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OLIVIA PREWETT:

*Breast Cancer
Survivor*

BREAST TESTS
Defined

8 Tips for Your
First Mammogram

*Stay Alert - Warning
Signs of Breast Cancer*



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STAY ALERT

Do you know the warning signs of breast cancer

Ask a woman to name a sign or symptom of breast cancer, and chances are she'd say a lump in the breast.

She'd be right, of course. A new lump or mass is the most common symptom of breast cancer. But it's not the only one.

"Breast cancer can cause various changes, including changes in breast appearance," said Shahid Waheed, M.D., FACP, an oncologist and hematologist at Lake Regional Cancer Center. "Women need to know all of the signs so they know when to seek medical attention."



Shahid Waheed, M.D., FACP

If you notice any of the following signs or symptoms in a breast, see a doctor right away.

- A lump in the breast or armpit. Cancerous breast lumps tend to be hard, painless and irregular (rather than rounded) around the edges.
- Thickening or swelling of all or part of a breast — or sometimes in the armpit or collarbone area — even if you can't feel a lump.
- Irritated or dimpled breast skin.
- Redness or flaky skin in the nipple area of the breast.
- A nipple that points inward.
- An indented spot on the breast.
- Breast or nipple pain.
- Nipple discharge, which may be bloody or clear.
- Any change in the size or the shape of the breast.

Any of these signs and symptoms, including lumps, can be caused by things other than cancer. But only your health care provider can tell for sure.

What Happens Next?

If you have a lump or breast change, your doctor will examine your breasts. He or she may also order tests to take a closer look. These may include a mammogram, breast MRI or breast ultrasound. You also may need a biopsy, which checks a sample of breast tissue for cancer.

It's important to remember that breast changes are very common, and most are not cancer.

"If you notice something, seek help," Dr. Waheed said. "If it's nothing, you no longer have to worry about it. And if it needs attention, you've taken the first step."

Sources: American Cancer Society; National Cancer Institute

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At Lake Regional Health System, the care team is devoted to helping people with cancer.

“In our Cancer Center, we offer state-of-the-art therapies that find and treat cancer,” said TJ Sweet, Cancer Service Line director at Lake Regional. “And our team is made up of compassionate providers who will treat you — and the people you love — like family.”

Meet Our Cancer Treatment Team

When you come to the Cancer Center for treatment, you’ll work with a team of professionals, including:

- Providers specializing in medical and radiation oncology
- Nurses certified in oncology and palliative care
- Surgeons
- Pathologists
- Radiologists
- Experts in pulmonology, urology, gastroenterology, ENT, gynecology and more
- Registered dietitians
- Social workers



“Our team works together to provide the medical expertise you need while keeping you close to home,” Sweet said.

Physician Consultation

Lake Regional Cancer Center recognizes that the process of cancer diagnosis and staging can be frightening and confusing for patients and their loved ones.

“To minimize stress and anxiety, we have a team dedicated to providing prompt physician consultations to ensure swift, accurate diagnoses,” Sweet said.

Surgical Services

Surgery is often part of the care plan, and most Lake Regional Cancer Center patients can have their surgeries done at Lake Regional — whether the surgery is for cancer diagnosis, staging or treatment.

Diagnostic Imaging

Lake Regional Imaging Center offers expert care paired with the latest technology to diagnose cancer at its earliest stages. Services include:

- 3-D mammography
- Breast MRI
- Ultrasound-guided biopsy
- Computerized tomography (CT) scans
- Magnetic resonance imaging (MRI)

Tests are read on-site by board-certified radiologists. These experts are part of the Lake Regional multidisciplinary care team that guides testing and evaluation to create a comprehensive treatment plan.

Chemotherapy

Lake Regional Cancer Center offers a range of infusion and chemotherapy services. The center's chemotherapy area includes 10 private treatment areas, each equipped with a television and wireless internet. We understand the importance of patients having open communication and a strong rapport with their health care team. The chemotherapy nurses provide personal one-on-one care to every patient.

Radiation Therapy

Lake Regional Cancer Center provides radiation therapy treatment, including intensity modulated radiation therapy (IMRT). Lake Regional has one of the most advanced oncology systems available, featuring a state-of-the-art linear accelerator, equipped with the latest in software options. Highly trained radiation therapists, physicians, physicists, dosimetrists, nurses and supportive staff work together to provide a positive treatment experience for patients and their families.

Social Workers

Lake Regional's social workers ensure each patient and family receives needed assistance to cope with the effects of cancer. This includes assistance with financial needs, as well as resources to help patients manage stress and adjust to life with cancer.

The center also offers wigs, travel assistance and support programs.

Nurse Navigators

Lake Regional nurse navigators serve as the go-to person for patients and make sure they stay on the right path from diagnosis to treatment to survivorship. They help patients always feel connected to the team and track appointments to make sure patients get the right tests and care at the right time.

"At Lake Regional, we're with you in every way during each step in the battle against cancer," Sweet said.

Support Groups

Lake Regional Cancer Center invites all cancer patients to monthly support groups, one for men and one for women. Participants learn about symptoms to expect during treatment; tips and tricks for managing those symptoms; and how to maintain a positive mindset during and after treatment.

Palliative Care

Palliative care services are available for patients with serious, progressive or life-altering illnesses. The palliative care staff support patients and their families as they cope with the physical, emotional, social and spiritual effects related to their illness.

"The palliative care nurses communicate with health care providers to ensure that every treatment plan is tailored to enhance quality of life and meet each patient's goals and wishes — helping every patient live life to its fullest," Sweet said.

Nutrition Services

Proper nutrition plays an important role in the care and healing of individuals diagnosed with cancer. To help patients meet nutritional goals, expert dietitians partner with the Lake Regional Cancer Center health care team to support patients throughout their cancer treatment and recovery.

Lymphedema Therapy

Radiation therapy or the removal of lymph nodes during cancer treatment can damage the body's lymphatic system, leading to a type of swelling called lymphedema. With early intervention and proper treatment from Lake Regional certified lymphatic therapists, lymphedema's effects can be diminished, enabling patients to lead full lives.

National Accreditation

Lake Regional Cancer Center has earned national accreditation from the American College of Surgeons Commission on Cancer. The program meets or exceeds all of the Commission on Cancer's standards for performance.

Learn more about Lake Regional Cancer Center and cancer treatments at lakeregional.com/CancerCare.



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BREAST TESTS *Defined*

Most women are familiar with mammography, but what about other tests used to diagnose and stage breast cancer? Do you know what they do, what to expect and why they're used?

"Each test has its own benefits and limitations," said Michael Vierra, M.D., a Lake Regional radiologist. "That's why we often use them in some combination to help us put together a larger picture of what's going on inside the breast."

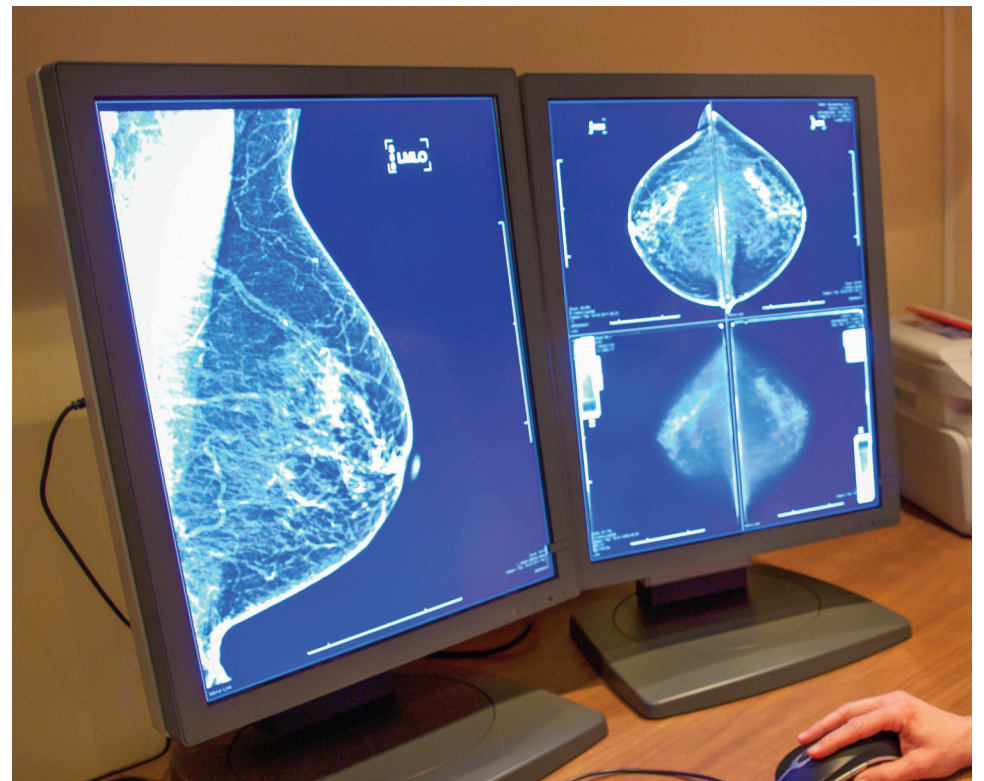
Following is what you need to know about four common breast tests.

Mammogram. This X-ray test is what most women get when they go in for a breast cancer screening. Each breast is placed between two X-ray plates, and images are taken from two views — from the top and side. Doctors use the images to look for changes in breast tissue, which is why it's important for women to go yearly. If a change is detected, you may be asked to come back for a diagnostic mammogram. The process is the same, but more images are taken so doctors can get a closer look at any abnormalities.

Ultrasound. This test uses sound waves to create a picture of breast tissue, just like an ultrasound used to examine a baby in utero. A technician rolls an ultrasound wand over the area being studied to produce an image. Ultrasound is often used to diagnose breast changes that can be felt but not seen on mammography. It also can help doctors distinguish between fluid-filled cysts and solid masses.

MRI. This test uses very strong magnets to create detailed, cross-sectional images of the breasts. It is very good for identifying small nodules that may not appear on mammography. Breast MRI is recommended for women with dense breast tissue because it allows doctors a better view. But because it's so precise, breast MRI also picks up changes that many times are not cancer (false positives). That's why it's not more widely used in routine screening. The test requires patients to lie still on a table as the MRI machine takes multiple images. When used to diagnose breast cancer, a contrast dye is introduced intravenously before the scan to illuminate potentially cancerous areas on the images.

Biopsy. When cancer is suspected from the results of an imaging test, a sample is collected for testing through a procedure called a biopsy. Removing and testing a



sample of cells is the only way to confidently diagnose breast cancer because many nodules turn out to be benign, or harmless. There are several types of biopsies, and which one your doctor uses depends on how likely the mass is to be cancerous, how large the tumor is and where it is in the breast. Many biopsies can be performed with only a needle. Others require either minimally invasive or open surgeries.

More Tools for Your Health

Breast cancer screening is just one test that women need. Visit lakeregional.com/WomenScreenings to see the various screenings that women need in different decades of life.



Michael Vierra, M.D.

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5 WAYS TO MANAGE CANCER-RELATED FATIGUE

It's the most common side effect of cancer treatment: fatigue. The exhaustion can be overwhelming and unpredictable, making it difficult to do everything from clean the house to lift a fork at dinner.

"Lack of sleep isn't usually the problem, which means sleeping more won't help," said Carla Ostronic, MPAS, PA-C, who cares for patients at Lake Regional Cancer Center. "Sometimes there's a medical solution — for example, if treatment is causing anemia, then medication or a blood transfusion may help. So be sure to tell your care team how you are feeling."



Carla Ostronic, MPAS, PA-C

Whatever is behind the fatigue, good self-care is critical. Here are five tips for managing cancer-related fatigue:

Prioritize. If you have limited energy, plan to spend it on the activities most important to you. "Is there a time of day when you tend to feel the best?" Ostronic asked. "If possible, use that time to get things done that will make you feel like the day had meaning — whether that's completing a necessary task or connecting with a friend. Use that time differently on different days for variety and balance."

Take lots of breaks. "Pay attention to your body," Ostronic said. "If you're tired, rest."

Delegate. When people ask how they can help, tell them. "You're not going to be able to do everything you're used to doing," Ostronic said. "Your main focus should be on healing, so you have to work within the limitations and learn to adapt."

Move around. It may sound counterproductive, but physical activity can be energizing. "We're not talking about strenuous exercise," Ostronic said. "Try a walk outside or 30 minutes of yoga for an energy boost."

Socialize. Although you might not feel like socializing while going through treatment, social interaction is vital. And, talking with other people in your situation is particularly helpful. "Consider joining a support group," Ostronic said. "Lake Regional Cancer Center offers groups for men and for women. Patients leave feeling uplifted, and many also feel stronger. It's powerful to connect with others on similar journeys."

Get Support Here!

Lake Regional's Women's Cancer Support Group meets at 1 p.m. the first Tuesday of each month, and Lake Regional's Men's Cancer Support Group meets at 1 p.m. the second Tuesday of each month. Both groups meet in the Lake Regional Cancer Center Conference Room. Registration is requested at lakeregional.com/Events.



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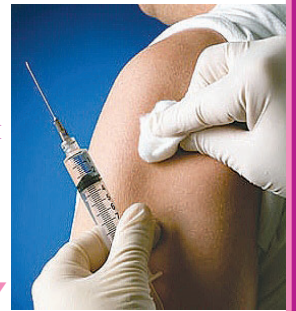


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OLIVIA PREWETT:

Breast Cancer Survivor



The hardest part about breast cancer for Olivia Prewett was its impact on her children. Her 7-year-old worried about her. And her 1-year-old couldn't understand why Mommy was different.

"I was sore and exhausted, but I still needed to play with her," Olivia said. "I couldn't give up and have my pity party. I didn't want her to think, 'Mommy isn't fun.'"

Olivia was just 43 years old when she found a lump in her left breast. Like most breast cancer patients, her family history did not point toward higher risk.

She brought her husband, Travis, along to hear the results of the biopsy on Nov. 8, 2021. She showed little emotion when her Lake Regional surgeon said the test showed cancer. As he explained next steps, she nodded and said, "OK," "Yes," and "I understand."

But the news hit hard.

"My sisters and me, we were raised not to let that emotion out until you can close the car door," she said.

Olivia and Travis had already been through some tough medical challenges. They had suffered the heartache of unsuccessful fertility treatments before adopting their two daughters. And he had a congenital heart defect that had led to multiple open-heart surgeries — the last in 2008.

"We have 'in sickness and in health' down," Olivia said.

The good news was Olivia found the lump and sought medical attention when treatment still had a high likelihood of success. Her diagnosis was Stage 2 HER2-negative breast cancer. "Stage 2" meant the cancer had just started to move into her lymph nodes. She chose Lake Regional Cancer Center because it offered state-of-the-art care and was close to home.



"I've always had great experiences at Lake Regional," she said. "I have a great history of care here, so I saw no reason to go anywhere else."

Her expert team created a care plan that included eight treatments of chemo spaced over 16 weeks and then 30 radiation treatments.

She quickly learned to be cautious about listening to other people's cancer stories.

"I heard all manner of terrifying things," she said. "But I learned you are not going to have the same reactions that the person you know had. Everybody's journey is different."

Having already taken some medical journeys, she knew she could keep her care team better informed if she kept a detailed journal. She used a pink spiral-bound planner to keep notes about her treatments and their side effects.

Overall, she felt she did well with the treatments. It was tough — sometimes really tough — but she continued to work full-time throughout both chemo and radiation. She continued to care for her girls. And she continued her hobbies of quilting, spinning wool and knitting.

"My attitude was, I knew what I had to do was get through it," she said. "It was a sideshow in my life. I wasn't going to let it define me."

She had tremendous support to keep living her life — from sisters and church friends cooking meals to grandparents helping with the girls to the team at Lake Regional Cancer Center keeping her informed of her progress.

"Everyone at the Cancer Center does a great job of letting you know what to expect and giving you permission to feel how you feel and making sure you never feel alone," she said.

Finally, on May 25, 2022, Olivia rang the bell in the Cancer Center to celebrate the end of treatment.

"By then, my hair was growing," she said. "That was concrete evidence that I was through it."

There's a photo of her ringing the bell and smiling. She's wearing a "Tougher than Cancer" shirt.

Now, almost one year since her diagnosis, Olivia is looking forward to more camping trips with her family and getting back to taekwondo — a hobby she never expected to have but picked up with her oldest daughter.

Asked what message she has for patients just diagnosed, she said they need to know it's OK to ask for help. And she offered hope.

"I learned that the peace that I have in my life, in my faith, isn't going to be shaken by something like this," she said. "I know I can go through stressful things and maintain a good outlook."



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BREAST CANCER

Treatment Options by Stage

There's no one-size-fits-all approach to breast cancer treatment.

"Every patient requires a personalized treatment plan," said Shahid Waheed, M.D., FACP, an oncologist and hematologist with Lake Regional Cancer Center. "Much of that plan will depend on the stage of the cancer at the time of diagnosis."

Following are the treatments commonly used at each stage.

Each case is different, though, and treatment plans vary by patient.



Shahid Waheed, M.D., FACP

Stage 0 (ductal carcinoma in situ, or DCIS)

Sometimes referred to as precancerous, DCIS is characterized by abnormal cells that are confined to the breast milk ducts. Surgery is typically the treatment.

Stage I (early breast cancer)

These cancers are smaller than 2 centimeters and have not spread to the lymph nodes. Again, surgery is often the only necessary treatment.

Stage II (early breast cancer)

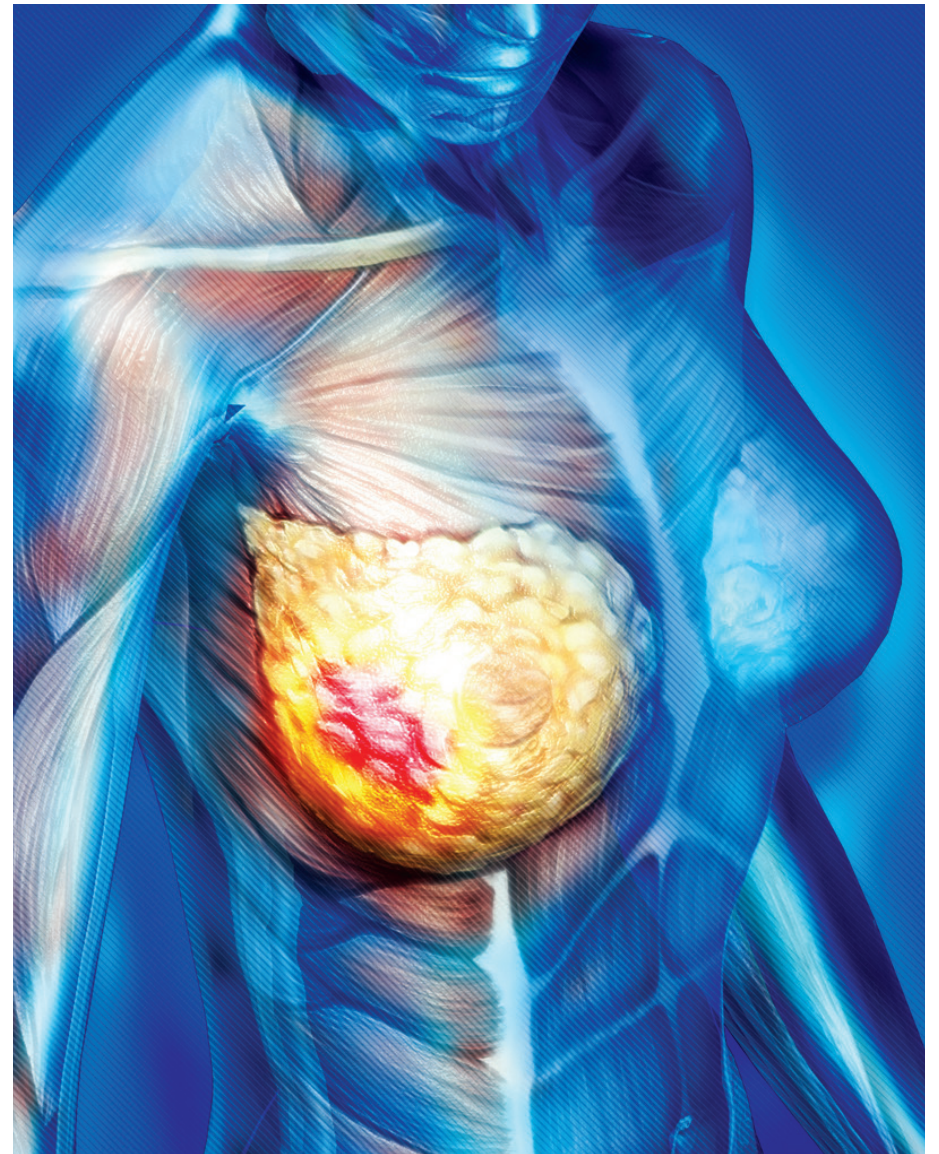
This stage describes cancers that are larger than 2 centimeters or have moved to a few nearby lymph nodes. Treatment involves a combination of surgery and radiation or chemotherapy. Hormone therapy also may be used for patients with hormone-receptor-positive cancer.

Stage III (locally advanced)

These cancers have spread outside the breast to the chest wall or breast skin or to many lymph nodes but not to other organs. Treatment includes a combination of surgery, radiation and chemotherapy. Hormone therapy or targeted therapy (medication directed at only abnormal cells), also may be used.

Stage IV (metastatic)

In this stage, the cancer has spread beyond the breast to other parts of the body. Stage IV breast cancer is treatable, but not curable. Chemotherapy or radiation may be used to slow the cancer's growth and ease symptoms. Hormone therapy also may be used.



As you can see, treatment gets more complex with each stage of cancer. That's why Dr. Waheed encourages women to keep up with routine mammograms.

"The earlier you catch breast cancer, the easier treatment will be," he said. "Make screening a priority."

Worried about Screening Costs?

Show Me Healthy Women is Missouri's implementation of the National Breast and Cervical Cancer Early Detection Program. The program provides free breast and cervical cancer screenings throughout Missouri, for women meeting certain guidelines:

- Income at or below 200 percent of the federal poverty level for household income,
- Age 35 to 64, or older if they do not receive Medicare Part B, and
- No insurance to cover program services.

For more information, contact Lake Regional Obstetrics and Gynecology at 573-302-2764.



8 TIPS

for your First Mammogram

Are you excited for your first mammogram? Yeah, we didn't think so. But there's no need to dread it, either.

"There's very little preparation required, but we have a few tips to make mammograms easier," said Lake Regional Radiologist Baron Adkins, D.O. "And knowing exactly what to expect will ease your mind, too."

Follow these tips for surviving your first one so you're more likely to stick with them every year.

1. Schedule strategically. Women report varying levels of mammogram discomfort, and it largely depends on breast size and tenderness. Schedule your mammogram for when your breasts are the least tender, usually the

week following your period.

2. Be prepared with personal health information. On the day of your mammogram, you'll be asked about your family history of breast cancer and your personal history of cancer and hormone use, including birth control. To make it easier, you may want to jot down some notes to take with you.

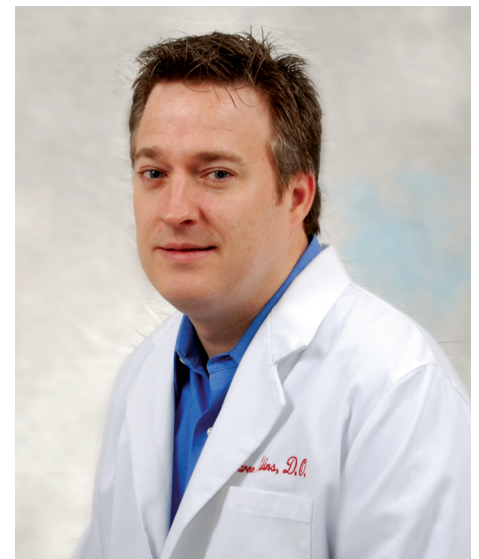
3. Take an ibuprofen. The mammogram itself may be uncomfortable or painful, but it lasts only about 15 seconds per view, with four views being standard. Taking an ibuprofen helps alleviate the residual soreness that may last about a half hour after.

4. Wear pants or a skirt. You'll be asked to remove your shirt and bra, but you can keep your pants or skirt on, so be sure to wear two pieces that day rather than a dress.

5. Reward yourself. Getting a mammogram is a great step to take for your health. Take yourself to a movie or plan a lunch date with a friend for after the exam to make the day more enjoyable.

6. Don't worry if you get a callback. Getting a callback isn't uncommon, especially after your first mammogram because the radiologist has no prior image to use for comparison. Most callbacks can be attributed to folds in breast tissue and calcifications — not cancer. In fact, 90 percent of women who get called back for additional screening do not have cancer.

7. Set a reminder to schedule your next one! Whether you schedule around your birthday or another annual event, put a reminder in your phone to schedule next year's screening. "You want to continue getting mammograms



Baron Adkins, D.O.

annually to ensure nothing gets missed," Dr. Adkins said. "The longer you go between mammograms, the longer a breast cancer can grow. Being proactive gives us the best chance to catch the cancer early."

First Mammo? Check! Lake Regional Imaging Center is making it easy for women to check that first mammogram off their list with a special event just for first-timers. Appointments for first mammograms are available 9 a.m. to 1 p.m. Saturday, Nov. 5. **Learn more and register now at lakeregional.com/FirstMammo.**

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