College Student Finds Cottage

From the dorm room to a hospital room... and getting back to school

Sister Story

Losing weight and gaining perspective on what it means to live well

WHAT IS TSS?

What you need to know to protect yourself
BUILDING A SPACE FOR HEALING

The sacred space at the new Goleta Valley Cottage Hospital will provide visitors a peaceful respite for reflection and healing. Daylight entering the upper windows will radiate down the curved roof line. The architecture is a nod to Goleta’s cultural roots, reminiscent of the corrugated metal roofs used on historic lemon packing plants. Mosaic and stained glass artwork is planned for the space.
ON THE COVER
Melissa Shew moved to Santa Barbara to begin college. Her family would soon have another reason to be thankful she found her way to our community, close to medical excellence when she needed it most.

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THE MITCHELL SISTERS LOSE BIG
Bariatric surgery reduces two sisters to a fraction of their former selves.

FEATURES
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Hospital Heroes  Demonstrating compassion, a core value of Cottage Health System, and reaching beyond job descriptions, Debra Rodgers, RN, and Beth Calmes, RN, oncology nurses at Santa Barbara Cottage Hospital, along with Jonathan Grotts, the hospital’s statistician, have made outstanding efforts to support caregivers and families coping with loss in the hospital setting. They were recognized at the National Health Foundation’s Hospital Hero Awards celebration in Los Angeles.

Our Not-For-Profit Hospitals

Santa Barbara Cottage Hospital (SBCH) Today a 510-bed acute care teaching hospital and level II trauma center, the largest of its kind between Los Angeles and the San Francisco Bay Area, the hospital was founded in 1888 by 50 women determined to provide a healthcare facility for the growing community of Santa Barbara. With annual admissions of 18,144 patients, 43,811 emergency department visits, and 2,300 births, the hospital is renowned for its comprehensive maternal-child and pediatric services, cardiac, neurosurgical and oncology programs, emergency and trauma services, modern operating rooms, sophisticated diagnostic radiology equipment, outpatient surgery, eye center, psychiatric and chemical dependency services, and inpatient and outpatient rehabilitation services (Cottage Rehabilitation Hospital).

Its medical staff of more than 600 includes specialists in all major clinical areas, many of whom are involved in the training and education of new physicians in the hospital’s internal medicine, general surgery and radiology residency programs.

Goleta Valley Cottage Hospital (GVCH) Founded in 1966 to serve the growing community of Goleta Valley, the hospital today is licensed for 122 acute-care beds, admits 1,545 patients a year and sees 18,427 emergency visits. Recognized for its Breast Care Center, specialized subacute unit and Center for Wound Management, the hospital joined forces with Cottage Health System in 1996.

Santa Ynez Valley Cottage Hospital (SVYCH) Offering acute-care services to the residents and visitors of the Santa Ynez Valley since 1964, the 11-bed hospital became affiliated with Cottage in 1995, and today continues to provide inpatient and outpatient surgery, 24-hour emergency services, and a physician office rental program that brings specialists to the Valley on a regular basis. Inpatient admissions in 2012 totaled 228. There were 6,643 emergency visits, and Valley residents increasingly rely on the hospital’s busy outpatient radiology and laboratory services.

(Statistics from the year 2012)
Dear fellow community members,

Looking back on the year, we recognize that it is only with the support and generosity of this community and the careful stewardship carried out by previous generations that Cottage has been able to continue its mission of medical excellence for more than a century, building on its strong foundation and keeping its doors open to provide care for those in need.

Among the milestones Cottage celebrated in 2013 were the grand opening of Bella Riviera, with 81 of our employees becoming new homeowners in the sold-out community of workforce and market rate homes, the designation of SBCH as a Level II Pediatric Trauma Center, and the state’s designation of our pediatric specialty programs as Special Care Centers. This year marked one of our most successful recruitments in the surgical residency program at SBCH, with 600 applicants for 3 open positions. We continued progress on our replacement hospital projects. And, due to diligent efforts by physicians and employees, surgical site infection (SSI) rates at SBCH and GVCH were 80 percent better than the national average. SYVCH has not had a single SSI in the past three years. With Cottage’s industry-leading infection prevention programs we will set the bar even higher in 2014.

We are also working hard to prepare for changes related to healthcare reform. As you know, Covered California, the state health insurance exchange, opened for enrollment in October. Individuals have begun signing up for coverage to begin in 2014. Under the Affordable Care Act (ACA), our state’s Medicaid program, Medi-Cal, will expand, making one to two million additional people eligible for the program. We expect approximately 25,000 to be newly eligible in Santa Barbara County. While the ACA program rollout continues, Cottage, as a participating service provider, is prepared to care for patients who seek services under the program’s coverage.

We’ve looked ahead to prepare for the lower reimbursements and revenue expected by hospitals nationwide in the coming years. We believe that sustainable healthcare models will be collaborative, with providers delivering coordinated services across a continuum of care, sharing operational resources whenever possible to offer the best quality, most efficient and cost-effective care for patients. With that in mind, Cottage Health System is completing a due diligence process and has filed with state and federal regulatory agencies to formally affiliate with Sansum Clinic. We look forward to the completion of the application review and will keep you updated on progress.

It is our privilege to serve this community. We value your trust and support and wish you health and happiness in the new year.

Robert E.M. Nourse
Chair, Board of Directors
Cottage Health System

Ron Werft
President and CEO
Cottage Health System
A Tale of great! Loss
AND TWO SLIMMER SISTERS
People don’t recognize Debbie and Pam Mitchell very easily these days, now that they have lost close to 200 pounds between the two of them.

The Mitchell sisters were overweight for most of their lives – until this past year when they’ve experienced the slimming results of bariatric surgery. Since they had the Roux-en-Y gastric bypass procedure in March 2012, Pam has lost 80 pounds and Debbie has shed 100 pounds.

“I went to the airport to pick up my son who had been away in the army and had not seen me for a while,” Debbie recalls. “He didn’t even recognize me.”

Last year, Pam convinced Debbie to attend a seminar with surgeon Dr. Farida Bounoua discussing the bariatric surgery program at the Cottage Center for Weight-Loss Surgery at Santa Barbara Cottage Hospital, a designated center of excellence.

After attending the talk in Lompoc, the sisters decided right away that they wanted to have the surgery. A mutual friend of theirs had had the bypass procedure and was very happy with the results.

Both Pam and Debbie were good candidates for minimally invasive bariatric surgery. The laparoscopic technique means the surgeon makes smaller incisions, resulting in less scarring and a faster recovery.

To qualify patients for bariatric surgery, doctors use a calculation called body mass index (BMI) to determine a person’s level of obesity. A normal BMI is 18.5 to 25. Gastric bypass surgery is a weight loss option for people with BMI greater than 40. Patients with a BMI as low as 35 and who have a life-threatening condition or severe physical limitations may qualify for the surgery as well.

Gastric bypass surgery for obesity changes the size of the stomach and small intestine and leads to weight loss by limiting food intake. Surgeons reduce the size of the stomach to a small pouch so a person cannot eat as much, and the middle part of the intestine is connected to the pouch-sized stomach. The body is unable to take in as many calories from the food because it bypasses the first part of the small intestine.
Intestine where many of the calories from food are usually absorbed. A person who has the surgery will need to take a multivitamin every day to assure that they are getting all the nutrients they need to stay healthy.

In addition to gastric bypass surgery, other bariatric surgery procedures include the lap band and the gastric sleeve options; both reduce the size of the stomach and decrease food intake.

After a patient is determined to be a good candidate for bariatric surgery, he or she is required to lose a small amount of weight before having the procedure.

Pam was able to lose the required weight quickly and was scheduled for surgery right away. Her starting weight was 240 pounds.

“I’ve been heavy all of my life. I tried everything to get the weight off and I just couldn’t lose very much, until I had the surgery,” Pam explains.

Since having surgery in March 2012, Pam is now 80 pounds lighter and is able to enjoy many activities she used to avoid when she was overweight.

“I love to go swimming because now I can put on a bathing suit,” she says. “I can also wear dresses I couldn’t put on before. And now I even go out on dates!”

“I’m very happy with the experience,” she adds. “I love the results and I would definitely recommend the surgery.”

Unlike Pam who was able to lose her required weight before the surgery, Debbie was a little intimidated that she had to drop 13 pounds.

“I thought I would never be able to do it,” she says. While she did manage to lose 7 pounds on her own, the doctor told her she would have to delay the surgery until she could shed the additional 6 pounds.

The doctor put Debbie on a liquid shake diet. She lost the 6 pounds, and her surgery was scheduled shortly after her sister’s. Before the gastric bypass, Debbie weighed 260 pounds. She has since lost 100 pounds.

“I noticed the weight coming off, even though I wouldn’t weigh myself at home,” she says. “I could see it in the way my clothes fit and the way my face looked.”

“I feel so great now,” she adds. “I still have 20 more pounds to go, and even though my weight loss has slowed down, I’m losing about 5 pounds every three months.”

Both Debbie and Pam say that they do not have restrictions on what they can eat for meals, but the portions must be small, and it’s best if they avoid sugary treats and snacks.

Debbie’s breakfast usually includes one piece of toast, a container of yogurt, and some fruit. For dinner, she can eat 4 ounces of meat, or roughly half of a chicken breast, vegetables and a small helping of pasta or rice.

“I feel full and not hungry, even though I’m eating so much less than I used to,” Debbie says.

She noticed a big difference during Thanksgiving last year. Although she piled her plate with all of the temptations of the grand feast, she was only able to eat a third of her food before she felt full.

Debbie says she doesn’t miss eating big meals because she has much more energy and a whole new lifestyle.

“I can climb the stairs of my condo without running out of breath. I can get down on the floor and get back up without struggling,” she says.

She no longer has to take medication to control high blood pressure because her level is now normal. And the headaches that plagued her when she was obese have disappeared.

Her favorite activities these days involve being outdoors instead of hiding in her house.

“When I was overweight I didn’t want to do anything. Now I ride my bike every day, I love to be outside, out walking and at the beach. I wouldn’t even dare to put on a swimsuit before.”

Debbie’s only regret is that she didn’t make a change sooner: “Instead of wasting 20 years being overweight, unhappy and unhealthy, I wish I had done the surgery years ago.” ◆ BY MARIA ZATE | PHOTOS BY GLENN DUBOCK
**NEW APPOINTMENTS**

**Dorothy Largay, PhD,** has joined the Cottage Health System Board. She is the founder and CEO of Linked Foundation, which is dedicated to alleviating poverty by improving the health of women and their families in Latin America. Linked Foundation also supports several organizations that are improving the health and education of families in Santa Barbara County.

Prior to starting Linked Foundation eight years ago, Dr. Largay was a management consultant specializing in leadership and organizational development. Her career includes 20 years of executive coaching to high-tech and biotech companies.

Dr. Largay is an active supporter of Direct Relief International, where she served as a board member and board chair. She is also on the board of MicroCredit Enterprises, a nonprofit investment firm for microfinance organizations, and she serves on the health committee at Pro Mujer, a leading women’s development, health and microfinance organization serving more than 250,000 women in Latin America.

She received her BA from Boston College and PhD in Psychology from the University of Oregon.

**David Dietrich** has accepted the position of Vice President for Advancement at Cottage Health System.

**Arie Dejong** has joined Cottage Health System as the new Vice President of Goleta Valley Cottage Hospital. Arie arrives from Burnet, Texas, after serving five years as Vice President & Chief Operating Officer of Seton Highland Lakes Hospitals and Clinics (part of the Seton Healthcare Family network located in central Texas, mostly Austin). In the years prior to that he was Vice President of Aspen Healthcare Metrics in Denver, was a senior consultant at Accenture, and served as Director of Operations and Finance at Advocate Health Care in Chicago.

Arie holds a BA from Michigan State University and an MHSA from University of Michigan.

In his previous role as director, Dave worked with executive leadership, CHS board members and community volunteers on The Campaign for Cottage Health System, which raised more than $110 million in support of the rebuilding of SBCH. He also provides oversight of CHS staff of affiliated not-for-profit foundations at Goleta Valley and Santa Ynez Valley Cottage Hospitals and Cottage Rehabilitation Hospital.

Prior to joining Cottage, Dave was Executive Director of the Foundation for Santa Barbara City College, served as Assistant Dean of Development for UCSB’s Gevirtz Graduate School of Education, and held leadership roles at several other not-for-profit organizations in Santa Barbara. He holds an MA in Communication from UCSB.

Dave will now lead and grow the fund development program and will continue to provide leadership to public affairs, media relations, and marketing activities while a search is conducted to fill a new position of vice president in that department.
CONSTRUCTION UPDATE
Construction on Phase 5 of the new Santa Barbara Cottage Hospital continues with:
• Installation of two 40,000-gallon underground water tanks
• Footings and foundation for the new Link building, to connect the East Wing to the Centennial Wing
• Construction of three new conference rooms and restrooms (1 East)
• Construction of new Medical Staff offices and Nursing Administration offices (2 East)
• Construction of new Therapy Services and Cardiac Rehabilitation space (2 East)

The Endoscopy Department is now located on 2 East, and the Cardiology Department will open on 2 East in December 2013. Construction of the new iMRI/Angio/Brain Lab Suite in Surgery is expected to begin in December 2013.

The new Goleta Valley Cottage Hospital is scheduled for completion in the last quarter of 2014.

At Santa Ynez Valley Cottage Hospital, the new laboratory is now operational and the expanded emergency department reception area is complete.

LEADING THE WAY: RECENT AWARDS
• The American College of Surgeons National Surgical Quality Improvement Program (ACS NSQIP) has recognized SBCH as one of 37 ACS NSQIP participating hospitals nationwide that have achieved meritorious outcomes for surgical patient care.
• The Heart and Vascular Center at SBCH received designation as a Blue Distinction Center for Cardiac Care.
• The Trauma Program received certification of the Pediatric Trauma Program as a Level II site.
• The Cottage Center for Orthopedics has earned the Joint Commission’s Disease Specific Certification for Knee and Hip surgery, and is a Blue Distinction Center for knee and hip replacement programs.
• The Neuroscience Institute at SBCH has once again earned an Advanced Certification for Primary Stroke Centers from the Joint Commission.
• The Center for Wound Management at Goleta Valley Cottage Hospital has earned The Joint Commission’s Wound Care Certification. It is now one of only three centers in California and one of 21 in the nation that have earned this prestigious designation.

Protecting you from the spread of flu.

This year 94% of Cottage Health System employees — and 98.5% of the medical staff — have received a flu vaccination, doing their part to help prevent the spread of influenza. It’s a dramatic increase from the 69% vaccination rate seen at Cottage last year.

In an average year, influenza infects nearly 10% of the US population and results in more than 200,000 hospitalizations.

While most people who get the flu recover at home in less than two weeks, influenza can lead to a variety of other health complications such as pneumonia, bronchitis, ear and sinus infection and even sepsis.

The flu is a highly contagious viral respiratory infection. People can spread the virus even before symptoms begin, so it’s important to be diligent about practicing good hand hygiene and not spreading germs through droplets in coughs and sneezes. Getting vaccinated is the best defense against the flu.

To better protect our patients, those who may be most vulnerable to the flu, and to provide the safest environment possible for both patients and staff, all Cottage Health System employees receive a flu vaccination or wear a protective mask during flu season. Your health is our priority.
At 18 years old, Melissa Shew had recently moved from San Clemente to begin her freshman year at Westmont College. The engineering student was in her dorm room on a Monday night last fall when she started feeling sick. At first, she thought she had the flu. She went to bed, hoping to feel better in the morning.

On Tuesday she felt worse. Still believing it was the flu, Melissa called home to let her mom know she was going to take the day off from classes and stay in bed to let the illness run its course.

By Wednesday, her condition had deteriorated. She was getting weaker. Her resident advisor brought her to the student health center on campus. The physician
Dr. Fried called her family with the message: “Melissa is very sick. Everybody needs to get here now.”

Scott and Matthew left immediately, following just an hour behind Sandy.

Melissa was still awake when Sandy walked into her room around 8:00 that night. “I could tell by looking at her that she was really sick, but I still had no idea how bad it was,” says Sandy. “If she’d been home ... if I’d seen her ... I would have made her go to the doctor sooner.”

Melissa was weak but still in good spirits. She looked up and said, “Hi Mom. I have the coolest nurse!”

Melissa was a teenager, in perfect health, and never suspected that she’d be stricken by a potentially fatal illness. But within a few hours her kidneys had begun to fail. By midnight she was intubated. Her body was struggling to circulate blood;
her blood pressure dropped. Her toes slowly began turning purple. Doctors worked to get the right mix of medication to help Melissa fight off the toxic bacteria without causing other complications.

Scott recalls many long, tense nights staring at the monitors looking for glimpses of improvements in Melissa’s vitals. “It was tough seeing my daughter hooked up to so many machines, tubes and IVs. As a parent I felt helpless. I prayed a lot and thanked the Lord that she ended up at SBCH with access to the excellent medical staff and technology it offers,” says Scott.

“During those nights watching over her, amidst all the pumps of the ventilator, the beeps and tones of her life support equipment, I was moved by how deeply compassionate and emotionally invested the whole team of nurses was,” he recalls. “We rode through a lot of ups and downs together, and are eternally grateful for the nurses’ dedication to serving on the front line.”

Melissa didn’t get to meet many who helped save her, but she does remember the “cool nurse,” Sami Hepburn, who first cared for her when she arrived. In the short time that Melissa was awake, she developed a bond with Sami. Melissa remembers, “She promised me that she would work hard and do everything she could to make me better.”

After nearly a week, Melissa showed improvement. Doctors removed her ventilator. Melissa finally woke up and, craving nourishment, whispered, “smoothie.”

“It’s the first thing I said to my parents,” she says with a laugh. “But I didn’t realize right away how weak I was. I couldn’t even move my hands or arms.”

Melissa had to rebuild strength to do everyday tasks like feeding herself and getting dressed.

She did get that sought-after strawberry-banana smoothie. And many more smoothies would come — along with her favorite food on the hospital menu, filet mignon. Melissa’s dad worked with her to help her eat again and get stronger. He encouraged her and negotiated with her when she thought she couldn’t do it: “Use your left hand for five bites, then I’ll feed you five bites while you rest.”

Support and encouragement came from the most unexpected places. “We were so thankful for the Westmont community... especially those who visited the hospital and offered support,” says Scott.

It was three long weeks in the hospital before she was able to transfer to Cottage Rehabilitation Hospital. There she spent another three weeks working with physical therapists, gaining the strength to walk again.

WHAT IS TOXIC SHOCK SYNDROME?

Toxic shock syndrome (TSS) is caused by toxins released from certain bacteria. It can progress rapidly and lead to a failure of multiple body systems.

TSS is a rare condition that can affect anyone — with bacteria entering the bloodstream through a burn or wound — but it most often affects females 13–25 years of age.

To decrease risk of TSS, menstruating women using tampons should change them frequently, avoid wearing them overnight, and use the lowest level of absorbency needed.

TSS can be difficult to recognize, as many of its symptoms are similar to those of influenza or other conditions. Women should seek immediate medical attention if they are suddenly struck with high fever and other TSS symptoms such as nausea, dizziness, sunburn-type rash and low blood pressure during or soon after their menstrual period.

Melissa has made significant progress toward a full recovery and continues to work on challenges with her lower legs and feet. She returned to Westmont in the fall, excited to be back amongst her friends, studying calculus and chemistry and the pursuit of alternate energy sources, and shopping at the State Street boutiques. All with a firm stipulation from her mom: “If she feels sick — even a little — she has to Skype me so I can see her,” says Sandy. “She has to look at Mom.”

Melissa agrees, adding, “I know, if anything happens, my mom will be in the car in a minute.”

† COLETTE BRIERE | PHOTOS BY GLENN DUBOCK
Planning matters. I just updated my own estate plan. My prior plan was a good one and reflected my values and what I wanted to do for my family and those I loved...seven years ago. But, when my family experienced an unexpected transition in 2012, I was forced to re-examine my plan. And, I was amazed at how many changes (other than the transition itself) had occurred in that seven-year period, including:

• My father passed away.
• My mother sold the family home in Montana and relocated to Oregon close to my younger sister.
• And, my mother, age 86, is still living alone.
• I have a five-year-old granddaughter.
• The economic landscape has changed, impacting the value of my retirement portfolio, as well as the value of my home.
• I am seven years closer to retirement and am much more risk-averse in my investing than I was in 2006.
• My funky older Mesa home in Santa Barbara is also seven years older.
• And, this list does not include changes in the lives of my adult children, brother and sister, my nephew, my extended family, or my friends.

Each one of the changes in this list affects my thinking about the timing of my retirement, the resources I will need to care for myself, and how the assets in my estate will ultimately be distributed to family, friends, and charities in a fair and meaningful way.

If you haven’t looked at your own estate plan within the last five years, I encourage you to do so. Do it for your immediate family and be a model for your extended family and friends. Because planning matters.

There’s a way...

As you update your estate plan, please remember Cottage in your philanthropic planning. Philanthropy has helped to enhance the strengths of Cottage Health System and it will be a key factor in our ability to respond to the changing healthcare needs of our community in the future. Investing in healthcare can sustain critical services for generations to come.

Opportunities for legacy gifts bearing your family name include:

• Creating an endowment to sustain one of the teaching positions in our graduate medical education program which supports three specialty areas — internal medicine, general surgery, and diagnostic radiology.
• Creating an endowment for children’s services to support our youngest and most vulnerable patients.
• Creating an endowment to fund scholarships for those who are enrolled in nursing education programs and plan to work at one of Cottage Health System’s hospitals.
• Creating an unrestricted endowment that will enable the Cottage Board to meet the highest needs of the organization and take advantage of medical opportunities when new technologies arise.

These are just a few of the many ways you can strengthen and sustain healthcare services in our community through your estate planning. Lastly, please let us know that you have taken this important step so that we can thank you and recognize you for your vision and generosity.

To aid you in your planning process Cottage is pleased to provide you with the following tools:

www.cottagelegacy.org
This online “Plan Your Will” tool will help you think through your personal situation, document assets and issues, then allow you to print your outline to use when you consult with your personal advisors. We would appreciate your feedback on this tool.

You may also call us at 805-879-8987, or 805-879-8982, to receive a complimentary, no-obligation copy of Provide and Protect, an easy-to-read book on planning your estate.

Carla A. Long, Director of Planned Giving Cottage Health System clong@sbch.org
In this issue of the Cottage Magazine, we remember with heartfelt appreciation the encouragement and support provided to Santa Barbara Cottage Hospital by Gary Hock (pictured with wife, Lyn). Gary passed away in Santa Barbara in October following a lengthy illness.

Never one to do things in small measures, Gary’s thoughtful interest in excellent health care led to two significant gifts that will impact Cottage for decades to come. His first major philanthropic investment came in 2009 and was directed to support the rebuilding of the hospital. Early in 2013, Gary communicated his strong interest in supporting the skill development of those who provide direct care at the patient's bedside. Following dialogue with the hospital’s leadership that led to another significant donation, the hospital is now constructing a larger teaching and learning center to provide caregivers with the opportunity to practice basic and advanced care techniques and decision making using simulation models that mimic real-life medical conditions of patients. We are honored that when the center opens late next year, it will be known as The Gary M. Hock Family Patient Care Simulation Lab.

Gary’s name is also included on the “Philanthropic Legacy” display in the main lobby of the new hospital — showcasing those who have made exceptional gifts to support the excellence of the hospital.
COMMUNITY HEALTH PROGRAMS

Childbirth & Breastfeeding
Santa Barbara Cottage Hospital
Information: 805-569-8229

Community CPR
Infant/child and adult courses
Santa Barbara Cottage Hospital and
Santa Ynez Valley Cottage Hospital
Reservations/Information: 805-569-8229

Diabetes Classes: Living Well
Goleta Valley Cottage Hospital
Free ongoing classes.
Information: 805-681-6441

Glaucoma and Hearing Screenings
Mondays 11:00 am – 1:00 pm
Thursdays 2:30 – 4:30 pm
SBCH MacDougall Eye Center
Free. Information: 805-569-8264

Healthy Balance
Weight Management Clinic
8-week weight-loss program focusing on healthy
choices for nutrition and exercise.
Call for date of next orientation meeting:
805-569-7201

Heart Health Fairs
Saturday, February 8, 7:30 – 10:00 am
Santa Barbara Cottage Hospital
(Castillo Street entrance, first floor)
and
Saturday, March 1, 7:30 – 10:00 am
Goleta Valley Community Center
(5679 Hollister Ave)
Free. Information: 1-855-CHS-WELL (toll-free)

Memory Mingle
Second Monday of each month
10:00 – 11:30 am
Free. Information: 1-855-CHS-WELL (toll-free)

Nutrition and Diabetes Class
Santa Ynez Valley Cottage Hospital
Wednesdays Noon – 1:00 pm
Free. Information: 805-681-6431 x72351

Smoking Cessation
Next course begins January 14.
Call for reservations: 1-855-CHS-WELL (toll-free)

Weight-Loss Surgery Seminar
Ongoing seminars at various locations.
Details on our website under Our Services.

Learn more at www.cottagehealthsystem.org.

Join us at the Tiara Ball, an annual gala to benefit Santa Barbara Cottage Hospital’s
Critical Care Services on Saturday, February 1, 2014 at the Bacara Resort. For details on
reservations or sponsorship: 805-879-8985 or akause@sbch.org.