

# Personal BLESSING

OUR PATIENTS. THEIR STORIES.

FALL | WINTER 2025

A publication of  
**B** BLESSING  
Health System



**"A smile can brighten  
the darkest day"**

ANONYMOUS

*Read the stories of these exceptional  
people inside this issue*



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Published by the Marketing, Communications & Community Relations staff of Blessing Health, *Personal Blessing* provides general information on health-related topics. It is not intended to be a substitute for professional medical advice, which should always be obtained from your physician.

## The Blessing Health Mission Statement:

To improve the health of our communities

## The Blessing Health Vision Statement:

Blessing Health will be exceptional

- in providing a safe, high-quality healthcare experience;
- in being the best place for providers to practice;
- in being a place where employees want to work and students want to learn; and
- in partnering with our communities.

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# An Epic moment is coming



On March 21, 2026, our new electronic health record (EHR), made by the Epic company, goes live across Blessing Health System. We are excited because this means better coordination of your care and greater efficiency.

Among its specific benefits, the Epic EHR will offer an exceptional patient portal, making how you manage and track your health care more convenient. Our website and social media platforms will have more information as spring grows closer on this “epic” change in your health care.

## Because you deserve the best care

Our caregivers work hard to ensure the quality of care they offer you is of the highest level. Following are the most recent results of that work:

- The spring survey of the Leapfrog Group gave our **patient safety an “A” grade**. Only 32% of hospitals nationwide and 35 hospitals in Illinois received this top grade.
- *US News and World Report’s* annual health care providers rankings rated us a “**High Performing Hospital**” for **abdominal aortic aneurysm repair, colon cancer surgery, heart bypass surgery and stroke**. Only 38% of the evaluated hospitals earned this status. This marked our seventh year with this honor.
- We retained our “**Get with the Guidelines**” **Gold Award from the American Stroke Association** for the processes we use to get stroke patients the right care at the right time and the outcomes of that care.
- Our **3T MRI system earned Prostate Cancer MRI Center status** from the American College of Radiology.
- The **inpatient rehabilitation program** earned national reaccreditation with **no recommendations for improvements**. Only 3% of surveyed programs nationally and internationally receive no improvement recommendations.
- Our **specialty pharmacy earned national accreditation**. This team prepares high-complexity medications for patients in an average of less than two days, compared to six days from similar pharmacies nationwide.
- Our **Nurse Residency Program**, which supports new nurses as they assume their first professional roles to provide your care with confidence and competence, **earned national reaccreditation with distinction**.
- The team responsible for keeping our patient care instrumentation sterile became only the 21st department in the nation and third in Illinois to earn national certification.

Thank you for trusting your care to all the caregivers throughout Blessing Health System. Through *Personal Blessing* we are proud to share the stories of others who also put their trust in us.







## *The place* to go for a career in health care

**Blessing-Rieman College of Nursing and Health Sciences has been educating nurses for 134 years and keeps getting better and better. Check out these recent accomplishments.**

May 2025 nursing graduates posted a 100% first-time passage rate on the National Council of Licensure Examination (NCLEX). That pass rate is 8% higher than the national average from last year. Passage of the exam is required to become a licensed, registered nurse. “A 100% pass rate is not just a statistic—it is representative of the dedication of our graduates, the excellence of our faculty and the strength of our clinical sites. It reflects our vision of being recognized as a caring and engaged learning community, committed to preparing health care leaders for success,” said **Brenda Beshears, Ph.D., RN, president/CEO.**

The college saw a double-digit enrollment increase for the 2025-2026 academic year of 11%, with total enrollment reaching 331 students. “As the number of high school graduates decreases, Blessing-Rieman is seeing record enrollment in all programs,” said Dr. Beshears. “Personalized care and attention that students receive at BRCN make a huge difference in their success.”

**Blessing-Rieman  
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first-time NCLEX  
pass rate—  
8% higher than  
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average.**

Students who qualify can access the Blessing Education Revolving Fund (BERF) loan program, which pays for 100% of tuition and fees. This loan will be forgiven for students who choose to stay and work for Blessing Health System.

The college also offers a new degree program, diagnostic medical sonography. Sonography uses soundwaves to produce images of internal organs and blood vessels. The federal Bureau of Labor Statistics projects an 11% increase in demand for medical sonographers through 2033. The bureau calls that growth rate “much faster” than the average of all occupations.

At graduation, students receive a Bachelor of Science degree in diagnostic medical sonography, have more than 1,200 hours of hands-on experience in the clinical setting and are eligible to take the national Registered Diagnostic Medical Sonographer (RDMS) credentialing examination.

In addition, the college offers joint Bachelor of Science degrees in nursing, radiologic science, respiratory care, an Associate of Science in medical laboratory, an online RN to BSN, an online RRT-BSRT and an online Master of Science in nursing degree. ■



For more information on the programs offered at Blessing-Rieman College of Nursing and Health Sciences, scan this code or go to **brcn.edu**

# FROM HEALTH HIPPIE TO CANCER WARRIOR

## Pam's powerful fight against triple-negative breast cancer

**Pam Richard is a self-described “health hippy.” She swims, exercises with a fitness coach and watches what she eats.**

“I never thought I would be the 1-in-8,” the 60-year-old wife, mother and grandmother said. The phrase 1-in-8 refers to the lifetime risk of a woman being diagnosed with breast cancer. “I felt like the healthiest sick person ever.”

“The morning I felt it, everything changed in an instant,” she continued. “It” was a strawberry-sized lump. At that moment, Pam could not have realized just how much in her life and world would change and how fast.

“Within 48 hours I had seen my primary care provider, undergone mammograms, ultrasounds and biopsies from which my triple-negative Stage 2 breast cancer was revealed,” she explained.

Triple-negative breast cancer (TNBC) is a type of tumor whose growth is not fed by the three common growth drivers associated with breast cancer. TNBC is often more aggressive and faster growing, with a higher risk of returning after treatment. Out of 100 people with breast cancer, about 15 will have TNBC.

In addition, genetic testing revealed Pam carried the BRCA2 gene mutation. More than 60% of women with the BRCA2 mutation will develop breast cancer during their lifetime, compared to about 13% of women in the general population. Additionally, 13% to 29% of women with the BRCA2 mutation will develop ovarian cancer.

### The hardest decision of her life

The self-described health hippie wished she would have had the time to research natural treatments for her condition.

“Because of the suspected aggressiveness of the tumor, I had to let myself quickly process the risk factors of the conventional medicine I had seen work for some acquaintances versus the time it might take to research and find natural treatments,” she said. “I chose to place my trust in the **Blessing Cancer Center** team,” Pam said.

A woman of deep faith, she formed a prayer group of family and friends with whom she would communicate daily, adopted the motto “No Pity/Just Prayer” and began the journey to what Pam calls her “new self.”

“The wheels started into motion like a finely oiled clock,” she described. “I was introduced to my nurse navigator, **Jessica Nuebel**—an eight-year survivor of the same diagnosis. Knowing that instantly gave me hope. Jessica became my liaison, lifting my burden of

scheduling scans and care appointments. She attended weekly meetings with the care team on my behalf as they followed my progress, taking notes for me at a time when my head was swimming with the shock of the diagnosis, the unknown and the rollercoaster of emotions that accompany such a journey.”

Other members of Pam's care team were primary care provider **Becky Reed, APRN-FNP**, medical oncologist **Daniel Koh, MD** and surgeon **Emmanuel Bessay, MD**.

### Treatment begins

As is common in the case of TNBC, the first step of her care was 16 chemotherapy treatments to see what Pam's tumor would react to, in case the cancer recurred.

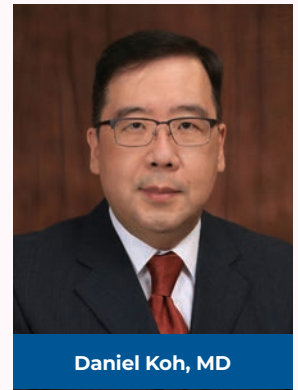
That was followed by surgery. Pam opted for a double mastectomy on June 25, 2025, to reduce her risk for

**Triple-negative breast cancer accounts for about 10-15% of all breast cancers**

Source: American Cancer Society



Jessica Nuebel, MSN, RN



Daniel Koh, MD

Pam Richard stands next to her husband, a nurse at Blessing Hospital, and family to celebrate the end of her chemotherapy treatments.



Emmanuel Bessay, MD

breast cancer recurrence. She chose not to undergo reconstructive surgery. Pam did not want the additional surgeries reconstruction would require, the possible complications and the longer recovery time.

The results of her care were stunning. After chemotherapy and surgery, Pam's tissue and lymph nodes showed no signs of the disease.

"On the day I received my 'complete response' pathology report I felt the most overwhelming gratitude to God and my care team I have ever experienced in my lifetime," Pam declared.

### The next step

Pam's journey isn't over. Because the BRCA2 gene mutation carries an increased risk for ovarian cancer, she is working with a new member of her care team, obstetrician/gynecologist **Ivan Trinh, MD**, to undergo a hysterectomy.

Pam will also be on immunotherapy for several more months to boost her immune

system and help it to more effectively fight cancer cells in the future.

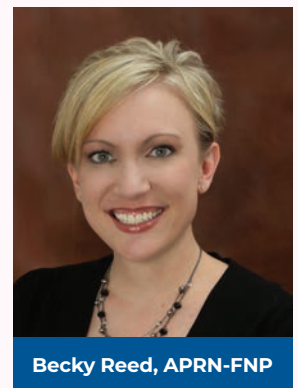
All the while Pam continues to follow the plan that has helped her to remain positive for the past year—taking one step at a time and looking back on each day to appreciate all that has been accomplished.

"Today, I am grateful for a complete response and no sign of disease. My faith brought me through mentally and spiritually, and my team brought me through physically and emotionally. Jessica was always available with great advice. Dr. Koh and his nurses explained each step with genuine care. And Dr. Bessay listened with kindness to my concerns and explained my options thoroughly while respecting my decisions."

"I have a level of gratitude I never knew existed and hope to pay it forward by boosting others through their battle," Pam concluded. "I embrace the future with a new outlook and from a new perspective, looking for each new blessing with thankfulness and gratitude." ■



Ivan Trinh, MD



Becky Reed, APRN-FNP



For more information on breast cancer care from Blessing Health System, scan this code or go to [blessinghealth.org/treatments/breast-cancer](https://blessinghealth.org/treatments/breast-cancer)



**Some people call it their conscience. It's that voice you can hear in your head occasionally when facing a tough decision. Sometimes we follow the voice's advice. Other times we do not.**

Jessie Stoops heard the voice while considering what would turn out to be one of the most important decisions of her life.

"I am usually pretty stubborn. But I was so glad I listened once in my life. It changed everything."

The voice spoke up when Jessie was considering canceling a medical test she needed called a sigmoidoscopy. It's a mini-colonoscopy, examining the lower part of the colon or large intestine, close to the rectum, for cancer and polyps, which can be precancerous growths. Jessie found out in the days before her scheduled test that her insurance would not cover the cost.

"I almost cancelled it because I was going to have to pay for the test myself," said the 43-year-old mother of four. "But I had a gut feeling that I should not do that."

Jessie was correct. The sigmoidoscopy was the first of a number of tests she underwent that would determine she had Stage 3 rectal cancer. Stage 3 indicates a tumor that has grown larger and has advanced beyond its original site, but hasn't yet spread to distant organs in the body.

"Out of the blue and unexpected," said Jessie of her diagnosis. She is healthy, active, had no family history of cancer and was not yet of the age when colorectal cancer screening is normally recommended.

"I was terrified. It is the worst thing you can think of as a mom. Who is going to take care of these kids if I can't? I never would have thought that we would have gone through something like this in a million years."

## How it began

Jessie, a Louisiana, Missouri resident, went to see her primary care doctor because she was not feeling well overall—nauseous, not eating as much as normal and had lost about 20 pounds. Jessie also happened to mention she thought she had an internal hemorrhoid she wanted treated. That led to a referral to Blessing Health fellowship-trained colon and rectal cancer surgeon **Harsha Polavarapu, MD**, and to Jessie's cancer diagnosis.

Dr. Harsha is the area's only surgeon who performs rectal cancer surgery, and he is part of the team that provides care through **Blessing**

**Health System's comprehensive rectal cancer program.**

Other members of the team include physicians from medical oncology, radiation oncology, radiology and pathology. Rectal cancer coordinators are also part of the team—registered nurses who help coordinate a patient's treatment plan moving them from timely diagnosis to staging workup,

treatment and to survivorship.

Joining Dr. Harsha on Jessie's care team were medical oncologist **Dr. Daniel Koh**, radiation oncologist **Dr. Rob Johnson** and rectal cancer coordinator, **Diana Seals, RN**. Jessie underwent five and a half weeks of combined chemotherapy and radiation therapy, followed by an additional four months of chemotherapy only.

"It was pretty unpleasant," Jessie said of the first two stages of treatment. "But I decided I was going to stay positive and get through it."

Jessie knew there was a chance she would need surgery to remove her rectum, a life-changing procedure. But at the end of the challenging chemotherapy and radiation

**The life-saving appointment that I almost canceled!**

*Doctor's appt.  
Today  
sigmoidoscopy*

therapy, Jessie received some good news. The first two stages of treatment had attained a level of effectiveness that she could choose to delay surgery and follow a schedule of intensive monitoring.

Jessie chose intensive monitoring, or the "wait and watch" approach.

"I was really worried about it at first," she admits. "Surgery would eliminate the chance of the cancer recurring because the rectum would be gone, while the wait and watch approach carried a chance of recurrence. But, being in my early forties, the change in my life with surgery would have been so dramatic."

"The doctors I had were great, and I felt confident that they would not have given me the wait and watch option if they did not feel it was an option I should consider."

Jessie has been undergoing intensive monitoring since March 2024 and is doing well. The process of regular MRIs, CT scans and sigmoidoscopies will continue for several more years.

### Jessie's advice and "new life" today

"The takeaway is you really have to listen to your body and pay attention. If something does not feel right, it probably isn't right," Jessie said.

After her treatment ended, Jessie, a nurse of 20 years, chose a new employer—she chose Blessing Hospital and a nursing position on the inpatient medical oncology unit. Jessie drives nearly a 90-mile round trip for each of her work shifts. Why?

"I just really like the hospital," she said. "And I was so grateful I thought maybe that I could give back in some way; that I could help, offer advice or just be a hand to hold."

Jessie says she models the support she provides after advice given to her by her rectal cancer coordinator Diana Seals.

"You have to take it one day at a time. It was absolutely the most valuable piece of advice," Jessie concluded.

"You cannot give your energy to things that haven't happened yet. You need to focus all of your energy, all of your everything, on right now. That helped me so much, and I have given that advice to so many other people." ■



*Jessie and her daughters*



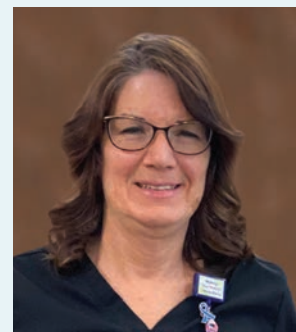
Harsha Polavarapu, MD



Daniel Koh, MD



Rob Johnson, MD



Diana Seals, RN



For more information on colorectal cancer and the treatment provided by Blessing Health System, scan this code or go to [blessinghealth.org/colon](https://blessinghealth.org/colon)



# Two Friends. One Diagnosis. Shared Strength.



**When prostate cancer is detected early, the 5-year survival rate is nearly 100%**

Source: National Cancer Institute (SEER data)

**From left to right:**  
Jim Adams, Dr. Rob Johnson, and Dave Hogge

**Jim Adams and Dave Hogge are longtime friends. They met while golfing.** Their most recent meeting, however, was different. It was in the **Blessing Cancer Center Radiation Therapy** waiting room. Both men are prostate cancer survivors and Jim, who was diagnosed and treated first, surprised Dave with a waiting room visit before his first treatment.

“Dave looked at me and said, ‘Thank you.’” Jim recalled. “I said, ‘I’m just here to remind you that it’s not a big deal.’ When Dave came out from his first treatment he said, ‘You’re right. It’s not that big of a deal.’”

## Jim’s story

“My grandfather died from prostate cancer in 1977, so it scared me,” he said. “Just hearing the word cancer and prostate in the same sentence brought back images of him when he died and it was ugly,” he said.

As fate would have it, two years ago, as a result of his annual physical, Jim learned the level of prostate-specific antigen (PSA) in his blood was above average. That could be a sign of prostate cancer, or it could indicate a

noncancerous condition such as prostate enlargement or inflammation.

Jim and his urologist tracked his condition closely. Eventually, a biopsy revealed early-stage prostate cancer.

It took Jim awhile—and a lot of prayers—to shake the fear he had of prostate cancer. But he did it. “I had to be reminded that when my grandfather died, they did not have PSA tests. When they caught prostate cancer then it was already too far gone to do anything about it,” he said.

Jim had two treatment options. The success rate for each was nearly identical:

- Remove the prostate with the possibility of having postoperative radiation therapy to help kill any cancer cells that may have survived surgery, or
- Leave the prostate intact, undergo 23 radiation therapy treatments and then brachytherapy. Brachytherapy involves implanting medical “seeds” in the prostate—about the size of grains of rice—that give off low-dose radiation for months after external radiation therapy ends to help kill any cancer cells that may have survived.



As an active person—Jim golfs four days a week—he felt brachytherapy offered a shorter recovery time and potentially fewer side effects than the surgical option. Jim chose brachytherapy.

He also chose to have his treatment at the nationally accredited Blessing Cancer Center radiation therapy department in Quincy under the care of board-certified radiation oncologist Rob Johnson, MD. Jim's two dozen radiation therapy treatments ended April 24, and the brachytherapy seeds were placed in his prostate on May 21. They will continue to treat his cancer for several months.

### Dave's story

"I changed my life insurance five years ago," he said. At the time, Dave was 57 years old. "My insurance agent called me and said, 'You need to go to the doctor. Your PSA number is off the charts.'"

As did Jim, Dave worked with his urologist to monitor his PSA. In spring of this year, after five years of monitoring, Dave's PSA level rose dramatically, and his urologist ordered a biopsy. Dave received the biopsy report through the patient portal on a Saturday.

"So, what did I do? I read it," Dave exclaimed. The biopsy showed early-stage prostate cancer. "Then I got online and started researching," he continued. "Wrong thing to do."

Dave's wife of 25 years, Martha, was not home at the time. "By the time Martha got home, I was completely freaked out that I was going to die within the next 24 hours," Dave said. Martha, a breast cancer survivor, calmed her husband down.

"Once I wrapped my brain around it, I never had a doubt about the cure," Dave said. "I was just not looking forward to the trip needed to make it happen."

As did Jim, Dave felt that brachytherapy was right for him for a number of reasons and also chose to receive his care from Dr. Johnson and the Blessing Cancer Center radiation therapy team. Dave found out the "trip" was not as bad as he thought it would be.

### Jim and Dave on their care and their advice

"Dr. Johnson was great, and the radiation therapy staff is fantastic," Dave said. "If I didn't know better, I would not know I have anything going on or had anything done to me." Dave's radiation treatments were complete and the brachytherapy seeds implanted by mid-August.

"The people here are just unbelievable," Jim said of the Blessing radiation therapy team. "They treat everybody like family. You don't get treated like that anywhere else. They are perfect for their jobs, and I feel as if they were all placed here for a reason. They really care."

Jim has advice for other men: "Don't be afraid, even though the word is cancer. You can beat this."

"When I run into guys my age, I tell them—if you have not done it yet, go get your PSA checked," Dave said. "Prostate cancer can kill you if you leave it alone. But it doesn't have to get to that point."

Early-stage prostate cancer often has no symptoms. Jim's and Dave's prostate cancers were found early; the chances of surviving the disease increase with early detection. Most experts recommend men talk with their health care professional about prostate cancer screening around age 50. A man might consider starting the discussions sooner if they are Black, have a family history of prostate cancer or have other risk factors including obesity and tobacco use. ■

**Cancer care is more than treatment — it's a journey, and at Blessing Cancer Center, you never travel it alone. Our physicians, nurse navigators and support staff are by your side every step of the way, offering leading-edge treatments backed by genuine care and encouragement.**



For more information on prostate cancer, including symptoms to watch for, scan this code or go to [blessinghealth.org/prostate](https://blessinghealth.org/prostate)

# Family's faith, a doctor's skill, a nurse's heart *and* a life saved

**Robert Wilson's family thought he would be admitted to Blessing Hospital for observation after experiencing severe headaches.**

Instead, the 59-year-old brick mason from Pittsfield, Illinois, would face the fight of his life.

Problems within the arteries in the back of his neck were causing Robert to suffer a "shower of strokes" and his brain to swell. Blood thinners, the first line of treatment to stop the strokes, were not working. His condition was deteriorating quickly.

Surgery was the next medical response to create room within Robert's skull for his swelling brain, but it would be complicated because of the blood thinners. **Dr. Gayatri Sonti**, fellowship-trained and board-certified Blessing Health neurosurgeon, was on call as Robert's condition deteriorated. She explained to the family the delicate and risky surgery.

"At that point, because there was so much swelling in his brain, that could result in death as well," said Robert's son, Tim Jenkins, about the risk of uncontrollable bleeding during surgery.

Dr. Sonti then made an offer that shocked Tim.

"What I appreciated about her from the moment that I met her is that she was very humble and honest," he stated. "She said, 'If I were in your situation, I might want a second opinion. If that is what you want, I respect that and will do everything I can to help arrange it.' She also told us, 'I've been doing this for 21 years. I am confident that I can save Robert's life.'"

The family had confidence in Dr. Sonti and her skills and approved the surgery.

## Waiting is the hardest part

In the hours after the procedure, Robert showed no signs of improvement. Dr. Sonti prepared the family for the worst-case scenario if his condition did not improve soon—long-term brain damage as a result of the strokes and brain swelling.

"When she broke the news, we were devastated, and my mom kind of melted to the floor," Tim recalled. "As she went to the floor, Dr. Sonti went with her and just sat there and held my mom for what seemed like an eternity. I could see the tears in Dr. Sonti's eyes and knew that she felt the pain that we felt."

"I have had a lot of surgeries in my life, and I've met a lot of doctors and surgeons here and abroad," he continued.

Tim lived and worked

overseas for 15 years, including

with the United Nations. "Never in my life or career have I met a surgeon with such compassion and empathy."

## Robert has his say

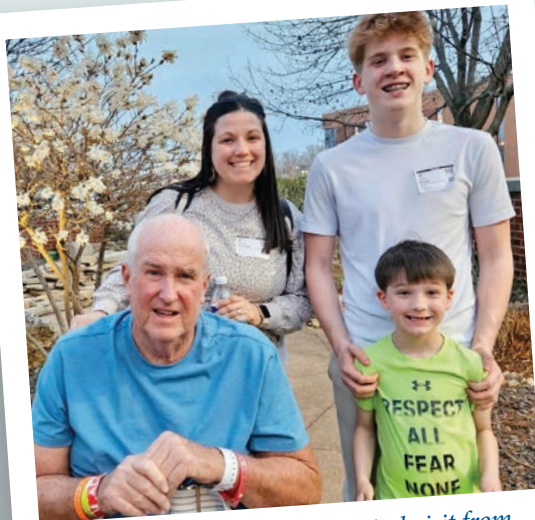
Things began to change two days after surgery.

"Miraculously, Robert started showing signs of improvement," Dr. Sonti said joyfully with a smile on her face.

By day four Robert started opening his eyes, following commands and moving all extremities.

"He started squeezing our hands with 'yes and no' signals and wiggling his feet," Tim added.

Robert was hospitalized a total of four weeks, two of those in the Intensive Care Unit.



*Robert Wilson during a hospital visit from his daughter Rachel Cawthon and grandsons Owen Markert and Carson Cawthon*



“The day he was discharged, we all cried happily,” the doctor said. “We were grateful for this true miracle that happened.”

## It takes teamwork

Dr. Sonti gives much credit to the intensive care unit and rehabilitation services doctors and staff involved in Robert’s care during his hospitalization and beginning of his recovery.

One of those caregivers was **Michelle Summy, RN**. She has 37 years of experience as an intensive care unit nurse and cared for Robert—and his family.

“Between Dr. Sonti and Michelle, and many other Blessing staff members—but these two in particular—I felt secure,” Tim said. “Those two were just solid rocks of support, which I did not even know was in their job description, to be that empathetic and supportive.”

“I just got so attached to them all very quickly,” Michelle said of Robert and his family. “I love what I do, and caring for patients and families like this is why. Robert is our miracle guy.”

“Dr. Sonti was amazing with me and with the family,” Michelle concluded. “It was like we were all one person.”

“She is an outstanding nurse,” Dr. Sonti said of Michelle. “Care is more than knowledge and critical thinking. The most important skills I value are compassion and true empathy. These are skills someone in the medical profession must have that cannot be taught. She is the ultimate in both.”



Gayatri Sonti, DO, PhD



Michelle Summy, RN

“My dad amazed us all,” Tim said. “It has been one victory after another, a credit to his fortitude and human spirit, and to being surrounded by really competent and inspiring women like Dr. Sonti and Michelle. I’ve never met anyone like them. My dad is here today because of them and many other wonderful staff at Blessing Hospital.”

“The decision our family made to stick with Dr. Sonti will go down as the best decision we ever made.”

## Support beyond the walls of Blessing

Tim and the rest of the Wilson family found support from outside the hospital, too, including from the volunteers of the **Teresa Adams House**. The House is where people can stay at a discounted rate when a loved one or friend is receiving care in Quincy.

“The Teresa Adams House—what a godsend,” Tim exclaimed. “What would we have done without it? It’s affordable. It’s right here. It’s a comfortable and quality space. And having someone smile at you when you walk in and offer to help you in any way they can, I really can’t emphasize how great it was.”

Tim adds the outpouring of support of family and friends has been incredible, particularly in their native Pike County, Illinois.

“I have been away for so long that I forgot how much our community rallies around those who need it,” he concluded.

Robert’s recovery continues and will be a long-term commitment. ■

**For more information on the Teresa Adams House, scan this code or go to [blessinghealth.org/locations/teresa-adams-house](https://blessinghealth.org/locations/teresa-adams-house)**



For more information on Blessing’s neurosurgical care, scan this code or go to [blessinghealth.org/neurosurgery](https://blessinghealth.org/neurosurgery)

# Pain-free and back where he belongs—*the great outdoors*

**For Tom Dolan, heaven is “any place there is water and trails.”**

The 50-year-old Ewing, Missouri resident and outdoor enthusiast has hiked the Rocky, Appalachian and Ozark Mountains and kayaked the Great Lakes, and the Mississippi, Missouri, and countless smaller rivers.

“It’s the only reason I want to live,” he added.

Recently, Tom faced the possibility of losing his slice of heaven.

“My neck got sore to the point where I was nonfunctional. The only thing I could do comfortably was sit in a recliner with a heating pad on my back,” he said. “I had zero quality of life. I was alive, but not able to live at all.”

Tom’s pain came from a tear in a spinal disc in his neck—the cervical portion of the spine. The tear allowed the inner part of the disc to push through the outer layer causing pressure on the spinal cord and nerve irritation. Cervical disc herniation, as the condition is known, is a common cause of neck pain in adults. The causes of the condition may include age, genetics, injury or every day wear and tear. The effects of the condition can range from mild to severe and even life-threatening.

Tom sought help from board-certified Blessing Health neurosurgeon **Ryan Brennan, MD, FAANS, FCNS**. Dr. Brennan completed a spine surgery fellowship at Cleveland Clinic in addition to a residency in neurological surgery.

Some level of risk accompanies all surgical procedures, but as a professional auctioneer, the surgery Tom needed to repair his cervical spine disc carried risks that could threaten how he made his living.

“The surgery has the risk of loss of voice, loss of swallowing and paralysis or weakness of the extremities,” Dr. Brennan explained. “This gentleman makes a living using his voice, adding another level of consideration to these risks.”



During a procedure known as anterior cervical discectomy and fusion, an incision would be made in Tom’s neck as he laid on his back. Dr. Brennan would move Tom’s carotid artery and jugular vein to one side and trachea and esophagus to the other side to provide clear access to the front of the spine. Dr. Brennan would then remove the disc fragments that have pushed back against Tom’s spinal cord, causing his pain and nerve weakness,

and reconstruct the affected area of the spine by inserting a spacer in the vacant disc space.

Eager to regain his quality of life, Tom chose to undergo surgery in March 2025.

With Dr Brennan’s skilled hands, surgery was a success. Tom’s pain was completely gone, his strength fully recovered, and his voice and swallowing were intact. Tom awoke from surgery with immediate relief knowing he had regained the freedom to enjoy the things in life that he valued so much.

“I felt better after surgery than I felt since I was in my early 30s. I have a new lease on life,” Tom said.

“Dr. Brennan has the best bedside manner by far of any doctor I have ever experienced. The Sunday after surgery, he called me at home to see how I was doing. That is something doctors don’t do generally. His patient care was top notch – fantastic,” he concluded.

Tom was back on the road this past summer. In addition to lots of local camping trips, he planned to visit Colorado, New England, and the Pacific Northwest. ■



**Ryan Brennan, MD,  
FAANS, FCNS**



# DAISY Awards

## Recognizing extraordinary care

Since the last issue of *Personal Blessing*, the following Blessing Health registered nurses joined the ranks of international DAISY award winners for delivery of extraordinary care, based on the nominations submitted by patients and their loved ones.



### Maria Hillebrenner

Nominated by a surgical patient

*"Not only did she provide me with outstanding care the day of my procedure, she even sent me an email to check in and made sure I was doing well when I returned to work. Maria is a shining example of what every patient hopes for in a postoperative nurse."*



### Tina Womack

Nominated by two patients for her care after they gave birth

*"You can truly feel Tina is passionate about this role she plays. Thank you so much for everything you did for our family. I have a baby boy in my arms today, and you played a huge role in that. We will never forget your care and your kindness."*



### Lexy Christ

Surgical nurse, Illini Community Hospital, Nominated twice for the care she provided to special needs patients

*"Lexy not only ensured that the patient's medical needs were met but also made them feel heard, respected and safe in a situation that could have been overwhelming. Lexy exemplifies the very best of nursing."*



### Rachel Jones

Rachel was nominated by a student nurse with whom she worked on a shift in the Emergency Center

*"Rachel went above and beyond to provide me with clinical skills experience throughout our day. Despite the challenges thrown her way, she maintained a calm and kind presence, encouraging me to try new skills."*



### Michelle Summy

Intensive Care Unit nurse for 37 years received two nominations

*"My dad was unresponsive, and my mom was devastated at the thought of losing her husband of 66.5 years. Michelle's compassion and care went far beyond what was expected of her. She didn't just care for us professionally—she took the time to learn about their story, listening deeply to my mom as she shared their life together."*

*"Michelle's kindness wasn't just in her actions but in her words, hugs and how she wrapped her arms around us and held our hands. She was a true source of comfort during a heartbreaking time."*



### Kelli Ryals and Kayla Hudson

Sisters who cared for a 2-year-old with a possible infectious disease

*"Kelli was our night nurse, and Kayla was our day nurse. We spent 48 hours in their care. Together both sisters went truly above and beyond to help us in the scariest time of our lives."*



### Tea Cameron

A 28-year member of the Blessing nursing staff, nominated by a new nurse after Tea assisted her with a patient who had complex needs

*"I am able to consistently give my patients 100% because of nurses like Tea Cameron. Her skills and expertise are unmatched. I can't explain the impact her support had on me as a new graduate RN."*

# The Youngs greatest journey yet: *A healthier life together*

**In January 2016, Steve and Nexia Young started their life together as husband and wife.**

Eight years later the Hannibal couple restarted their life together when they both underwent surgery at the **Blessing Bariatric Institute**. Their goal: improving their health by losing more than 200 pounds as a team.

"It was wonderful," said Nexia, the mother of eight, of going through her weight loss journey with her husband by her side. "The teamwork helps."

"This is what pushed me into doing something about my health" said Steve about going through his weight loss journey with his wife. "I had someone who wanted to change their life as well and go through this process with me."

## **How the journey began**

The Youngs share more than love. They each faced weight issues from an early age.

"I come from a big-framed family," 42-year-old Steve said. "I was heavysset from 10 or 11 years old."

At 6 foot 4 inches tall, his highest weight was 399 pounds, which contributed to high blood pressure; arthritis in his spine, knees and hands and a diagnosis of pre-diabetes. Even with those challenges, Steve was a stand-out athlete in high school who served 10 years in the United States Army.

At 5 foot 2 inches tall, Nexia's highest weight was 300 pounds, contributing to high blood pressure.

"I've never been one to focus on my weight," she said. "I did not let it bring me down or stop me from doing anything."

Nexia saw some weight loss success over the years with prescription medication. But the weight came back. For Steve, military life helped him lose weight. But when his service ended, the weight came back. He said by 2023 his body began deteriorating rapidly.

"I had more doctor appointments that year than I had all the years combined that I have been on this planet."

Fortunately for Steve, at that time Nexia's primary care provider suggested she schedule a consultation at the Blessing Bariatric Institute. Nexia admits she was skeptical at the time.

"I decided to go ahead and reach out, just to get information at first."

*Steve and Nexia Young before and after surgery*





Steve attended the consultation with Nexia, and her skepticism melted away.

"I was just there in support of my wife," Steve said. But when he heard what the Blessing Bariatric Institute team said about the outcomes of successful surgery, Steve's role changed.

"I wanted in on this," he said. "I told Nexia, 'Let's do this together.'"

On January 10, 2024, Steve had surgery with **Fernando Bonanni, Jr., M.D., MBA, FACS, FASMBS**, board-certified bariatric surgeon. On January 22, Nexia had her procedure with board-certified surgeon **Melissa Matrisch, MD**. They each had the vertical sleeve gastrectomy procedure.

### About the procedure and the results

The sleeve procedure reduces the size of the stomach. Normally a stomach is the size of a football and can hold 33 ounces of food. After gastric sleeve surgery, the stomach is the size of a banana and can hold no more than 5 ounces of food. With changes in diet, and behavior modification including physical activity, a person can experience a loss of 55% to 65% of excess body weight. The procedure can also resolve diabetes at a rate of 70% if the patient has had diabetes less than 5 years.

As a result of the surgery and changes in his diet and lifestyle, Steve has lost more than 180 pounds.

"My mindset, levels of energy and motivation, outlook on life and my health are different. I am overwhelmed with joy from the outcome," he said. "I never thought I would be the size that I am. To go to the store today and buy pants with a 34 waist – I don't remember when I was ever that small and I never imagined myself being the size I am."

While he still lives with arthritis, Steve's blood pressure is regulated without medication, and his prediabetes has been eliminated through surgery and lifestyle changes.



**Fernando Bonanni, Jr.,  
MD, MBA, FACS, FASMBS**



**Melissa Matrisch, MD**

"I didn't smile before. I smile every day now. I am really proud of what I have done, of what I have accomplished."

As of October 2025, Nexia has lost 62 pounds.

"I have a lot more energy, and surgery has improved my digestion."

### Advice from the Youngs

Bariatric surgery is not a fix for obesity. It is a tool to address it that requires patients to take a lifelong active role through lifestyle changes.

"You have to put the work in to get the results you want," Nexia said.

"Don't give up. Knowing where I came from, and the medical issues that I have had over three-quarters of my life, if I can do it, anybody can do it," Steve added.

"You have to be mentally prepared to take this ride," he continued. "If you are not mentally prepared, it's easier to fail and it's easier to have setbacks. I didn't get into this process to fail."

"You are either going to choose to stick to your guns and do the right thing, or you are going to make the choice to go back to your old ways," Steve concluded. "If I know anything about life, there is only one direction to go. You've got to keep moving forward." ■



In addition to weight loss surgery, the Blessing Bariatric Institute offers medically managed weight loss care and a heartburn and reflux center.

For more information on these services, scan this code or go to [blessinghealth.org/treatments/bariatric-surgery](https://blessinghealth.org/treatments/bariatric-surgery)

# A fragile first breath

## How Blessing's neonatal team kept one family together

**After what she calls a “challenging” pregnancy, Katie Elmore and her husband, Jordan, were looking forward to the birth of their first baby.**

“We had a low level of concern regarding the delivery process and the baby’s health outcomes,” Katie said. “I envisioned what every mother does—a day in the hospital, the golden hours with our baby, then heading right home to settle in to our new life.”

Katie, Jordan and their son Miles, would face a few more challenges before living Katie’s dream. A few weeks before her due date, Katie spontaneously went into labor and Miles was born, a bit unexpectedly, at **Blessed Beginnings**, Blessing Hospital’s maternity care unit.

“The labor and delivery itself were as good as I could have hoped for,” she stated. “Incredible nurses, doctors and support staff. I felt cared for and everything felt normal and went as planned. It was when I actually delivered Miles that I felt like our family was placed on a rollercoaster.”

Within minutes of the birth, the team identified that Miles was having trouble breathing. He was taken to **Blessed Beginnings’ Level II Nursery** where he became the patient of Blessing Health System’s neonatal nurse practitioner **Lacy Nichols, APRN-NNP**.

### Keeping families together from the start

In years past, newborns with complications, like Miles, would more than likely have to be transferred to a hospital in Springfield, Illinois, or St. Louis, Missouri, to meet their health care needs. That changed a year and a half ago when Lacy, with 16 years of experience, became the health system’s first nationally board-certified neonatal

nurse practitioner. Her expertise allows most premature babies and other newborns with complications born at Blessing to stay at Blessing to receive the care they need.

“Miles was born with significant breathing difficulties, despite being born at 38 weeks’ gestation,” Lacy said. “He was diagnosed with respiratory distress syndrome (RDS), which typically affects

premature babies, but it can be seen in term babies like Miles as well.”

Miles required CPAP to assist with his breathing. CPAP provides a continuous positive airway pressure that keeps the air sacs in the lungs open between breaths, which is crucial for infants who may not have enough of the natural substance called surfactant within their lungs to keep the air sacs open. Miles’ did not respond to CPAP treatment.

“These were the most vulnerable and terrifying moments of my entire life,”

Katie said. “Instead of the joy and fond moments meeting our baby that we expected, we faced separation, confusion and fear. Lacy and the team carefully and empathetically walked me through every part of Miles’ condition.”

Lacy discussed Miles’ situation with a neonatologist at the region’s perinatal center, St. John’s Neonatal Intensive Care Unit in Springfield. It was decided that Miles would benefit from a procedure called surfactant replacement therapy. It would require he be intubated—meaning a tube would need to be inserted into his windpipe.

“I walked Katie and Jordan through the process



*Miles Elmore*

of placing a breathing tube in order to administer the surfactant replacement therapy, that Miles desperately needed, directly into his little lungs,” Lacy said. “I was confident in my ability to perform this procedure. I had done it many times. I also gave them the option for him to be transferred to St. John’s for this procedure. Ultimately, Katie and Jordan decided to have it done here.”

“Having to make quick decisions about a few-hours-old fragile baby is hard,” Katie stated. “Lacy was my strength during this time, when I was depleted emotionally and physically. Lacy even shared her own testimony of being a mother of newborns who required Level II nursery care, all while working around the clock to improve Miles’ condition and avoid the need to transfer him to a hospital in another city.”

“A big part of my job as a neonatal nurse practitioner is educating parents in a way that they can fully understand what is happening with their baby, so they feel empowered to ask questions and be involved,” Lacy explained. “It’s a way to earn their trust during an extremely stressful time. It’s also important to meet them where they are emotionally. I think sharing my own personal experience as a mom who had three sick newborns allows parents to relate to me on a different level. I’ve been in their shoes and understand their fears.”

## Miles takes a deep breath

Fortunately, the fear Katie felt quickly subsided. Little Miles responded to his therapy. He began breathing normally with no respiratory support and went home with his parents 3 days after he was born.

“During the whole

time, from what I understood, depending on how he progressed, there was always the reality that Miles could have been transferred to a higher level neonatal intensive care unit out of town,” Katie said. “That would have meant separation, trauma and hardship for our family.”

“Lacy and the Blessed Beginnings team didn’t miss a beat. From Miles’ first breath they noticed his needs, noticed my needs and kept our family in the same hospital. I was able to stay close to him, visit him, breastfeed him and hold him.”

“Caring for vulnerable newborns is a tremendous responsibility, requiring patience, compassion, and unwavering dedication. I could not do the work that I’m doing without the incredible team of neonatal nurses with whom I work alongside every day,” Lacy concluded. “They are the true backbone of our Level II Nursery. There is no greater reward than knowing the care we are providing in our nursery is making a lasting impact from the very first breath of someone’s life.”

## Katie pays it forward

A licensed social worker and therapist with a passion for maternity behavioral care, Katie applied for a job at Blessing during her maternity leave and was hired. “Our family’s birth experience allows me, as a mental health professional, to empathize, understand and share insight with parents on a deeper level, strengthening the therapeutic relationship I build as I help patients navigate healing and growth,” Katie concluded. ■



*Left to right: Katie and Miles Elmore, and Lacy Nichols, APRN-NNP*



For more information on Blessing’s maternity care, scan this code or go to [blessinghealth.org/BlessedBeginnings](https://blessinghealth.org/BlessedBeginnings)



# WELCOME NEW PROVIDERS



## **Adesina Adedeji, MD**

### **Family Medicine, Quincy**

Dr. Sina (pronounced “Shee-naw”)—as his patients call him—says his interest in family medicine took root after graduating from medical school and returning to his hometown to practice. *“I noticed that so many people didn’t know even basic things about their health care. Family medicine is about teaching and engagement. You get people to actively participate in their care, to own their care. The doctor does not come in and call the shots. The patient guides you. It’s a partnership, a team sport.”*



## **Joseph Amavisca, MD**

### **Family Medicine, Blessing Health Hannibal**

Dr. Amavisca discovered the importance of being of service to others through his diverse experiences in the health care field. His initial exposure in health care occurred while training as a United States Army combat medic followed by working in a Level 1 trauma center in Tucson, Arizona. Shortly after, a mentor and physician encouraged him to apply to medical school to further expand his interests and goals.

Certified by the American Board of Family Medicine, American Medical Association and American Academy of Family Practice, Dr. Amavisca’s passion for medicine extends beyond excelling at the technical skills.

*“I have a sensitivity for people and true appreciation for each patient’s unique story. It is such an incredible opportunity to help others.”*



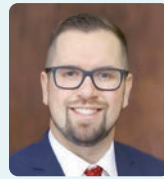
## **Nikhil Banerjee, MD**

### **Gastroenterologist, Quincy**

Dr. Banerjee is a board-certified gastroenterologist. As a result of completing an advanced fellowship, he provides advanced endoscopic services such as endoscopic retrograde cholangiopancreatography, endoscopic ultrasound to manage diseases of the biliary tract and pancreas, and endoscopic eradication of precancerous conditions of the esophagus.

Dr. Banerjee has developed a hemorrhoidal banding practice for symptomatic internal hemorrhoids that have failed conservative therapy, and has a passion for colon cancer screening/surveillance.

*“In medicine, we work one-on-one with the patient to develop solutions to problems and optimize their quality of life. The key element is humanism in medicine.”*



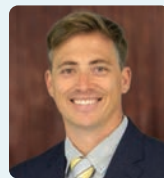
## **Michael Bohnert, MD**

### **Dermatology, Quincy**

Dr. Bohnert is a board-certified dermatologist, originally from Festus, Missouri. He completed both medical school and dermatology residency at the University of Missouri–Columbia, graduating Magna Cum Laude.

Dr. Bohnert provides comprehensive general dermatology care for adults and children and performs procedural dermatology including skin cancer excisions, cyst removals, and treatment of benign and malignant skin growths.

*“Dermatology is a fascinating specialty that blends hands-on procedures with complex diagnostic thinking,” he said. “Many people think of dermatology as acne, warts, or cosmetic treatments—but it’s so much more than that. The skin can be a window into a person’s overall health. For example, certain rashes may indicate uncontrolled diabetes or elevated cholesterol levels, and in some cases, skin findings can be early signs of internal conditions like pancreatic cancer.”*



## **Joshua Byrd, MD**

### **Walk-In Clinic at Blessing Hospital**

Health, wellness, and service to others define Dr. Byrd. As an avid runner, he has trained for and completed over 20 marathons.

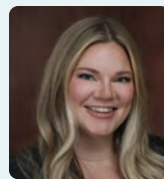


## **Carrie Bennett, FNP**

### **Orthopedics and Sports Medicine, Quincy**

Carrie grew up on a cattle farm in Pike County, Illinois. Her interest in orthopedics and sports medicine began with a personal experience.

*“I injured my knee playing softball my senior year. That ended my athletic career. I don’t want that to happen to other people. Providing care as part of the Blessing Orthopedics and Sports Medicine team allows me to help athletes, and all patients, return to their normal function and be active again, whether it be a sport or normal daily activities of living.”*



## **Destiny Craven, PMHNP**

### **Behavioral health nurse practitioner at the Blessing Mt. Sterling, Illinois clinic and the Illini Rural Health Clinic in Pittsfield, Illinois**

Providing mental health care is a dream come true for Destiny, a Pike County native.

*“Specialty services, like mental health, are not always offered in small communities. I am glad to be an in-person provider in a specialty area I feel is important for the community as a whole. Every person faces hardships sometimes, maybe the most difficult thing they have experienced. Navigating these obstacles is key to a healthier future.”*



**Julie Eftink, LCSW**  
**Telemedicine Therapist,**  
**Blessing Behavioral Services**

A 23-year member of the Blessing staff, Julie has joined the Outpatient Behavioral Services team to offer strengths-based therapy through telemedicine.

*"We focus on the present by identifying the patient's skills—and the future by building on those skills to improve their lives," Julie said. "I typically work with patients for up to 12 sessions," she continued. "I think that is appealing to some patients—to not have a huge time commitment, to be able to make progress within 3 or 4 sessions."*



**Rachel Hancock, APRN-FNP**  
**Illini Rural Health Clinic, Pittsfield, Illinois**

A White Hall, Illinois native and Pittsfield resident, Rachel's love for nursing has family ties.

*"I wanted to be a nurse for as long as I can remember. My little sister was diagnosed with Type 1 diabetes when she was 7 years old. I saw her struggles and wanted to help her."*

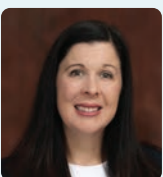
Today, when Rachel meets a patient for the first time, in addition to completely assessing their medical concerns, she also makes a personal connection. *"Social health is intertwined with physical health."*



**Leah Heming, CNP, AGNP**  
**Blessing Bariatric Institute, Quincy**

A nurse with 24 years' experience, Leah brings a personal element to her practice at the Bariatric Institute. She was among the first patients to undergo bariatric surgery at Blessing.

*"I have a deep understanding of and passion for obesity medicine. It is exciting to be able to connect with patients, when I have been a patient myself—and continue to be because obesity isn't something that goes away. You control it, or it controls you, as with any other chronic disease."*



**Lindsay Hoebing, APRN, FNP-C**  
**Family Medicine, Quincy**

A Mendon, Illinois native, Lindsay's nursing career path may not have been typical, but it was effective.

*"I was initially interested in medicine after watching my grandmother's struggle with multiple myeloma. However, life had other plans."*

Lindsay served in the Navy Reserves and became an electrician.

*"Then, my mother was diagnosed with breast cancer. That started my journey back to medicine. Going to all the appointments with her reignited my interest."*

Lindsay says her time as an electrician was an exceptional experience for patient care.

*"Working as an electrician honed my critical thinking and troubleshooting skills. These are extremely important when working as a provider to help with finding the correct diagnosis and evaluating treatment plans with a patient."*



**Erin Little, APRN, FNP-C**  
**Pain Management, Quincy**

Pike County, Illinois native Erin Little's journey to pain management nurse practitioner began with an incident that occurred before she was born.

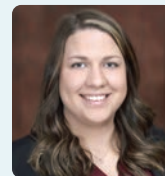
*"My dad was in a rollover tractor accident at the age of 17. As a child, I watched him spend a lifetime dealing with his pain. The appeal of pain management to me is to keep that from happening to other people. People don't have to resign themselves to suffering with pain for the rest of their lives. There are so many things we can do for pain, which do not require medications, to improve a person's quality of life so they can do the things they want to do."*



**Carrie Parker, MSN, AGACNP-BC**  
**Pre-Anesthesia Clinic, Blessing Hospital**

Born in Keokuk, Iowa and raised in Ursa, Illinois, and a member of the Blessing team since 2011, Carrie has a passion for improving the experience and lives of surgical patients.

*"Surgery is such a vulnerable time for people. I love being there to care for them, provide comfort and give them education on optimizing their recovery process."*



**Christina Wendt, APRN, PMHNP-BC**  
**Behavioral health provider, Blessing Health Monroe City**

As a nursing student and beginning nurse, Christina noticed that many hospitalized patients she worked with had mental health concerns in addition to their physical ailment.

*"I got the feeling there was an unmet need. Being from a rural area, I felt more behavioral care was needed for those communities. I want to be able to empower patients with the knowledge they need to navigate mental health services and get connected with the care they need."*



To learn more about these and all Blessing Health System providers, including how to get an appointment with them, scan this code or go to **[blessinghealth.org/doctors](https://blessinghealth.org/doctors)**

Programs, services and new technology featured in this issue of *Personal Blessing* are made possible in part by donations to Blessing Hospital and the Blessing Foundation. The Giving Society is an honor roll of those showing love through charitable giving of \$100 and above. Gifts below were received for the following services: Behavioral Health Services, Blessed Beginnings, Blessing Foundation Unrestricted, Blessing Hospice, Blessing Lauretta M. Eno Early Learning Center, Blessing Nurses Alumni Association Scholarship, Blessing-Rieman College of Nursing & Health Sciences General Endowment, Blessing-Rieman College of Nursing & Health Sciences Unrestricted, Breast Services, Cancer Center & Radiation Services, Diabetes Patient Care, Employee Crisis/Caring Club, Health Sciences Programs Crisis and Scholarship, Heart & Vascular Center, Heart Symposium Staff Education, Home Care, Respiratory Services, Teresa Adams House.

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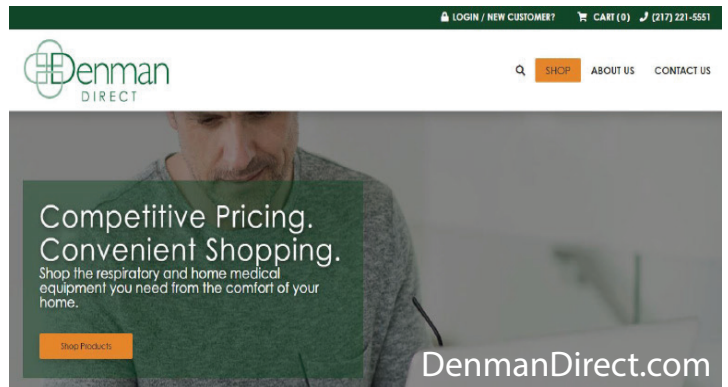
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