last year. But I didn't cancel. The medical team found a lump and I was diagnosed with breast cancer. Thank you for your kindness and generosity. It is a comfort to know there are organizations and people who truly care.

Survivor who traveled over 200 miles each day from western Nebraska to South Dakota for six weeks of radiation treatment.



John T. Vucurevich Cancer Care Institute helps patients with transportation costs, so women can focus on getting healthy.

Thanks for helping so many families create more memories.

Despite tremendous progress, an estimated six families in our service area lose a loved one to breast cancer each week. That's unacceptable to us. No one should die of breast cancer.

Our Bold Goal: Reduce the current number of breast cancer deaths in the U.S. by 50 percent by 2026.

Our Mission

Save lives by meeting the most critical needs in our communities and investing in breakthrough research to prevent and cure breast cancer.

Even today, too many people die of breast cancer because they don't have access to high-quality care — especially those who are uninsured, underinsured and low-income men and women in our communities.

You recognize that programs and resources to help reduce barriers are important, and that when combined with research to find new treatments for aggressive and incurable forms of breast cancer — we can help save lives. Most recently*, you helped to provide:

- 📦 **Over 10,000 education encounters**
- 📦 **Nearly 4,000 free or low-cost screening services**
- 📦 **500 individuals received treatment assistance and survivorship support**

*March 2016-2017



Visit us online at komengreatplains.org to learn about our community partners and local services, including the *Komen Great Plains Treatment Assistance Program* introduced in April 2018.



I don't speak English and I can't drive.

I didn't know where to go for my health. After visiting OneWorld Community Health Center, I learned that I could get a mammogram at a mobile unit. I learned about the importance of screening, and I felt safe and supported.

Client of OneWorld Community Health Center who received a mammogram for the first time ever thanks to a mobile mammography unit.




- ▲ **Ease of access to care can be a huge barrier for women. OneWorld provides free or low-cost breast cancer screening options to medically underserved women.**

Since 1994, Komen Great Plains has invested more than \$8 million in funding in Nebraska and South Dakota, and contributed nearly \$3 million for breast cancer research. Thank you for helping us make an impact in our communities.

Susan G. Komen Great Plains

Omaha Office: 402-502-2979 | Sioux Falls Office: 605-271-1751

info@komengreatplains.org | www.komengreatplains.org

Connect with us    1-877-GO KOMEN (1-877-465-6636)

**BE
MORE
THAN
PINK**

What to Expect on the Day of the Exam

On the day of the exam, it is a good idea to wear a shirt you can remove easily. Don't use deodorant, perfume, powder or lotion. Ingredients in these products can show up on a mammogram and make it hard to read. Getting a screening mammogram takes about 15 minutes.

During the exam, each breast is pressed between two plates and an X-ray image is made. Two views of each breast are taken, one from top to bottom and the other from side to side.

Whether you need a screening mammogram or a diagnostic mammogram, the exam is about the same. You may have more views with a diagnostic mammogram though.

Questions & Answers about Mammography

Are mammograms painful?

Getting a mammogram shouldn't hurt. You may feel some pressure as the technologist flattens the breast, but it only lasts a few seconds.

Is the radiation harmful?

Being exposed to a small amount of radiation during a mammogram can increase the risk of breast cancer over time, but this increase in risk is very small. Studies show that the benefits of mammography outweigh the risks.

How can I get a mammogram?

Call your doctor for a referral.

What if I cannot afford a mammogram?

The Affordable Care Act requires all new health insurance plans to cover mammography for women ages 40 and older. This includes Medicare and Medicaid. There are also many free or low cost programs. Call our breast care helpline at 1-877 GO KOMEN (1-877-465-6636) for information about low cost programs that may be in your area.

1-877 GO KOMEN (1-877-465-6636) www.komen.org

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What is a Mammogram?

A mammogram is an X-ray of the breast. It is the best screening tool we have today to find breast cancer early, when it is most treatable. It can find breast cancer when it is very small, even too small to feel. It can also detect calcifications as well as abnormal changes to the skin. Mammography does a good job of finding cancer for most women. However, it is most accurate when used with another screening test called clinical breast exam.

Approximate Size of Tumors Found by Mammography

Compared to Commonly Used Coins



Average-size lump found by yearly mammogram when past films can be compared.



Average-size lump found by first mammogram.



Average-size lump found by accident.



Komen's mission is to save lives by meeting the most critical needs in our communities and investing in breakthrough research to prevent and cure breast cancer.

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Omaha, NE 68124
402-502-2979

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SUSAN G. KOMEN® GREAT PLAINS TREATMENT ASSISTANCE PROGRAM

The following assistance is available for qualifying breast cancer patients:

- ◆ Assessment by an oncology social worker
- ◆ Financial assistance for:
 - ◆ Oral pain medication
 - ◆ Anti-nausea medication
 - ◆ Oral chemotherapy/hormone therapy
 - ◆ Child care/elder care
 - ◆ Transportation to and from treatment
 - ◆ Lymphedema care and supplies
 - ◆ Durable medical equipment
- ◆ Breast cancer education
- ◆ Psychosocial support

Don't let financial hardship keep you from the treatment you need.

**Call the Susan G. Komen® Breast Care Helpline
M-F 8 AM– 9 PM CT
1-877 GO KOMEN (465-6636) or email
helpline@komen.org**



WHAT EVERYONE SHOULD KNOW

Every two minutes, one case of breast cancer is diagnosed in a woman in the U.S. Early detection and effective treatment for breast cancer have been known to improve survival.

1. Know your risk

- Talk to both sides of your family to learn about your family health history
- Talk to your health care provider about your personal risk of breast cancer

2. Get screened

- Talk with your provider about which screening tests are right for you if you are at a higher risk
- Have a mammogram every year starting at age 40 if you are at average risk
- Have a clinical breast exam at least every three years starting at age 20, and every year starting at age 40
- Sign up for your screening reminder at komen.org/reminder

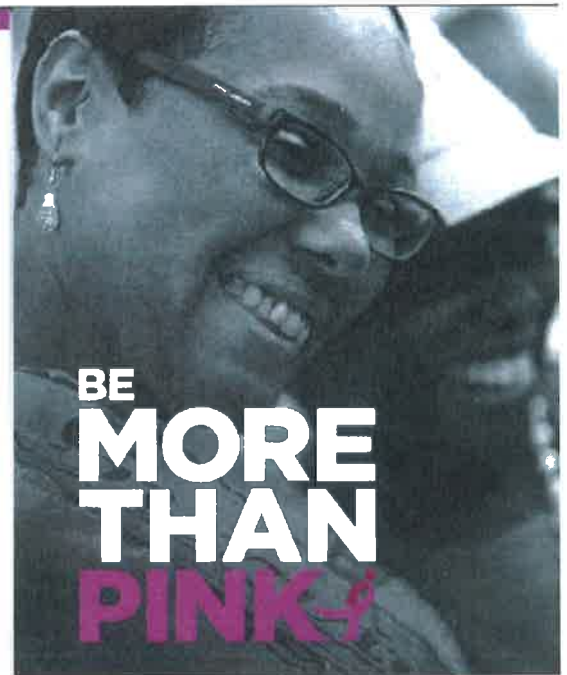
3. Know what is normal for you

Know how your breasts normally look and feel and report any changes to your health care provider.

4. Make healthy lifestyle choices

- Maintain a healthy weight
- Add exercise into your routine
- Limit alcohol intake
- Limit menopausal hormone use
- Breastfeed, if you can

For more information, visit komen.org or call **1-877 GO KOMEN** (1-877-465-6636)



Act.

One in eight women will be diagnosed with breast cancer in her lifetime. Know the right time to get screened and be an advocate for your health.

Donate.

Your support helps us give hope to the 24 Nebraskans diagnosed with breast cancer every week.

Get Involved.

Every step, every dollar and every voice matters. Join us for the 25th Anniversary Nebraska Race for the Cure on Sunday, Oct. 7, 2018 in Omaha.

Our Bold Goal: Reduce the current number of breast cancer deaths by 50 percent in the U.S. by 2026.

Susan G. Komen® Great Plains
8707 West Center Road, Suite 101
Omaha, Nebraska 68124
402-502-2979 | komengreatplains.org



Some factors linked to a higher risk of breast cancer:

- being a woman
- getting older (breast cancer risk increases with age)
- an inherited mutation in the BRCA1 or BRCA2 breast cancer genes
- a family history of breast or ovarian cancer
- high breast density on a mammogram
- hyperplasia or lobular carcinoma in situ (LCIS)
- a personal history of breast cancer (including ductal carcinoma in situ (DCIS))
- exposure to large amounts of radiation at a young age
- never having children or having a first child after age 35
- younger age at first period (before age 12)
- older age at menopause (age 55 or older)
- alcohol use
- Ashkenazi Jewish heritage
- current or recent use of birth control pills
- current or recent use (for more than 5 years) of menopausal hormone therapy (postmenopausal hormone use) containing estrogen plus progestin
- being overweight or weight gain as an adult (postmenopausal breast cancer)
- not breastfeeding
- lack of exercise

Some factors linked to a lower risk of breast cancer:

- achieving and maintaining a healthy weight
- getting regular exercise
- limiting alcohol
- avoiding menopausal hormones containing estrogen plus progestin
- breastfeeding, if you can



FACTS FOR LIFE

Breast Cancer Risk Factors

For more information about these and other risk factors, visit www.komen.org/risk.

Related fact sheets in this series:

- Breast Cancer Detection
- Breast Density
- Genetics and Breast Cancer
- How Hormones Affect Breast Cancer

Susan G. Komen® is not a health care provider and does not give medical advice. The information provided in this material is not meant to be used for self-diagnosis or to replace the services of a medical professional. The Running Ribbon is a registered trademark of Susan G. Komen®.



For more information, visit www.komen.org or call Susan G. Komen®'s breast care helpline at 1-877 GO KOMEN (1-877-465-6636)

Monday through Friday, 9 AM to 10 PM EST.

What affects your risk of getting breast cancer?

The causes of breast cancer are not fully known. However, researchers have identified a number of factors that increase (or decrease) the chances of getting breast cancer. These are called risk factors. Breast cancer is complex and likely caused by a combination of risk factors. Some factors you may be able to control (like exercise). Yet, some are out of your control (like age). Some are still unknown. Since you can only control some risk factors, you cannot avoid some amount of risk. For example, the two most common risk factors for breast cancer are being a woman and getting older.

Most risk factors that you have some control over only have a small effect on risk. This means there is no one behavior that will prevent breast cancer. But, it also means there's no one factor that will cause it.

Talk to your health care provider about your personal risk.

Age: a major factor

A woman's chance of getting breast cancer increases with age.

If your current age is:	The chances of developing breast cancer in the next 10 years is:
20	1 in 1,681
30	1 in 232
40	1 in 69
50	1 in 42
60	1 in 29
70	1 in 27
Lifetime risk (up to age 85)	1 in 8

Get the facts on breast cancer

Because the causes of breast cancer are not fully known, there are many myths about the disease.

Myth

I'm only 35. Breast cancer happens only in older women.

Only women with a family history of breast cancer get breast cancer.

If I don't have a BRCA1 or BRCA2 gene mutation, I won't get breast cancer.

Women with more than one risk factor typically get breast cancer.

You can prevent breast cancer.

If I had a mammogram every year, I would be exposed to too much radiation, and that would cause cancer.

Breastfeeding increases my risk of breast cancer.

Fact

While the risk of breast cancer increases with age, all women are at risk for getting breast cancer.

Actually, most women who get breast cancer have no family history of the disease. However, a woman whose mother, sister or daughter had breast cancer has an increased risk. Having a male relative with breast cancer also increases your risk.

Most women who get breast cancer do not have a BRCA1 or BRCA2 gene mutation. Only 5 to 10 percent of women in the U.S. who get breast cancer have an inherited gene mutation that increases risk.

Most people diagnosed with breast cancer have no known risk factors except being a woman and getting older. All women are at risk.

Because the causes of breast cancer are not yet fully known, there is no one way to prevent it. However, making healthy lifestyle choices may reduce the risk of breast cancer. For women at a high risk of breast cancer, the drugs tamoxifen and raloxifene can reduce risk.

The small level of radiation from mammograms is believed to be safe, with the benefits outweighing the risks.

Breastfeeding actually decreases a woman's risk of getting breast cancer, especially premenopausal breast cancer.

For more information about risk factors go to www.komen.org/risk

Mobile Mammogram Screening Event

LMS
8-14-18

Did you know that 1 in 8 women will be found with breast cancer in their lifetime? The CDC reported that from 2011 - 2015, there were 6,710 new cases of female breast cancer in Nebraska. Over those years there were 1,180 women who died of female breast cancer. The American Cancer Society (ACS) guidelines for a mammogram (x-ray of the breast) are as follows:

Women between ages 40-44 have the choice to start screening with a mammo-

gram each year.

Women between the ages of 45-54 should get mammograms each year.

Women age 55 and older can either switch to a mammogram every other year or they can choose to keep on with yearly mammograms.

Elkhorn Logan Valley Public Health Department is partnering with the Tekamah Mercy Clinic to host a mobile mammography screening event on Thursday, August 30, 2018 at the Tekamah Mercy

Clinic, 1121 S. 23th Street in Tekamah. Women between the ages of 40-74 who have not had a mammogram in the past year are invited to take part. Appointments are needed and will fill fast, on a first come, first serve basis. Appointments must be scheduled no later than August 22, 2018. To reserve your spot, call 402-529-2233. All major health insurance plans are taken. Every Woman Matters coverage is also taken. There is other help for women with no insurance. Call for details.

For more information, please call 402-529-2233 or email tracy@elvphd.org.

For more information about breast cancer, visit ELVPHD's website at www.elvphd.org. Public health aims to make people and communities healthy and safe.

In doing so, ELVPHD offers many services and programs to local residents and businesses of Burt, Cuming, Stanton and Madison Counties in northeast Nebraska. Visit us online today at: www.elvphd.org.

Mobile Mammogram Screening Event

OI
8-16-18

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