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Family Respite Care gives parents, guardians and kids a break

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Located in the Head Start building on Silver Street, the Elko branch of a statewide organization offers care for children with special needs, along with relief for their caretakers who need additional assistance.

Renee Denny, director of Elko Programs with Family Respite Care of Nevada, said the group has served Elko since 2021. Denny said it was a decision “made by the main organization in Reno.”

“They decided that they wanted to expand and serve the rural communities,” she said. “I’ve been with the organization since March 2023 and from what I’ve learned,

there was a respite program around 2015 in Elko that had very minimal funding, so they had to shut their doors.”

But then, Family Respite Care in Reno learned of the closure and planned for a return. “So, they expanded over here in 2021 and started the program very small, with just one family with three children. It has been growing since then,” Denny said.

“I’ve been the Executive Director for 12 years now, I’ve been with the organization for 18,” Korine Viehweg said.

“It was placed on my heart when they had to shut their doors that we needed to find a way to get respite back up and running in

the Elko community,” she said of Elko’s former respite program.

“It took a few years to build on our state grants that we write for that would allow us to have the funds and the resources to kind of support that effort,” Viehweg said. “COVID-19 in 2020 stalled that process a little bit. In November of 2021, we had our first respite session in Elko and we decided that the best way to be successful at providing care was to keep that program under our umbrella.”

She said the Elko program has been fully funded for the past few years “through our home base in the Reno/Sparks community. “In October of 2024, we started to embark upon introducing the

program to the community, as a way of us looking for funding in the Elko community, for the Elko community,” Viehweg explained.

“We were founded in 1995 as the Northern Nevada Respite and Volunteer Experiences Family Foundation,” Viehweg said. They changed their name to help communities find their services better, she noted.

“We had a soft rolling open from 2021 through 2023. In 2024, we started to say, ‘This is a valuable program and a viable program that’s going to improve the Elko community and those caring for children with special needs,’” Viehweg said. “We’re now working on securing funding

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The Headstart facility in Elko, which Family Respite Care of Nevada uses to host their programs. Photo taken Jan. 7, 2025.

to be able to sustain and grow our Elko program.

“We have a one-to-one or one-to-two ratio with our respite providers and our volunteers who come,” Denny explained. “We also serve all of the kids in the home — we don’t just serve the one child in the home who has a qualifying diagnosis. We’ll take all of the kids so the family is getting a true break and a true respite experience. Because, if they just get to bring one child but yet they still have three or four at home, they’re still having to care for their other children.”

The goal of the program is to give parents a true break, she noted.

“We offer a unique type of respite care, where we do center-based care,” Denny said. “That means the kids come to us in the center. For most respite programs, the respite provider would go into the home.”

Family Respite Care’s approach is like an after-school program, she explained. Children can enjoy free time to play games, participate in arts and crafts and watch television.

“We have partnered with the Head Start of Northeastern Nevada to provide space. They gift us their facility, which is a preschool building,” Denny said. “They have all of the stuff we need for the kids that we’re serving right now.”

The most important part of the program, she said, is its social integration. Since Family Respite Care takes all of a family’s children, special needs children are able to spend time with children who do not have special needs.

“They also get to hang out with their volunteer buddies, which are teens from our community that come in,” Denny noted. “We’re also mentoring teens on how to work with kids with special needs or just kids in general — and how to program activities, how to interact with the kids, how to engage them for the time that they’re here.”

In addition, “we have paid trained respite staff who guide, develop and mentor youth to provide hands-on, direct, meaningful and loving care to children with special needs and their siblings,” Viehweg said.

“We just recently started doing community outings where we’ll take our kids ages seven to 15 out into the community,” Denny explained. “We’ve gone putt-putt golfing at the Commercial Fun Center and we went bowling at Telescope Lanes. We’ve been to the California Trail Interpretive Center. We’ve also been to the Elko Fire Department. We would love the opportunity to take them to Great Basin College to do the indoor rock wall and to the Boys and Girls Club,” she said. “We do look for those community partnerships.”

In addition, Denny said she’s trying to start a community outreach program for the program’s families called Let’s Connect, so families can “come into the center together to kind of connect with each other.” The program would allow families of children with special needs to talk about their experiences and “also understand what resources are available to them within our community,” she said.

“During those family meeting times, I’ll also have a resource from the community come in and talk to them about what they do and how they can help their families. That’s something just starting this month, that I’m hoping to do once a month. I’m kind of piloting it for the next three months,” she said.

Denny explained what kind of benefits the program brings to parents. “Them coming in, knowing they get three hours of uninterrupted child time — it’s just a relaxation they know they have coming. And when families know that they have that break coming up, it gives them something to look forward to. It helps with their overall mental well-being, knowing they have something to look forward to.”

She said raising children with special needs “is extra.”

“They have to do a whole bunch of extra things that typically-functioning families don’t have to go through. I see the families come in at the end of their three hours and the moms look really relaxed,” Denny said.

“And this also benefits the kids too,” Denny added. “This is one of their favorite places to come. They get to just be here and play. There are no expectations. We don’t do therapies, we don’t do homework. We don’t have expectations for them to follow, like a structured routine or schedule. So, they get their little break too, where they just love being here.”

She said up until this year, the program was fully funded out of the Reno organization.

“We just started, in October, requesting funding locally from Elko. We’ve had a couple great organizations help us a little bit. So far, we’ve had Elko Federal Credit Union help us out with some funding so far,” Denny said. “We’ve had the Elko Chamber of Commerce give us a donation from Kinross Gold, which has been really good. But what we really want to do is get our funding for

the Elko program from Elko — and that hasn’t happened yet. That’s one of our biggest challenges right now, is trying to find local funding.”

Then, the program needs to find better space.

“The second challenge that we have right now is, we don’t really have an adequate location to serve teens,” Denny said. “We serve kids in our care from three months up to age 15 here in Elko — but the organization serves up to age 22 — so that’s something that we’re hoping to expand in Elko, sooner rather than later,” Denny said.

“We’re in the preschool building right now and all of the furniture is really small. All of the toys and activities that are here are catered to younger children,” she said. “We just really need a location where we can serve that population, because we’re unable to serve them right now and they’re really underserved all around the community. So, I’d really like to see them get what they need.”

The program is free for families.

“We don’t charge a fee for respite. In order for them to qualify, all they need to provide is a form of qualifying diagnosis,” Denny explained. “They don’t have to be diagnosed by a doctor. If they have been identified in the school district for an Individualized Education Program or a 504 plan, they can qualify for our services.”

In addition, the program does not bill insurance. “All they need to do is reach out to me and talk to me about how they can get started,” she said.

“We started with serving just one family,” Viehweg noted. “Now, we’re approaching 70 children in Elko and there are over 1,500 children who have been identified with a qualifying need. So, the need to continue to grow in the Elko community is huge. We just hope that we can be serving one new family, one new child, each and every year. And if we can expand more and more, we would love to see that happen.”

PACE helps people recover from addiction, trains others to help

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — PACE Coalition is a local organization which helps make addiction recovery and other causes happen by training or paying for others to be trained in recovery, Executive Director Laura Oslund said.

“We are mainly prevention and then we move into intervention,” she said. The group’s name stands for Partners Allied for Community Excellence.

“We cover Elko, Eureka and White Pine counties, so we cover 28% of the state of Nevada — that’s about under 3% of the population of the state of Nevada. So, we get to travel a lot. We work

with other agencies and organizations and support what they do.”

PACE has been a nonprofit since 2004 and is funded through state and federal grants.

“It’s kind of between a weekly learning recovery and AA/NA [Alcoholics Anonymous/Narcotics Anonymous], so it’s self-powered, not higher power,” Oslund said.

“We fund agencies and organizations to do prevention. So, we fund the Eureka Juvenile Probation. We provide funding to the Boys and Girls Club in Elko, Eureka, Ely and White Pine,” she said.

“We have funding where we can provide car seats to families

in need,” she added. “To prevent Sudden Infant Death Syndrome, we can provide a bassinet, the training and some other supplies. We have new mother supplies, for mothers who have recently given birth. If they don’t have the appropriate hygiene and healthcare supplies they need, we can provide a couple of weeks of that.”

She said the organization also matches clients to other resources if they’re better suited to the task. PACE also trains tribal groups in recovery.

“One of the things that PACE does is try to act kind of as a hub for information,” media coordinator Michael Magney said. “These

days, we get about 25 to 30 agencies and representatives on our monthly meeting.”

For example, PACE’s Jan. 7 meeting involved organizations including the Division of Child and Family Services, the Nevada Department of Education, Training and Rehabilitation and Battle Born Youth Challenge Academy.

“If we have two agencies basically trying to do the same thing, we can bring the resources together — it just makes it more efficient,” Magney said.

“The thing about prevention is that when you dig into it, what are the factors that make it more likely that somebody’s going to start using substances in the



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community?” Magney said. “We realized that a lot of things are tied together, so that’s why we’ve branched out now. We’re not only doing substance abuse prevention but all kinds of other things that promote wellness in communities and with families.”

He said PACE continues to grow and expand services ties with organizations in the vast counties it serves.

“They can coordinate services and work together to figure out what needs to be done, what resources we are lacking and see if we can find ways to fill those gaps and resources and do whatever it takes to support communities and families,” he said.

Magney said PACE also sends a monthly newsletter to around 100 subscribers, discussing topics like substance use issues and emerging drug use.



Michael Magney in the PACE Coalition office, which is full of brochures with information about drug treatment. Photo taken Jan. 10, 2025.

➤ see *PACE*, page 39



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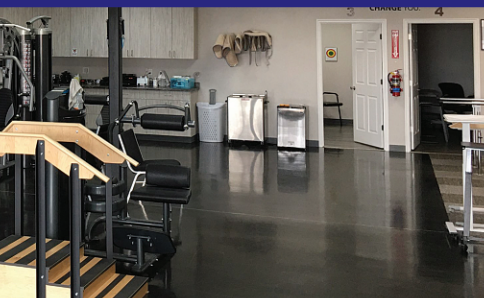
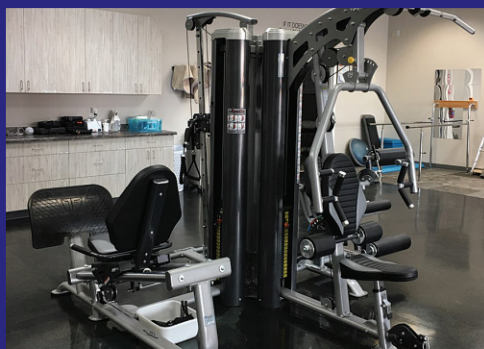
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Independence Drug is only independent pharmacy in Elko area

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Independence Drug opened in October as the only independently owned pharmacy in the Elko area.

Pharmacist Camerin Passey said Independence Drug is a self-pay pharmacy.

“We don’t take any insurance or discount cards,” he said. “We found that bypassing the insurance oftentimes allows us to pass those savings on to the customers.”

He said the team at Independence began at another pharmacy in Spring Creek.

“We were all working out at The Pill Box in Spring Creek before,” Passey said. When that pharmacy closed, he and wife Brittany Passey decided to fill in the gap.

“We’ve had to add some suppliers, which has actually been a good thing, because it’s lowered a lot of our prices. We’re simply going the right direction. We got



Independence Drug's Elko shop.

some new patients,” he said.

“I know it would be a good opportunity to expand out into

Spring Creek eventually — but it’ll just take some time to know when that’ll be a possibility for

us. For now, we’re just looking forward to serving Elko and Spring Creek from here,” he said.

Heart and Hope program aims to educate, prevent domestic violence

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — The Heart and Hope Family Violence Intervention Program provides a safe place for families in Elko to navigate difficult domestic situations.

Program Coordinator Julie Woodbury said it started when the Elko County Extension Office held a community needs assessment in 2010 asking residents about their quality of life.

“When it came to serving children, youth and families, residents listed preventing child abuse and neglect and preventing domestic violence as top concerns,” she said.

So, in 2015, the extension office started a nine-week community education program, focused on strengthening family relationships.

“We look at what the research says, how domestic violence may impact both the parent victim and children who are exposed to

domestic violence — and what helps them cope, what builds resiliency and what instills hope that there is a positive path forward after experiencing domestic violence,” Woodbury said.

Throughout the program, they cover topics such as positive parenting styles, open communication, stress management and recognizing children’s emotions. Woodbury said the goal is for parents to stay calm and still be



Julie Woodbury is the Heart and Hope program coordinator.



Family Violence Intervention Program

Contact the Director's Office

701 Walnut St, Elko, NV 89801

heartandhope@unr.edu

Office: (775) 738-1990

Hours: 8 a.m. to 5 p.m., Monday-Friday (PT)

a positive influence on their children, even when they are experiencing domestic stress.

“For children, it’s a lot of social and emotional skill-building activities. So, there’s a focus on emotions, recognizing what they are, how they feel inside of themselves — but then also, how do different emotions look within someone else?”

She said children also learn to develop a sense of empathy, “understanding that this is what another person is feeling and when are times that I might have felt something similar and what is a kind response to that expressed feeling in someone else.”

They discuss friendship and problem-solving with children, too, she added.

“As children get older, into youth and teens, there’s an emphasis, again, on stress management and healthy relationships,” both platonic and romantic, she noted.

“Then, we move into teen dating violence prevention discussions,” she said.

“I would say the ultimate goal of this program is to break the cycle of domestic violence, so that the children in the program who have been exposed to domestic violence grow into adults who are neither victims nor perpetrators of domestic violence because they have developed those healthy relationship skills,” Woodbury said.

Also, for the parents, the program allows them to “strengthen that relationship with their

children, so they are comfortable talking about important issues when they come up in the family and working through problems.”

“We know that all families experience stress and go through challenges,” she said. “The parents can set the tone of how the family responds to those stressors and challenges by the ways that they engage with their children.”

“We have served 52 families in Elko and that includes approximately 60 adults and 130 children,” she said.

“If there’s room, we are hoping to expand this program throughout this state,” she added.

The curriculum is being prepared so it could be used to train leaders in other communities for their own domestic violence intervention programs, she said.

“Nevada is a state where, oftentimes, it ranks highest in the statistics of how many people have been exposed to domestic violence,” Woodbury noted. “So, we know nationally, 33% of women and 25% of men have experienced severe physical violence by an intimate partner in their lifetime. We know that one in four children are exposed to at least one form of domestic violence in their lifetime.”

Also, according to a Youth Risk Behavior Survey in 2023, “about 20% of high school students in Elko, Eureka and White Pine counties reported that, yes, they have seen an adult or another caregiver in their home, slap, hit, kick, punch or beat each other.”

“Nevada is a state where, oftentimes, it ranks highest in the statistics of how many people have been exposed to domestic violence.”

JULIE WOODBURY, Heart and Hope program coordinator

According to Nevada Crime Statistics, “in 2024 it was 281 cases and approximately 170 children were present,” she added.

“I would say that the ultimate goal is strengthening the protective factors that we know help families move through the trauma of

experiencing domestic violence,” Woodbury said. Those factors include a stable household, positive parent-child interactions and strong social/emotional skills, she noted.

“So, we know it is here in our community — and we want to provide those protective factors that encourage healthy relationships within the family, so that families are free from violence,” she said.

“If the program can provide those protective factors, it’s putting the family on a positive trajectory away from domestic violence and toward healthy living and thriving in their family and in their community.”

Heart and Hope sessions will occur this spring every Tuesday, starting March 4 and running until May 6. Sessions take place from 5:30 to 7:30 p.m. To register, visit their website (extension.unr.edu/heart-hope). To contact Woodbury, call 775-340-8360 or email jwoodbury@unr.edu.

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Nevada Health Centers adds staff to expand behavioral health services



The Nevada Health Centers behavioral health team includes, from left, Sylina Holmes, licensed clinical social worker; Dolly Alejandro-Wilson, the behavioral health case coordinator; and Lisa Pacheco, social services coordinator.

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Nevada Health Centers is expanding its behavioral health services with new staff members at the Elko Family Medical and Dental Center.

“Previously, patients were required to have a medical visit to see a primary care doctor or connect with a behavioral health appointment,” Carrie Tallman, the marketing communications manager, said. “That’s no longer in place. So what that means is someone who is not even one of our patients, who maybe sees someone else for the different practices at their primary doctor, can come and see us for their behavioral health needs.”

She said the service started two or three years ago and was partly funded by the city of Elko to attract more medical professionals.

“It’s hard to recruit providers in general — but especially to rural towns, that’s kind of an extra hoop to jump through sometimes.”

CARRIE TALLMAN, marketing communications manager

“It’s hard to recruit providers in general — but especially to rural towns, that’s kind of an extra hoop to jump through sometimes,” Tallman said.

“We offered behavioral health visits, but they were through Telehealth. We had a number of professionals in Las Vegas who they could connect to through Telehealth — but we have heard loud and clear that people want boots on the ground and to be there having a one-on-one visit in an office setting,” Tallman said.

Nevada Health Centers

Marketing Outreach Specialist Caleb Tapia explained the roles of their new recruits.

“We have our new licensed clinical social worker” — Sylina Holmes, Tapia explained. “She’s seeing patients regularly through handoffs,” Tapia said.

“We also have our behavioral health case coordinator” — Dolly Alejandro-Wilson. She manages “a lot of the cases and some of the patients that come through and making sure that we’re meeting

➤ see *Staffing*, page 40

Nevada Health Centers receives \$150K grant from Molina Healthcare

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Nevada Health Centers Elko has received a \$150,000 grant from Molina Healthcare of Nevada, which will allow it to fill vacant licensed clinical social worker positions. So far, one position has been filled.

Nevada Health Centers organizational communications director Josh Charlebois said in an email, “sourcing and hiring behavioral health professionals and support staff can take a considerable amount of resources and the Molina

grant helps defray those expenses.”

Nevada Health Centers Elko receives its primary funding from an American Rescue Plan Act provided through the city of Elko, he said.

Molina Healthcare manages Medicare, Medicaid and a healthcare marketplace in Nevada and other states.

“The ARPA grant has funded behavioral health staff salaries, recruiting and other operating expenses. NVHC has worked in close partnership with Elko city officials over the last several years

to manage these important funds,” Charlebois said.

“We are deeply appreciative of Molina’s support to expand access to integrated healthcare in Nevada. Their grant funding — to NVHC and other entities — helps ensure that we have a strong safety net of care for Nevadans in need,” he said.

Nevada Health Centers CEO Walter Davis said, “The ability to significantly grow our behavioral health team, hire additional primary care providers and expand access to services is critical as we



The Nevada Health Centers office provides many forms of medical services, including pharmacy.

work to bridge gaps in access to behavioral health care for the populations we serve.”

Elko group provides shelter for domestic-violence victims

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Elko Committee Against Domestic Violence is a local organization which handles abuse situations by providing confidential services.

Tara, whom the Elko Daily Free Press chose to not fully identify, explained how the group offers shelter to victims through its Harbor House.

“We have to talk to the victim who is in need and do an assessment and then go from there, talk to the director and our team and see if they qualify,” Tara said. “So, it’s a case-by-case basis and we have to talk to them directly to find out what’s going on in their situation.”

While the group does not have licensed therapists on staff, it does run an active peer

counseling program.

“If somebody wants to come in and talk about what’s going on in their life, their situation, then we are open to having them come in and sit down and talk with us, discuss things, help them try to figure out where to go. Talking it out sometimes is very helpful,” Tara explained. “A lot of people just want to do that. They just want to have somebody listen.”

In addition, the group is setting up a support group, Tara said. “We just need to get a curriculum set up and a place to have it.”

The group also advocates for seniors in dangerous situations through its Elder Abuse Services.

“If it’s necessary to call Adult Protective Services, we’ll do that. We’ll go in and if they need help, if they qualify for shelter, if that’s a possibility, we will help them

fill out a protective order, just like any victim. We advocate for them, just like we would anyone else,” Tara said. The group also extends into legal advocacy. “We don’t have an attorney on staff, but we can give legal advice. As far as what we can help them do legally is fill out a protective order, submit it to the courthouse for them, notify them if it’s been approved or not approved,” she said.

“We go to court with them as a support person,” Tara added. “If they have a temporary protection order hearing and extension hearing, if there are criminal charges brought against the perpetrator, then we will go with them to all of their court hearings if they want someone there with them.”

In addition, someone will go with a client “if they have an

HOW TO REACH THE GROUP

Those in need of assistance or protection can reach the Elko Committee Against Domestic Violence by calling 775-738-6524 or going to its website at www.cadvelko.org. In addition, a 24-hour hotline can be reached at 775-738-9454.

interview with law enforcement or something like that,” she said.

“Eventually we would like to get transitional housing,” she said. However, “that takes a lot of funding and a lot of work. We just don’t have the funding to have something like that set in place. But that is sort of our long-term goal, to get transitional housing in the future, so we have that available to people who would qualify for it.”



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Alliance offers mental health services in Elko, across Nevada

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — The National Alliance on Mental Illness offers state-wide services in Elko and across Nevada. Thanks to the efforts of a local affiliate, the alliance brings resources such as crisis lines and recovery support groups to the Elko community.

The alliance has a national leader and each state has affiliates, NAMI Nevada Executive Director Robin Reedy said. Reedy works out of Reno but travels throughout Nevada. In addition, Nevada has four geographic affiliates, with Elko's being NAMI Northeastern Nevada. "They are the ones that do the support groups and the education classes," Reedy said.

"We work with them to make sure, as a state organization, that they have facilitators and teachers for all the classes they need and all the tools they need to run their organizations."

"We're here to advocate, educate and support people who live with a mental health condition," Reedy said.

"The biggest thing that we're doing locally is support groups for peers and also family members or loved ones of people with mental illness," Haley Ragland, program coordinator for NAMI Northeastern Nevada, said.

"We are currently also hiring and training peer recovery support specialist interns to ultimately become peer recovery support specialists certified, as well as community health workers to hopefully work in the area," Ragland said.

"In those support groups, more importantly than anything else, is they're meeting other people with the same lived experience and being able to get guidance from those people of what they've been



A NAMI booth at the Veterans' Resource Fair in Elko City Park in 2024.

through and what works and what doesn't and who's good in the area to go see and what to do," Reedy said.

"Those support groups really give the grassroots element of our organization," Reedy said.

The position of a peer recovery support specialist is new to Nevada, Reedy noted. "It's been going on for the last couple of years. They are people who live with lived experience — whether it's addictions or mental health — and they go through classes to make sure that they're capable of helping other individuals. It's that unique lived experience that makes people listen to them."

Ragland explained how, to become a facilitator for the Connection Recovery Support Group, hopeful volunteers can take a two-day class.

"Then, those facilitators work in tandem to lead groups. Basically, everybody comes and checks in to see how everybody's doing that week and then helps whoever is struggling the most," she said.

"We kind of talk through what they're going through, what's going on, what they can do to help. Everybody can give an opinion about what's worked for them and bounce ideas off each other. It's really a support group of people

with the same lived experience who have been there," Ragland said.

"It's very structured. It's evidence-based," Reedy said. "It's not just people talking about their problems."

In addition to running these support systems, Reedy explained how NAMI Nevada is a recent recipient of a "988 Grant," which promotes the 988 phone number for people to dial when in a mental health crisis. "It will help them navigate services. It will get them to crisis services," she said.

"We also want them to let us know how that 988 system is working and what is good about it and what is bad about it, so we can then communicate to the state and the providers to make sure that it's doing the job it needs to be doing," Reedy said.

Reedy explained why NAMI holds fundraiser walks, such as one in Elko City Park last October.

"It's a tool to advertise NAMI, to advertise services, to get people who care about mental health together in one place. We get providers to come and have tables and have any kind of information on navigation of services in the state — which can be very complex, because there's so few and it's so hard to get in," Reedy said.

"Some people come to celebrate

lost loved ones. Other people come to celebrate the recovery of individuals within their family. And it's a way of showing support for people who are going through mental health conditions. But it's also a fundraiser," Reedy said.

"Peer recovery support specialists, having the support groups, having the education classes, family and family, ending the silence — all of these things are free to the people who use them. But they always cost money, so that's the fundraising part of it. It costs money for us to put them on but we provide them at no cost to the attendees," Reedy said.

"The challenges have been the same for the eight years that I've been doing it," Reedy said of her work with NAMI.

"While there's been improvement and we've seen progress, we're still behind all the other states dead last in providing mental health services to the citizens of this state," she said.

"We still find that housing is one of the No. 1 issues. If you have a mental health condition, you know it's going to be really tough to find housing," Reedy noted. "It's one of the issues that we talk about the most at the Legislature, getting housing for those people with disabilities."

The organization also argues for parity and for "overcoming the stigma," Reedy added.

So many people still seem to think that if they talk about it, it's going to bring it on themselves and their family," Reedy said. "We're trying to let people know that you should be talking about it just the way you talk about having a cold. It really is something that needs to be openly discussed amongst everyone in your workplace and in your family. It's part of the body."



Director Billie Jean Crawford, at her Horizon Hospice office in Elko on Oct. 31, 2023, said money raised from the Souper Bowl remains in the community.

Horizon Hospice plans Souper Bowl fundraiser in April

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — This spring, Horizon Hospice is hosting its 19th annual Souper Bowl fundraiser in the Elko Convention Center on April 18, from 6:30 to 9:30 p.m.

“All the proceeds stay right in Elko to Horizon Hospice,” Director Billie Jean Crawford said. “Horizon Hospice has been doing end-of-life care for 36 years in this area. We provide care, respite, if they need pain medication, we pay for all of that to help care for individuals at the end of their lives. And we don’t charge the families anything.”

The fundraiser aims to cover operating costs, which Crawford said will go “towards everything that Horizon Hospice does — operating costs, equipment for family, end-of-life guidance if they need pain medication.”

“It also umbrellas under our grief center, which, we provide free grief support twice a month for everybody in our community. So it covers those materials, the food that we feed them at night and everything,” she said.

“It’s not funded, it’s not a Medicare Hospice, it’s an all-volunteer hospice. Everything that we provide for these families, there’s no charge to their insurance. They can take advantage of Horizon Hospice no matter what their social or economic status is, if they have insurance or if they don’t, we will help anyone,” she said.

“It sells out pretty quick, so we need table sponsors or bigger sponsors. So if any business or if a couple businesses want to go together and be a gold or bronze sponsor, they can call our office and get more information on that.”

For details, call 775-778-0612.

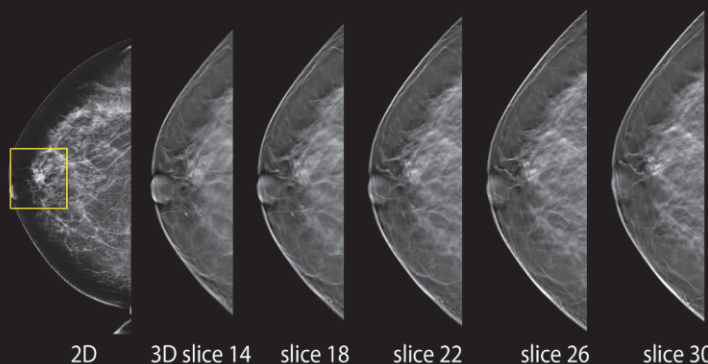


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UCP launches new program for disabled community in Elko

LYDIA SNOW
LSNOW@ELKODAILY.COM

LKO — United Cerebral Palsy is branching out into more options for supporting Elko's disabled community.

Regional manager Daniel Chapin said the Elko organization has launched a program called the Life Enrichment Center, which aims to help individuals with intellectual disabilities achieve their goals.

"We have the community come in and teach classes and we go out into the community as often as possible," he said.

Skills classes are also provided, during which students can roleplay as a cashier or a customer.

"We practice being polite and courteous to people. We practice mock interviews, so we know what it's like to go out and have an interview. We practice switching our communication to where you talk to a supervisor versus talking to a family member — just different skills that they can actually use when they get out in the community," he explained.

"We have individuals work on their own enterprises where they can sell products that they make here in the center. It's a great program. We're creating it right now and it's going really well," he said.

"Someone can learn how to use a cash register," he said, "but if they don't know how to smile, be polite, be patient and be empathetic to their customer, it's really difficult."

He said the organization is putting together a music corner in the Life Enrichment Center, where instruments such as keyboards, a guitar, a piano or a drum set would be in place.

In addition, the center plans to introduce an audiovisual corner and a sensory corner. Since many people who visit the center are autistic, Chapin said organizers want to meet those sensory needs. Keyboards, large-screen televisions, bookshelves and textured fabrics would all be useful objects, he said.

"A PA system would be incredible. The guys love to stand in front of a microphone and sing or recite a poem that they know or talk about their interests," Chapin noted.

"We also acquired a wheelchair-accessible van. So, we can take individuals who use



The interior of the United Cerebral Palsy thrift store in Elko.



The UCP Thrift Store is located at 450 W. Silver St. in Elko.

GOOGLE

wheelchairs out into the community. A lot of times, they go places that they've never been before. That's really cool for the individuals that we support," he said.

"We try to get our grants together and ask around in the community. People really step up in this community. They're fantastic and help us out quite a bit," he noted.

"Our main source of funding is through the state of Nevada. A lot of our funding comes through Medicaid."

Their UCP's Elko thrift store also provides financial support, as do donations from outside sources.

"We always can use extra transportation. We try to get our folks out in the community as much as possible. We have three vehicles we could use; we can always use more," Chapin said. "We would love volunteers to come down and help us out. That's always welcome. And we would love people to donate their stuff here."

Elko center helps people with disabilities navigate the system

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — Margaret Marcucci with Rural Center for Independent Living Elko and an Elko County resident of over four decades, is devoted to serving people with disabilities.

“We want them to be autonomous in that, to be able to live in their town, their network, their house,” she said.

The center is affiliated with Pacific ADA Center, which itself is a program of the Center on Disability at the Public Health Institute. The Pacific Center is funded by the U.S. Department of Health and Human Services Administration for Community Living, National Institute on Disability, Independent Living, and Rehabilitation Research.

Marcucci, the Elko center’s support staff, educates disabled individuals about their legal rights. Some don’t realize they are under government protections, she said.



Marcucci

Building apartments isn’t part of the center’s focus, but helping people find out about options for apartments to move into is. Marcucci said 200 people are on the waiting list for housing assistance.

“One of my jobs is to make sure that I touch base with all my paid places that are for rent,” she said. “I talk to them to see what’s going on. I will make housing arrangements, which has helped them fill out the applications,” she explained.

“A lot of the clients, I’ll get asked to take them to Medicare or to the Social Security office or over to welfare,” guiding them so that they don’t have to be by themselves, she said.

Marcucci said the Elko center is focused on “everything having to do with the disabled.”

For example, “it has to do with assistive technology. If somebody needs hearing aids, sometimes there’s money for that. I can get most anything here. There are community resources, Social Security, SSDI, Medicaid, Medicare,” she said.

“A lot of our people don’t like going in there,” Marcucci explained. “I have no



Suite 211 at 401 Railroad St., the current office of Rural Center for Independent Living Elko.

problem going in with them,” she added.

“I’ll go with them to Medicare. I’ll help them fill out any application. I go all the time and I carry applications with me for Medicare and Medicaid. I get them in contact with people who can help them,” Marcucci said.

“I can do skill training,” she said. “We did a Rent Smart class, which is to teach how to take and budget money to pay bills to get an apartment. I have one that’s called biz class, which teaches them how to fill out job applications. I go with people to vocational rehab or to the unemployment office because, again, they don’t like to go by themselves.”

She said she also helps them with nutrition. “I have a lot of pantries that they can go to.”

“I had some friends who were having problems and they were afraid to go to a pantry. So, guess what? I put them in the car and away we went to Carlin,” Marcucci said. “We’ve actually gone to the VFW. I’ve taken people to Friends in Service Helping. There’s a pantry at the senior center where the seniors and people with disabilities, 60 or older, they qualify, they can get stuff there.”

As for Elko residents with someone in their family who needs assistance, “if they have somebody disabled, if they will get in touch with me, I always have applications,” she said. “It doesn’t matter if your mom needed something like a handrail or a grab bar. If there was money for that, no problem. I would have the paperwork and we would get it installed,” with the help of a contractor, she said.

“I have people who don’t drive and they have a disability. They need to go places. I get paid to do that, too,” she added.

“It’s part of the grant that this year we’re supposed to teach the people, the legislators, about what we need,” Marcucci said. Their area of service involves far more than just housing. Rather, it is a broad network of support systems.

Kids with disabilities can find support along with adults, she said.

“I go to Individualized Education Program meetings at the high schools. I’m an advocate. I was a special ed teacher for over 40 years. That is why I’m doing this. I walked into this job and I’m keeping this job.”



Elko VA Clinic under construction (to the left of Maurices) on Feb. 2, 2025.

VA clinic opening in Elko by end of this year

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — The Elko Junction shopping center will be home to a new Elko VA Clinic later this year.

The U.S. Department of Veterans Affairs, SCG Nevada, Braemar Construction, Meridian Pacific and GSBS Architecture are involved with the project.

Construction began last October and is projected to end in October or November.

“Anytime you’re building one of these clinics for the VA, there are a lot of technical aspects to it to make sure it’s right. There has been a lot of thought put into the design,” Jake Grandstaff, owner of Sage Construction of Bountiful, Utah, said. His firm is building the clinic under the Nevada-registered name, SCG Nevada.

“We built several of these clinics in Utah for the VA,” he said. “This is our first one in Nevada.”

Instead of having to travel to places like Salt Lake City or Reno for medical services, veterans will be able to access them in Elko at the clinic, Grandstaff said. The clinic will

host onsite group therapy sessions and doctor consultations. “It definitely simplifies a lot of stuff for the vets,” he said.

“It’s not a typical construction project. A lot more details go into it. The VA and us want to make sure we get it right for the veterans out there, so that it’s more of a comfortable feeling when they walk into one of these types of clinics than a normal clinic,” Grandstaff said.

The facility will include a blood lab, a tele-retinal area, exam rooms, consult rooms and a shared group room.

“From the outside, what we’ve done is kind of pulled the front of the building off, we’ve added a lot of structural steel to reinforce it. It’s going to have its own unique front entry,” similar to the glass-covered entrance of the VA clinic in Ogden, Utah, he said.

The entrance is designed to appear welcoming to veterans, Grandstaff said. For instance, the interior decorations include flags and government symbols. “What the VA and the architect want to do is make sure the vets know this is a place for them. So, it kind of stands out from everything else that’s

around there.”

He said Elko Junction’s property owner, Meridian Pacific, has been “great to work with and accommodate the VA.” The clinic will be at a corner of the shopping center adjacent to the Maurice’s and Ross stores.

Construction on the clinic involves careful timing, Grandstaff said. “Every exam room has a sink, for example. So, there’s a lot of plumbing. There’s a lot of extra stuff that goes into one of these builds.”

The Department of Veterans Affairs has been involved with the construction since the beginning, Grandstaff noted. The VA made the initial property negotiations with Meridian Pacific and holds weekly meetings with SCG-Nevada, Grandstaff said.

Also, he added, “they’re involved in the design. They make sure that it goes through all the departments serving with the VA — and they get their feedback and what their needs are in the clinics.

“We’re happy to serve vets. I know that the VA is excited to bring a new clinic there to serve the area, so we’re all looking forward to it getting open,” Grandstaff said.



Herlinda Sanchez stands outside Texas Oncology in San Antonio after her final chemotherapy appointment in late June.

Small-town patients with cancer face big hurdles in rural areas

CHARLOTTE HUFF
KFF HEALTH NEWS

The night before her chemotherapy, Herlinda Sanchez sets out her clothes and checks that she has everything she needs: a blanket, medications, an iPad and chargers, a small Bible and rosary, fuzzy socks, and snacks for the road.

After the 36-year-old was diagnosed with stage 3 breast cancer in December, she learned that there weren't any cancer services in her community of Del Rio, a town of 35,000 near the Texas-Mexico border.

To get treatment, she and her husband, Manuel, must drive nearly three hours east to San Antonio. So they set an alarm for 4 a.m., which allows for just enough time to roll out of bed, brush their teeth, and begin the long

drive navigating dark roads while watching for deer.

About an hour before they arrive at the cancer clinic, the couple pulls over to quickly eat fast food in the car. The break gives Herlinda time to apply ointment on the port where the needle for her chemotherapy will be inserted.

"It numbs the area, so when I get to the infusion room the needle won't hurt," she said.

For rural patients, getting cancer treatment close to home has always been difficult. But in recent years, chemotherapy deserts have expanded across the United States, with 382 rural hospitals halting services from 2014 to 2022, according to a report published this year by Chartis, a health analytics and consulting firm. In Elko, for instance, cancer care was cut years ago, but Northeastern Nevada Regional

Hospital is working to restore an oncology unit, officials have said.

Texas led that list, with 57 rural hospitals — nearly half of those statewide that had offered chemotherapy — cutting the service by 2022, according to the analysis. Rural hospitals in states like Texas, which hasn't expanded Medicaid, have been more likely to close, according to data from the Cecil G. Sheps Center for Health Services Research.

To keep the doors open, financially strapped facilities in small communities nationwide continue to shed basic health care services, like obstetrics and chemotherapy, said Michael Topchik, executive director of the Chartis Center for Rural Health.

► see *Patients*, page 20

“The data are staggering,” Topchik said. “Can you imagine feeling that sick, and having to drive an hour in each direction, or maybe more each direction, several times a week?”

Loss of chemotherapy services can signal other gaps in cancer care, such as a shortage of local specialty physicians and nurses, which is bad news for patients, said Marquita Lewis-Thames, an assistant professor at Northwestern University in Chicago whose research covers rural cancer care.

Rural patients are less likely to survive at least five years after a cancer diagnosis compared with their urban counterparts, concluded a study co-authored by Lewis-Thames and published in JAMA Network Open in 2022. While the rural-urban survival gap narrowed over the nearly 40 years researchers studied, the disparity persisted across most racial and ethnic groups, with only a few exceptions, she said.

Many cancer drugs are now given orally and can be taken at home, but some treatments for breast, colon, and other common cancers must still be administered intravenously inside a medical facility. Even distances of an hour or two each way can strain patients who already may be coping with nausea, diarrhea, and other side effects, physicians and patient advocates said.

“It’s pretty uncomfortable for some of these patients who may have bone metastases or have significant muscular pain and have to sit in the car that long and hit road bumps.”

SHIVUM AGARWAL, a family physician who practices in rural communities an hour west of Fort Worth, Texas.



Herlinda Sanchez has been making the nearly three-hour drive from her home in Del Rio, Texas, to San Antonio for chemotherapy treatments at Texas Oncology.



Herlinda Sanchez watches her son, Liam, eat breakfast as they wait outside for her chemotherapy appointment.

“It’s pretty uncomfortable for some of these patients who may have bone metastases or have significant muscular pain and have to sit in the car that long and hit road bumps,” said Shivum Agarwal, a family physician who practices in rural communities an hour west of Fort Worth, Texas.

Plus, travel can cost much more than filling the gas tank.

“Usually it requires an able-bodied family member taking off a whole day or at least half

a day from work,” Agarwal said. “So, there’s a big economic cost for the family.”

In this sense, the Sanchez family is fortunate. Herlinda’s mother drives four hours from Abilene to Del Rio to watch the couple’s youngest children, their 2-year-old twins.

Cancer infusions can last as long as eight hours on top of the travel time, causing significant financial and logistical challenges, said

➤ see *Patients*, page 21



Herlinda Sanchez hugs her aunt, Bernice Anderson, outside Texas Oncology in San Antonio after celebrating Sanchez's final chemotherapy appointment.

Patients *continued from page 20*

Erin Ercoine, executive director of the San Antonio-based ThriveWell Cancer Foundation. The nonprofit provides adult patients with financial assistance, including for gaps in insurance and transportation-related costs. It has helped cover gasoline for Sanchez, who received her final round of chemotherapy in late June. The financial assistance will also pay for her hotel when she travels for breast surgery this month.

Not all rural hospitals are ending chemotherapy. Childress Regional Medical Center, a 39-bed hospital in West Texas, is constructing a 6,000-square-foot center for patients who need infusions for cancer and other diagnoses, including multiple sclerosis and rheumatology.

The infusion area, which started with two chairs in 2013 and now has four, will grow to 10 chairs and have more patient privacy when it opens next year. The next-nearest infusion center in this sprawling region is an

hour or more away, which discourages some patients from seeking care, said Childress' CEO, Holly Holcomb.

"We've had a handful of patients say, 'If you can't do it here, I'm not doing it,'" Holcomb said. She credits the federal 340B drug discount program for enabling the remote hospital to provide infusion drugs.

Hospitals that qualify for 340B can buy outpatient drugs at steep discounts. The program provides "a huge kickstand for rural hospitals," said Topchik, of Chartis Center. Hospitals can use the savings to buoy or expand services provided to the community, he said.

But some patients are not daunted by long drives and travel costs.

"I'm from the country, so small is better — it's just more personable," said Dennis Woodward, 69, who lives in Woodson, Texas. He has a type of non-Hodgkin lymphoma and chooses to make a two-hour drive to Childress. He had first visited an oncology clinic in Abilene about an hour away.

The clinicians were nice, but "I felt like a number," he said. After his first appointment at Childress this year, his oncologist, Fred Hardwicke, walked him over to meet the nurses who would administer the medicine, Woodward recalled.

Most Fridays during Herlinda Sanchez's chemotherapy, Manuel would nap in the car. But during her final treatment in June, he stayed nearby, counting down the hours.

Several family members joined Herlinda when she rang the bell later that afternoon to signal the end of her treatment.

"I don't want to be in San Antonio no more," said Herlinda, a mother of four who does administrative work at Laughlin Air Force Base near Del Rio. "I'm looking forward to the break."

KFF Health News is a national newsroom that produces in-depth journalism about health issues and is one of the core operating programs at KFF— an independent source of health policy research, polling and journalism.

ELKO MEDICAL PROFESSIONALS PROFILES



BEHAVIORAL HEALTH



JESSICA VAN VALKENBURG,
PMHNP-BC

Northeastern Nevada Behavioral Health
2001 Errecart Blvd, Elko, NV 89801, (775) 748-2018

School: Undergraduate: University of Wyoming – Bachelor of Science, Nursing; Graduate: University of Wyoming – Psychiatric

Mental Health Nurse Practitioner; Doctorate of Nursing Practice

Board Certification: American Nurses Credentialing Center

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Diagnosis & treatment of mental health & substance use disorders • Medication management • Individual therapy • Group & family therapy • Patient & family education

CARDIOLOGY



ELIZABETH BURLEW,
MSN, APRN, ACNP

Elko Cardiology Associates

1775 Browning Way, Suite 104, Elko, NV 89801
(775) 738-5100

Medical School and Location: University of Michigan, Ann Arbor; University of Tennessee Health Science Center, Memphis, TN.

Board Certifications: American Nurses Credentialing Center: Acute Care

Managed Care/Insurance Accepted: Most accepted, including Medicare. Please call to verify.

Scope of Practice: General and Preventive Cardiology. CV risk assessment. Treadmill exercise testing.

CARDIOLOGY



JANINE ANDERSON,
APRN, FNP-BC

Northeastern Nevada Heart Center
1995 Errecart Blvd, Suite 102, Elko, NV 89801
(775) 748-0704

School: Great Basin College – RN & BSN

University of Nevada, Las Vegas – Master's Degree

Board Certification: American Nurses Credentialing Center

Managed Care/Insurance Accepted: Most insurance plans

including Medicare, Medicaid and VA

Services: • Preventive and general cardiology • Screenings for peripheral artery disease

• Lipid management • Hypertension management • Heart failure management

• Treatments for cardiac arrhythmia; atrial fibrillation • Follow-up post-PCI/stent placement

CARDIOLOGY



GERSON V. FIGUEROA,
MD

Northeastern Nevada Heart Center

1995 Errecart Blvd, Suite 102, Elko, NV 89801, (775) 748-0704

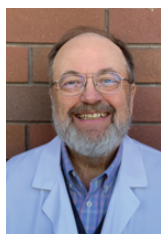
Medical School and Location: Medical School: University of El Salvador; Residency: East Tennessee State University, University of Washington; Fellowships: Mount Sinai Medical Center – Interventional Cardiology

Board Certifications: American Board of Internal Medicine

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Diagnostic & Interventional Cardiac Catheterizations • Cardioversion • Implanted Cardiac Monitors & Pacemakers • Peripheral Angiography • Stress Testing & Echocardiography • Transesophageal Echocardiograms (TEE) • Available for General Cardiology Consultations

CARDIOLOGY



BRAD S. BURLEW,
MD, FACC, FCCP

Elko Cardiology Associates

1775 Browning Way, Suite 104, Elko, NV 89801
(775) 738-5100

Medical School and Location: Northwestern, Chicago, IL; Residency: Henry Ford, Detroit (Chief Resident); Fellowship Cardiology/Critical Care/Research: Henry Ford,

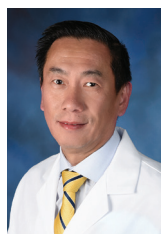
Detroit (Chief Fellow)

Board Certifications: Internal Medicine; Cardiovascular Disease; Managed Care/Insurance Accepted: Most accepted, including Medicare. Please call to verify.

Scope of Practice: General, Preventive and Adult Congenital Cardiology.

Holter monitoring. CV risk assessment. Echocardiography, including stress, by RDCS. Treadmill exercise testing.

CARDIOLOGY



THOMAS N. TRUONG,
DO

Northeastern Nevada Heart Center

1995 Errecart Blvd, Suite 102, Elko, NV 89801, (775) 748-0705

Medical School and Location: Medical School: Kansas City University of Medicine & Biosciences; Residency: University of Oklahoma College of Medicine; Fellowships: Oklahoma State University – General Cardiology, Largo Medical Center –

Interventional Cardiology

Board Certifications: American Osteopathic Board of Internal Medicine

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Diagnostic & Interventional Cardiac Catheterizations • Cardioversion • Implanted Cardiac Monitors & Pacemakers • Peripheral Angiography • Stress Testing & Echocardiography • Transesophageal Echocardiograms (TEE) • Available for General Cardiology Consultations

ELKO MEDICAL PROFESSIONALS PROFILES



DENTIST



DR. DIEHL

Marina Hills Dental

282 Spring Creek Pkwy., Spring Creek, NV 89815
(775) 738-3110

Medical school/location: University of Nevada Las Vegas (UNLV)

Managed Care/Insurance Accepted: Delta Dental, Metlife, Anthem BCBS, Aenta, Guardian, Cigna, Health Scope, UMR, GEHA, Ameritas, Reliance Standard, UC Health, Assurant, KCL Group, United Concordia, United Health Care

Special Services: Dentures, Implants, Endodontics, Cosmetic Dentistry, Veneers, Smile Design

ESTHETICIAN



JOSIE D. CERVANTES,

MSN, APRN, FNP-C

Elko Replenish Med Spa

1775 Browning Way, Suite 102
Elko, NV 89801
(775) 400-1660

Medical School/Location: The University of Texas Medical Branch at Galveston

Board Certifications: MSN, APRN, FNP-C

Managed Care/Insurance Accepted: Cash only, Forms for reimbursement.

Special Services: IV Vitamin Hydration Therapy, Female Hormone Replacement Therapy, Male Hormone Replacement Therapy, Weight Loss Therapy, Botox Injection Therapy and In Clinic Laboratory Blood Draw.

DENTIST



DR. RUSS DIEHL

Marina Hills Dental

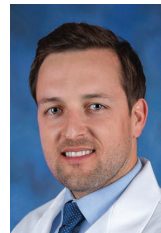
282 Spring Creek Pkwy., Spring Creek, NV 89815
(775) 738-3110

Medical school/location: UNLV School of Dental Medicine, 1001 Shadow Lane, Las Vegas, NV

Managed Care/Insurance Accepted: Accept Most Insurances

Special Services: Family Dentistry, root canals, cosmetics, implants, braces.

FAMILY PRACTICE



ALEX DUTSON,
DO

Northeastern Nevada Primary Care

1995 Errecart Blvd, Suite 102, Elko, NV 89801
(775) 777-2061

Medical School: Touro University Nevada

Residency: Community Memorial Health System, Ventura, CA

Board Certification: American Board of Family Medicine

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Sick and well exams for all ages • Physicals for work, school, scouts, etc.

• Treatment of chronic diseases (arthritis, COPD, etc.) • Diabetes management

• Treatment of thyroid disorders • Management of high blood pressure

• Women's wellness exams • Aging support • Preventive medicine

DENTIST



DR. WEBER

Marina Hills Dental

282 Spring Creek Pkwy., Spring Creek, NV 89815
(775) 738-3110

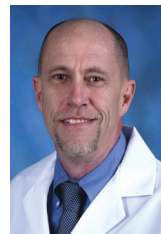
Medical school/location: University of Nevada Las Vegas (UNLV)

Managed Care/Insurance Accepted: Delta Dental, Metlife, Anthem BCBS, Aenta, Guardian, Cigna, Health Scope,

UMR, GEHA, Ameritas, Reliance Standard, UC Health, Assurant, KCL Group, United Concordia, United Health Care

Special Services: Dentures, Implants, Endodontics, Cosmetic Dentistry, Veneers, Smile Design

GENERAL SURGERY



KEVIN G. HIBBETT,
MD

Northeastern Nevada Surgery

1995 Errecart Blvd, Suite 102, Elko, NV 89801
(775) 777-1729

MEDICAL SCHOOL: Medical School: University of Pennsylvania; Residency: Lehigh Valley Hospital, Allentown, PA

Residency: Lehigh Valley Hospital, Allentown, PA

Board Certification: American Board of Surgery

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid and VA

Procedures Include: Appendectomy, Bowel surgery, Endoscopy, Gallbladder surgery, Hernia repair, Reflux surgery, Skin lesion excision, Thyroid & parathyroid surgery, Treatment of colon and bowels cancers, Specializing in minimally-invasive surgery

ELKO MEDICAL PROFESSIONALS PROFILES



OBSTETRICS/GYNECOLOGY



CALLIE BLAIR, DO, FACOG

Northeastern Nevada Women's Health

1995 Errecart, Suite 202, Elko, NV 89801
(775) 748-0701

Medical School: Midwestern University, Arizona College of Osteopathic Medicine

Residency: Kern Medical Center, Bakersfield, CA

Board Certification: American Board of Obstetrics & Gynecology

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Contraceptive management • Prenatal care (routine & high risk)
• Deliveries (standard & C-section) • Gynecological exams • Hysterectomies
• Endometrial ablations • Treatment of menstrual disorders
• Treatment of menopausal symptoms • Treatment of ovarian cysts

OPTOMETRIST



THOMAS D. GALL, OD

Total Eyecare

2209 N 5th St., Elko, NV 89801
(775) 738-8491

Optometry School & Credentials: AZ College of Optometry, Glendale, AZ-Doctor of Optometry (OD), Nevada Board of Optometry-Certified to Administer or Prescribe

Therapeutic Pharmaceutical Agents; Certified in the Treatment and Management of Ocular Disease.

Special Services: Optomap Retinal Scanning, Retinal Evaluation with OCT, Contact Lens fitting (Regular & Specialty), OptiLight Dry Eye Treatments, Optical Department offering a wide range of frames and sunglasses, including designer brands.

OBSTETRICS/GYNECOLOGY



ALLYSON C. WALDRON, DNP, APRN, FNP-BC

Northeastern Nevada Women's Health

1995 Errecart Blvd, Suite 202, Elko, NV 89801, (775) 748-0701

Medical School: Undergraduate: College of Southern Nevada – Associate of Applied Science, Nursing; Great Basin College – Bachelor of Science – Nursing; Graduate: University of Nevada, Las Vegas – Master of Science, Family Nurse Practitioner; Doctorate of Nursing Practice

Board Certification: American Nurses Credentialing Center

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Routine Well Exams • Referrals for Diagnostic Screenings or Specialized Care • Gynecological Exams • Cervical Cancer Screenings • Breast Cancer Screenings • Contraceptive Management & Family Planning

OPTOMETRIST



SPENCER J. MCCONKIE, OD

Total Eyecare

2209 N 5th St., Elko, NV 89801
(775) 738-8491

Optometry School & Credentials: Southern College of Optometry, Memphis, TN-Doctor of Optometry (OD), Nevada Board of Optometry-Certified to Administer or Prescribe

Therapeutic Pharmaceutical Agents; Certified in the Treatment of Glaucoma; Certified in Treatment and Management of Ocular Disease.

Special Services: Optomap Retinal Scanning, Retinal Evaluation with OCT, Contact Lens fitting (Regular & Specialty), OptiLight Dry Eye Treatments, Optical Department offering a wide range of frames and sunglasses, including designer brands.

OPTOMETRIST



COLBY B. CURTIS, OD

Total Eyecare

2209 N. 5th St., Elko, NV 89801
(775) 738-8491

Optometry School & Credentials: Southern College of Optometry-Memphis, TN-Doctor of Optometry (OD), Nevada Board of Optometry-Certified to Administer or Prescribe Therapeutic Pharmaceutical Agents; Certified in the Treatment of

Glaucoma; Certified in Treatment and Management of Ocular Disease.

Special Services: Optomap Retinal Scanning, Retinal Evaluation with OCT, Contact Lens fitting (Regular & Specialty), OptiLight Dry Eye Treatments, Optical Department offering a wide range of frames and sunglasses, including designer brands.

OPTOMETRIST



MICAH L. WILLIAMS, OD

Total Eyecare

2209 N. 5th St., Elko, NV 89801
(775) 738-8491

Optometry School & Credentials: Massachusetts College of Pharmacy and Health Science, School of Optometry-Doctor of Optometry (OD), Nevada Board of Optometry-Certified to

Administer or Prescribe Therapeutic Pharmaceutical Agents; Certified in the Treatment of Glaucoma; Certified in Treatment and Management of Ocular Disease.

Special Services: Optomap Retinal Scanning, Retinal Evaluation with OCT, Contact Lens fitting (Regular & Specialty), OptiLight Dry Eye Treatments, Optical Department offering a wide range of frames and sunglasses, including designer brands.

ELKO MEDICAL PROFESSIONALS PROFILES



ORTHOPEDICS



CHAD EDWARDS, DO

Pinion Orthopedics

1775 Browning Way, Suite 201, Elko, NV 89801
(775) 777-3535

Medical School: Midwestern University, Glendale, AZ
Residency: Larkin Community Hospital, Miami, FL
Board Certification: American Osteopathic Board of Orthopedic Surgery

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid & VA

Services: • Total Joint Replacements for Knees, Hips & Shoulders • Arthroscopy / Minimally-Invasive Surgery • Sports Medicine • ACL Reconstruction • Rotator Cuff Repair • Carpal Tunnel Release • Trigger Finger Release • Treatments for Sprains, Strains & Fractures

ORTHOPEDICS



TIMOTHY PHIPPS, DO

Pinion Orthopedics

1775 Browning Way, Suite 201, Elko, NV 89801
(775) 777-3535

Medical School & Residency: University of Health Science, Kansas City, MO
Board Certifications: American Osteopathic Board of Orthopedic Surgery

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid and VA

Special Services: • Knee and hip replacements • ACL reconstruction • Treatments for strains and sprains • Sports medicine • Hand surgery • Treatments for arthritis

ORTHOPEDICS



STEVEN GUNNELL, DO

Pinion Orthopedics

1775 Browning Way, Suite 201, Elko, NV 89801
(775) 777-3535

Medical School: University of Health Science, Kansas City, MO
Residency: Medical Center of Independence, MO
Board Certifications: American Osteopathic Board of

Orthopedic Surgery

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid and VA

Special Services: • Knee and hip replacements • Shoulder, wrist and knee arthroscopy • ACL Reconstruction

PAIN MANAGEMENT



STAR CHENOWETH, PA-C

Elko Spine and Rehabilitation

2219 N. 5th St., Elko, NV 89801
(775) 777-9669

Medical School and Location: University of Washington
Board Certifications: NCCPA
Managed Care/Insurance Accepted: Most accepted

(including Workers Comp and VA)

Special Services: Specializing in musculoskeletal medicine, spinal, joint, tendon injections, and medication management.

ORTHOPEDICS



RUSS MORRILL, PA-C

Pinion Orthopedics

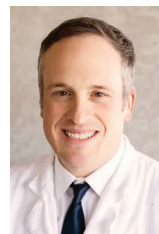
1775 Browning Way, Suite 201, Elko, NV 89801
(775) 777-3535

Education: Master of Medical Science - Physician Assistant from Saint Louis University, MO

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid and VA

Special Services: • Treatment of torn ACL and Meniscus • Treatment of Carpal Tunnel Syndrome • Sports Medicine - Rotator Cuff Repair - Trigger Finger Release - Treatments for Arthritis - Treatments for Sprains, Strains & Fractures

PAIN MANAGEMENT



DR. ANDREW GEISLER, M.D.

Elko Spine and Rehabilitation

2219 N. 5th St., Elko, NV 89801
(775) 777-9669

Board Certifications: Physiatrist, Physical Medicine and Rehabilitation, Electrodiagnostic Medicine, Brain Injury Medicine, Musculoskeletal Ultrasonography, Independent Medical Examiner

Special Services: Chronic pain medication management and various interventional pain procedures such as guided peripheral joint injections, nerve blocks, radiofrequency ablation, epidural steroid injections, and spinal cord stimulation

ELKO MEDICAL PROFESSIONALS PROFILES



PAIN MANAGEMENT



DR. CHAD JENSEN, D.O.

Elko Spine and Rehabilitation

2219 N. 5th St., Elko, NV 89801
(775) 777-9669

Medical School and Location: Des Moines University
Board Certifications: Pain Medicine and Anesthesiology
Managed Care/Insurance Accepted: Most accepted (including work comp and VA)

Special Services: Chronic pain medication management and various interventional pain procedures such as guided peripheral joint injections, nerve blocks, radiofrequency ablation, epidural steroid injections, peripheral nerve stimulation, and spinal cord stimulation.

PHYSICAL THERAPY



THOMAS LAND,
PT, DPT

First Choice Physical Therapy

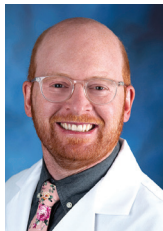
248 Country Club Pkwy, Spring Creek
NV, 89815 & 617 Main, Carlin NV, 89822
(775) 777-1276 (both locations)

Medical School and Location: Franklin Pierce University, Goodyear, Arizona

Managed Care/Insurance Accepted: Most insurance plans including Medicare, Medicaid, and VA

Special Services: Sports Rehab - Strength and Sports Performance
– Spine Pain – Post OP Rehab

PEDIATRICS



ZACHARY FEATHERSTONE, D.O.

Northeastern Nevada Pediatrics

1995 Errecart, Suite 202, Elko, NV 89801
(775) 738-3654

Medical School: Pacific Northwest University of Health Sciences; Residency: University of Nevada, Las Vegas, School of Medicine; Fellowship: Gallaudet University

Board Certifications: American Board of Pediatrics

Managed Care/Insurance Accepted: Most insurance plans including Medicaid

Services: • Total health management for infants, children & teens
• Immunizations • Treatment of illnesses, injuries & behavioral issues
• Nutrition & exercise consultations • Well-visits & check-ups

PHYSICAL THERAPY



SAMUEL MOORE,
PT, DPT

First Choice Physical Therapy

2072 Idaho Street, Elko, NV
(775) 777-1276 Option 2

School: University of Nevada, Las Vegas (UNLV)

Managed Care/Insurance Accepted: Medicare, Medicaid, VA, Auto, and most medial plans

Services: Spine Care, Pain Management, Post-operative rehabilitation, Orthopedics/ Sports, Lymphedema Management, Wound Care, Vertigo/BPPV, TMJ, Balance/Fall Prevention, Trigger Point, and Dry Needling

PHYSICAL THERAPY



JASON CUTLER

First Choice Physical Therapy

2072 Idaho Street Elko Nevada
(775) 777-1276

Medical School and Location: University of Utah

Managed Care/Insurance Accepted: Most insurance plans including medicare, medicaid, and VA

Special Services: Pediatrics, Neuro Rehab, orthopedics, vertigo, geriatric, wound care, manual therapy

PHYSICAL THERAPY



JOHN SNYDER

First Choice Physical Therapy

2072 Idaho Street, Elko, NV 89801
(775) 777-1276

School: Midwestern University Downer's Grove

Board Certifications: NBCOT

Managed Care/Insurance Accepted:

Most Insurance plans including Medicare, Medicaid and VA
Services: ACL Certified

ELKO MEDICAL PROFESSIONALS PROFILES



PHYSICAL THERAPY



DALLAN VALLE,
PT, DPT

First Choice Physical Therapy
248 Country Club Pkwy, Spring Creek, NV 89815
(775) 777-1276 Option 1

School: Touro University, Henderson, NV
Managed Care/Insurance Accepted:
Most Insurance Plans including Medicare, Medicaid, and VA

Services: Pediatrics, Spine Care, Pain Management, Post-Operative Rehabilitation, Orthopedics/Sports, Vertigo/BPPV, Lymphedema Management, Wound Care, Balance/fall prevention, and Dry Needling

URGENT CARE



MICHELLE WEEKS, FNP-BC

Morning Star Urgent Care
247 Bluffs Ave. Suite 102, Elko, NV 89801
(775) 515-7332

School: University of Nevada, @Las Vegas
Board Certifications: AANC
Managed Care/Insurance Accepted: All Major Insurance

SPECIALIST/NEUROLOGY



HARSHA NAGARAJA,
M.D.

Elko Spine and Rehabilitation
2219 N.5th St., Elko, NV 89801
(775) 777-96691

School: St. Matthew's School of Medicine
Board Certifications: Neurology
Managed Care/Insurance Accepted: Commercial

Insurance, Medicare, Workmen's Compensation
Services: Telemedicine Neurology Services

URGENT CARE



DR. KAREN WRIGHT

Morning Star Urgent Care
247 Bluffs Ave. Suite 102, Elko, NV 89801
(775) 515-7332

School: University of Nevada, Reno
Board Certifications: Fellowship Integrative Medicine,
University of Arizona, Tucson
Managed Care/Insurance Accepted: All Major Insurance

URGENT CARE



MELISSA KNOX, FNP-C

Morning Star Urgent Care
247 Bluffs Ave. Suite 102, Elko, NV 89801
(530) 320-6519

School: University of Texas at Arlington
Board Certifications: FNP-C with American Academy of
Nurse Practitioners
Managed Care/Insurance Accepted: All Major Insurance





CLOSING THE CURTAIN

CFPB to ban medical debt from being listed on US credit reports

CORA LEWIS
ASSOCIATED PRESS

Lenders no longer will be able to consider unpaid medical bills as a credit history factor when they evaluate potential borrowers in the U.S. for mortgages, car loans or business loans, according to a rule the Consumer Financial Protection Bureau finalized this month.

Removing medical debts from consumer credit reports is expected to boost the credit scores of millions of families by an average of 20 points, the bureau said. The CFPB says its research showed outstanding health care claims are a poor predictor of someone's ability to repay a loan yet often are used to deny mortgage applications.

The three national credit reporting agencies — Experian, Equifax and TransUnion — said last year they would remove medical collections less than \$500 from U.S. consumer credit reports, but many consumers have debt much higher than that.

The new rule bans all outstanding medical bills from appearing on credit reports and prohibits lenders from using the information. It is set to take effect 60 days after publication in the Federal Register, though President-elect Donald Trump proposed sweeping changes and limits to the CFPB's regulatory reach.

HOW WILL THIS AFFECT CONSUMERS?

The CFPB estimates the rule will remove \$49 million in medical debt from the credit reports of 15 million Americans. The agency says 1 in 5 Americans have at least one medical debt collection account on their credit reports, and more than half of collection entries on credit reports are for medical debts.

The problem disproportionately affects people of color, the CFPB found: 28% of Black people and 22% of Latino people in the U.S. carry medical debt versus 17% of white people.

The CFPB says the rule will give millions of consumers increased access to loans and lead to the approval of approximately 22,000 additional mortgages a year.

The rule also was drafted to increase privacy protections and to help keep debt collectors from using the credit reporting system

“Medical debt is not a reflection of being bad with money — any one of us can experience illness or injury. With this new rule, Americans will now be able to focus less on the strain of medical debt and more on getting back on their feet.”

CARRIE JOY GRIMES,
founder of personal finance organization WorkMoney

to coerce people into paying bills they don't owe. The CFPB found consumers frequently receive inaccurate bills or are asked to pay bills that should have been covered by insurance or financial assistance programs.

What's more, lenders will be barred from using information about medical devices, such as prosthetic limbs, to make them serve as collateral for a loan and subject to repossession, according to the CFPB's announcement.

HOW ARE ADVOCATES RESPONDING?

Nonprofits in the health care space are pleased.

“This decision is great news

for everyday Americans,” said Carrie Joy Grimes, founder of personal finance organization WorkMoney. “Medical debt is not a reflection of being bad with money — any one of us can experience illness or injury. With this new rule, Americans will now be able to focus less on the strain of medical debt and more on getting back on their feet.”

Patricia Kelmar, health care campaigns director for the U.S. Public Interest Research Group, said the rule would help “many financially responsible families who have accumulated medical debt from unpredictable health issues, high out-of-pocket costs, insurance claim denials and billing errors.”

WHAT SHOULD YOU DO?

Federal law requires nonprofit hospitals to lower or write off bills for individuals depending on household income. To determine if you qualify, do an internet search for the hospital or health care provider along with the phrase “charity care” or “financial assistance policy.” The nonprofit organization Dollar For also provides a simplified online tool for patients.

Next, appeal under the No Surprises Act, a federal law that says insurance companies must reasonably cover any out-of-network services related to emergency and some non-emergency medical care. If you're charged more than you're used to or expect when you receive in-network services, that bill may be illegal.

Always ask for an itemized bill, which includes the billing codes of all care received. If something is off between these codes and the care provided, contesting your bill can yield changes.

Comparing the bill with insurance companies' estimates of fair charges also can help. If the price you were charged is more than average, you may have your costs lowered. You could even take the provider to small claims court over the discrepancy, or let them know you have a case.

Finally, always compare your insurance company's “explanation of benefits” to the bill. The hospital's bill must match the explanation of costs that are covered and not covered. If it does not, you have another reason not to pay and to ask the provider to further work with your insurance company.

You can always appeal health claims with your insurance company if you believe there is a reason the bills should be covered entirely or more than the company initially decided. You may also contact your state insurance commissioner.



New state veterinarian briefs ranchers on avian influenza fight

Dr. Peter Rolfe briefed cattlemen at Great Basin College in Elko

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — A sea of cowboy hats filled the Great Basin College theater in Elko earlier this month as the University of Nevada, Reno, Extension Cattlemen's Update brought in faculty from organizations like the Nevada Department of Agriculture and UNR.

Visiting many rural communities around Nevada, they had gathered in Fallon and Ely earlier that week and met in Winnemucca the day after the Jan. 16 Elko stop.

"Our goal is to protect the industry," Nevada Department of Agriculture Livestock Division Administrator Chad Sestanovich said.

The USDA has four agricultural police officers around Nevada, with one newly hired for the Elko region with a lifelong interest in agriculture and ranching, Sestanovich said.

"We have two brand inspectors throughout the state and it seems like that should be plenty — but in certain times of the year, you guys are all shipping at the same day, same time and we take it very seriously. It's something I want to know, if we're not meeting the standards of industry," he said.

The new Nevada State Veterinarian, Dr. Pete Rolfe, discussed the importance of fighting domestic animal diseases. "They impact trade of animals internationally with other countries, and it really makes it hard for us. So, we try to eradicate those diseases," he said.

Nevada has seen one confirmed dairy herd infected with the high pathogenic avian influenza virus. Statewide, silo tank testing is the current mode for fighting the



New Nevada State Veterinarian Dr. Pete Rolfe speaks at the Cattlemen's Update at Great Basin College, Jan. 16, 2025.

"The USDA kind of put the pressure on all the state animal health officials to start implementing testing on a broader scope."

DR. PETE ROLFE, founder of personal finance organization

disease.

"The USDA kind of put the pressure on all the state animal health officials to start implementing testing on a broader scope," Rolfe said.

He said that USDA is not entirely sure how to find the avian flu strain on a farm, how it behaves in dairy cows and how it spreads from cow to cow.

However, he said, "I think milk is a big source of the problem. If we look at the levels of virus in the lactating cow that is infecting the virus, it's unreal."

"Our theory of doing this is catching it before we've got sick cows. There's nothing we can do to prevent it. Once the cows are sick, it's going to run its course through that dairy but we know

where it is. We can stay in front of it and we can stop it," Rolfe explained.

"So how would we really catch that in the beef herd, whether it's cow, calf or especially feedlot?" he said. It can be difficult for feed yards to catch wind of sick animals, he noted, because if a sick animal suddenly lost a bunch of weight, the loss might misleadingly appear to connect with a break in feeding.

Prevention outbreaks of the virus involves ranch managers keeping careful tabs on their cattle data. The USDA's new "orange tags" for cattle, for instance, contain radio frequency identification components that allow for traceability during disease outbreaks.

“The major benefit is we can scan them, capturing information faster,” Rolfe said. “But how many of you guys use your own electronic scanning equipment on the ranch or farm? That’s what I think the USDA department wants. They wanted this so that everybody could have technology, mainly veterinarians.”

He explained, “What we’re doing with these tags is, we are paying for them through grants.”

“The USDA is paying us to pay them back,” he added. “This is all about traceability, right? We want to know the origin and dynamic if the outbreak happens. So the goal would be to capture this information at every point of animals coming together, like a sale, a market,” Rolfe said.

“They’re trying to capture information in as many places as possible, quickly. But the infrastructure is not there, sort of like electric cars,” he noted. “The only



An audience assembles in the Great Basin College Theater for the Cattlemen’s Update, Jan. 16, 2025.

place I can guarantee you that this is probably getting run above 80% of time is the slaughter, where those facilities are set up to capture this electronic information.”

If a rancher moves cattle to another state, “the state they’re

moving to requires them listed individually. You’re going to need those numbers,” Rolfe said.

“It’s really likely we’re gonna get something like foot and mouth disease or something else like that in this country at some point. The

quicker we can find the origin of that animal — meaning within a day’s time, like tracing back records — the quicker we can hopefully stop where it started before it spreads from one state to another,” he said.

We’re here and we care.

That’s our message to you. There’s no reason to travel long distances to receive treatment. We offer a wide variety of diagnostic and therapeutic procedures right here in Elko, Nevada.

Dr. Andrew Geisler MD specializes in pain management

Star Chenoweth PA-C specializes in pain management

Dr. Chad Jensen DO specializes in pain management

Dr. Harsha Nagaraja offering telemedicine appointments in neurology



Elko Spine & Rehabilitation
2219 N. 5th Street
Elko, NV 89801
775.777.9669



Elko High School's Hope Squad members prepare hot chocolate and cider given to students in exchange for food items donated to Community In Schools on Nov. 14, 2024.

Communities in Schools expands services in Elko County

LYDIA SNOW
LSNOW@ELKODAILY.COM

ELKO — The nonprofit Communities in Schools of Nevada, which serves four counties around the state including Elko County, reached a new high of case-managed student graduations — a 97% rate — in the 2023-2024 school year.

Trisha Webb, interim executive

director of Communities in Schools Northeastern Nevada, said the organization is making a difference at schools in Elko, Spring Creek and West Wendover.

“CIS has received a full-service community grant that provides extra support to our schools. That puts another community coordinator in two of our schools, which would be North

Side Elementary School and Flag View Intermediate School,” Webb said.

“It enhances our programming while we regularly serve students inside the schools. Now, we are able to further our reach and really support parents and families. While this is a new grant and it’s a learning experience for us, we do anticipate the impact,”

she said.

“We’ve also been able to include another site coordinator at Adobe Middle School,” she said. “We used to just have one. This has increased opportunities for us to be able to serve our mental health program more efficiently, where students can access telehealth services during their school day.”

Webb said there is no charge to students for the added service, and it renders transportation issues moot.

“We have a community that is a 24-hour community. It’s very busy and sometimes the challenge of getting a student to mental health services becomes a barrier for them to access it. We’re able to break that down,” Webb said.

In November, Elko High School’s Hope Squad collected food items for CIS by offering students hot chocolate and cider as an enticement. And in March 2024, Nevada Gold Mines donated \$500,000 to CIS of Nevada, the statewide organization.

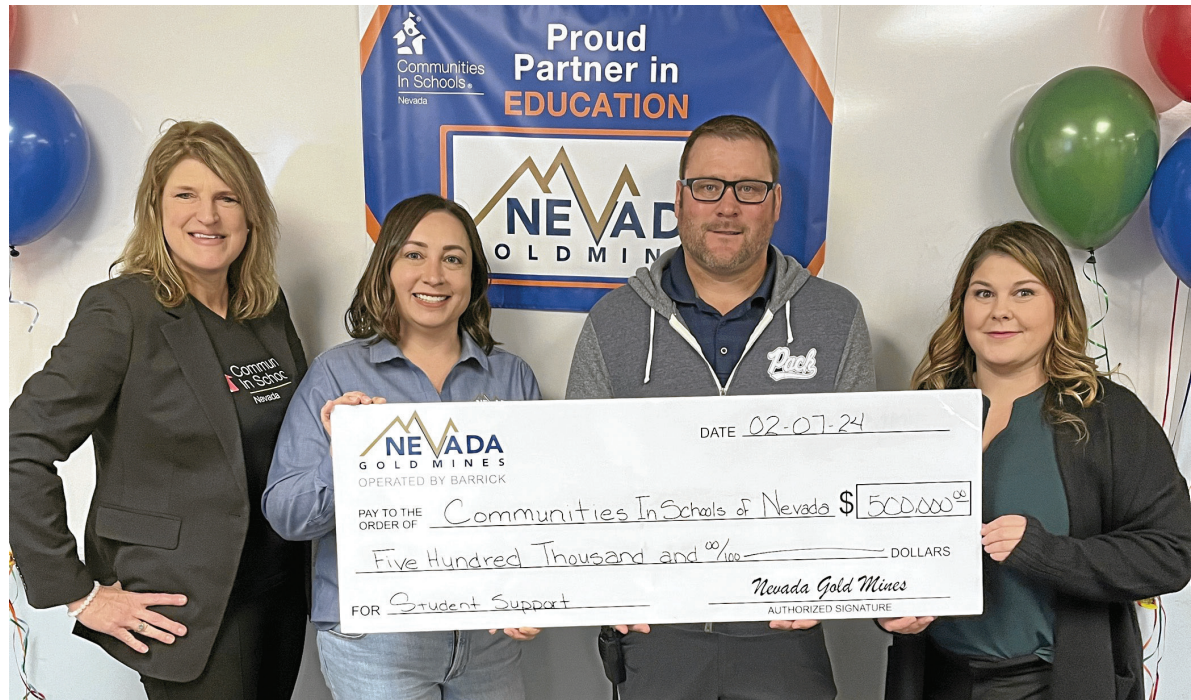
Webb said CIS was able to add support to Wendover Middle School this year.

“We have a site coordinator at the elementary school and then we didn’t have somebody at the middle school — so, they weren’t accessing CIS services as readily there — and then we had a site coordinator at the high school. So adding that (at the middle school) means when students need CIS services in elementary school, they are then able to move along and be supported by the site coordinator at the middle school and then at the high school. So that was a big deal and, I believe, a huge asset to the Wendover community,” she said

“Any of our basic needs are available to any student in the district,” she said. “We would work with schools in Jackpot or Owyhee to get those basic needs.”

Personal needs such as clothing, soap, razors and feminine products, as well as school supplies, backpacks and notebooks, can be accessed at any school in the Elko County School District through CIS, she said.

CIS also provides telehealth services to students in the county. “If we have somebody like a counselor or principal who is willing to work with us, we are



Nevada Gold Mines recently donated \$500,000 to Communities In Schools of Nevada, the latest contribution in the multi-year commitment which NGM and Barrick have made to the stay-in-school organization. From left are Tami Hance-Lehr, CEO and state director, Communities In Schools of Nevada; Melissa Schultz, community engagement and development manager, Nevada Gold Mines; T.W. Cunningham, principal, Elko’s Southside Elementary School; and Leslie Goicoechea, executive director, Communities In Schools of Northeastern Nevada.

“We determine what barriers they may be having. We identify a goal with them that we’re going to work on throughout that year. Those goals can be academic, they can be behavioral, they can be attendance or our psych nurse can support social and emotional learning.”

TRISHA WEBB, interim executive director of Communities in Schools Northeastern Nevada

able to provide telehealth services to any student in Elko County School District,” Webb said.

“Our site coordinators are the boots on the ground,” she said. “They work with counselors, administrators, the attendance secretary, to determine which students could utilize CIS support.”

Lexi Samper and Maria Borabo are additional site-support coordinators at Adobe Middle School.

“We always reach out to parents and families and get their consent to work with our students,” Webb said. “We determine what barriers they may be having. We identify a goal with

them that we’re going to work on throughout that year. Those goals can be academic, they can be behavioral, they can be attendance or our psych nurse can support social and emotional learning.”

Ways to support a student in achieving goals might involve a small group, after-school tutoring or learning one-on-one coping skills.

CIS also runs events to help promote school goals.

Spring Creek High School has a goal to decrease chronic absenteeism and several other schools around Elko County have a focus on attendance, Webb noted.

For example, incentives can help boost attendance, she said, such as a slime-making party for the class with the highest attendance in an elementary school.

In addition, Webb noted, CIS “shelf-stable food to support students when they’re not in school during the weekends, to have access to food in their homes.”

“Our outreach coordinator makes sure that these bags are packed. She works with volunteers to get that done and then we get them delivered to each site on Thursday,” to the backpacks of children who have let them know about their needs, through counselors, principals and teachers.



HELPFUL HANDS

Why CPR is crucial when someone is in cardiac arrest

Each year, an estimated 436,000 Americans die from cardiac arrest when the heart abruptly stops beating, causing the person to collapse and stop breathing.

Immediately performing hands-on cardiopulmonary resuscitation, or CPR, can more than double the victim's odds of survival. CPR does not restart the heart, but the chest compressions can keep blood flowing to the person's brain and other vital organs until they receive emergency medical care.

New research presented at the American Heart Association's Resuscitation Science Symposium in November found that beginning CPR on a person with cardiac arrest within two to 10 minutes improves their chances of survival with intact brain function.

"Without CPR, only 10% of out-of-hospital cardiac arrest victims survive, and every minute that goes by, chances of survival decrease by 10%," says Dr. Eric Goralnick, associate professor of emergency medicine at Harvard Medical School.

A COURSE OF ACTION

Yet fewer than half of the people who have a cardiac arrest outside a hospital receive CPR from a bystander. The main reason is a lack of CPR training.

In fact, a recent scientific statement from the American Heart Association found that although many people say they've received CPR training at some point in their lives, few are current on their training.

"All adults should take an in-person CPR class at least once and have a refresher course every two to three years," Goralnick says. "You could save the life of a family member, friend or stranger."

Currently, the best way to learn CPR is to take a course offered by local chapters of the American Red Cross (redcross.org) or the AHA (cpr.heart.org). Classes range from one hour for basic CPR to a full day that includes first-aid training.

Upon completion, participants receive CPR certification. While in-person classes

CPR BASICS

- 1** Place the person on their back on the floor and kneel beside them.
- 2** Place the heel of one hand on the center of the person's chest.
- 3** Place the heel of the other hand on top of the first hand, and lace the fingers of your top hand through the fingers of the bottom hand.
- 4** Position your body so your shoulders are directly over your hands.
- 5** Keeping your arms straight, push down with your arms and hands, using your body weight to compress the person's chest. Push hard enough to press the chest down at least 2 inches. Let the chest completely rise before pushing down again.
- 6** Continue pressing the chest hard and fast at a speed of 100 to 120 compressions per minute.
- 7** Continue hands-on CPR until you notice an obvious sign of life or EMS arrives. If possible, enlist another person to take over after a few minutes, as performing the compressions can be tiring.

— HARVARD HEALTH

are ideal as they offer hands-on training and direct feedback, online classes also are available, as are blended classes.

CPR classes also include training with an automatic external defibrillator, or AED. An AED is a lightweight, portable device that analyzes a person's heart rhythm. The AED has two sticky pads with sensors that are attached to the person's chest. The sensors send information about the heart's rhythm to a processor in the AED.

If an abnormal rhythm is detected, the AED can deliver an electric shock through the chest to the heart to restore the rhythm back to normal.

"AEDs are found in many public places, so use them if they are available," Goralnick says.

WHEN TO ACT

How can you recognize whether a person is suffering cardiac arrest? Look for two key features:

■ **Unresponsiveness:** The person does not react if you loudly say "Are you OK?" and firmly shake their shoulders. If

the person is unresponsive, call 911.

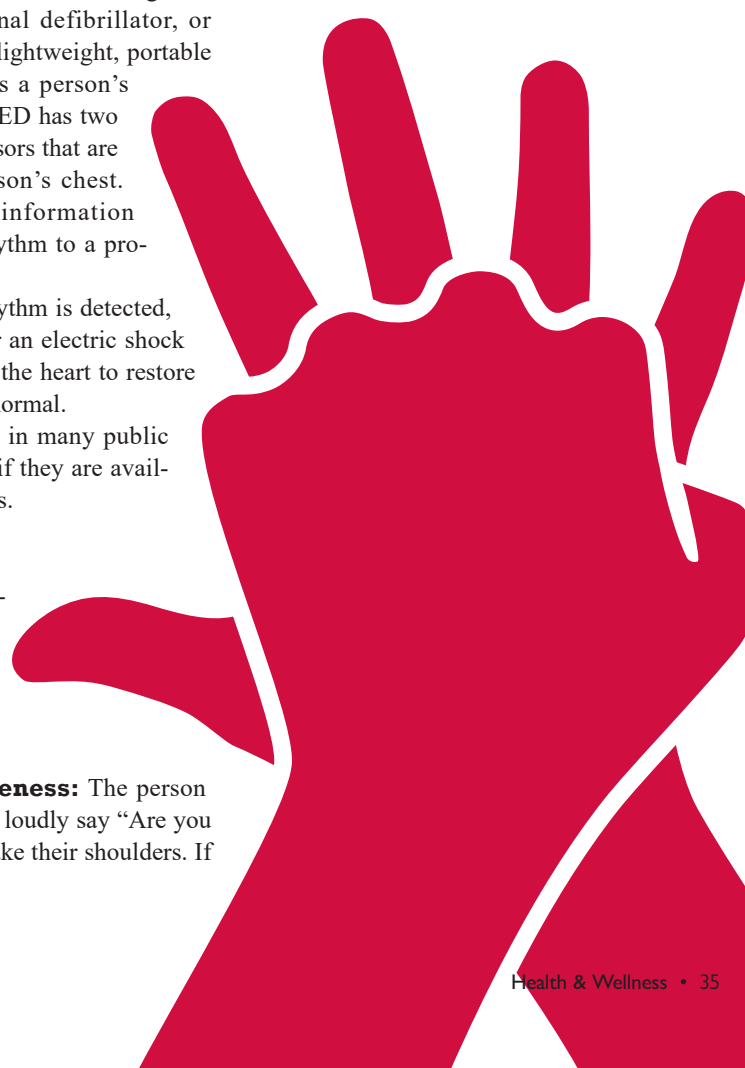
Abnormal breathing: Check if their chest rises and falls, or put your face close to their nose and mouth to listen for normal breathing sounds. Labored, irregular breaths that sound like snorting or gasping are signs that the brain is not receiving adequate oxygen. Tell the 911 operator if you can't detect normal breathing.

About half of 911 operators are trained to provide verbal cues for CPR. Put the phone on speaker so you can begin CPR and continue to receive instructions until emergency medical personnel arrive.

"Even if you know CPR, during a crisis, it can be hard to think straight, and you will benefit from expert guidance," Goralnick says.

If you're not sure if someone needs CPR, always err on the side of caution, Goralnick recommends.

"It's better to do CPR on someone who doesn't need it rather than not do it on someone who does," he says.



BEYOND THE SCALE

6 ways to know your new food and exercise habits are working

CARRIE DENNETT | ENVIRONMENTAL NUTRITION

When you embark on food and lifestyle changes with health in mind, what defines “success”? For many people, weight loss is the primary marker of change they focus on when they are trying to eat better and exercise consistently. But weight change is only one possible outcome of improvements to nutrition and physical activity.

Eating nutritious, whole and minimally processed foods that are prepared in ways you enjoy has inherent value. So does moving your body regularly in ways that work your muscles, heart and lungs.

Here are six small but significant wins you may experience as you work toward your overall goals:

1 BETTER HEALTH MARKERS

Positive changes in blood pressure, blood sugar and cholesterol levels can be a sign that your new nutrition and exercise habits are “working.” However, genetics also plays a role, so some people will see more significant changes from diet and lifestyle than others.

2 MORE ENERGY

Nourishing yourself with healthy meals and snacks spaced throughout the day will give your body the fuel it needs to run optimally, which can reward you with steady energy levels. Similarly, “spending” energy each day on physical activity will yield you even more energy.

3 BETTER DIGESTION

Changes to eating patterns such as reducing meal skipping, eating more fiber-rich plant foods, putting down your fork when you are satisfied but not stuffed, and reducing late-night eating can all improve digestion.

4 IMPROVED SLEEP

Shifting more of your food intake to earlier in the day — starting with eating breakfast, then making lunch a bigger meal than dinner if you can — also can promote more restful sleep and may have other health benefits. Regular exercise can also help you sleep better.

5 INCREASED FITNESS

Regular exercise doesn’t always lead to weight loss, but it does improve your strength, endurance and flexibility. Not only is maintaining and building muscle and cardiovascular fitness important for health, especially as we age, but you’ll find that many routine daily activities become easier as you become stronger.

6 GREATER RESILIENCE

Supporting your body with nutrition and the movement it needs supports physical and mental health, which can help you recover from stressful events big and small.

BUILDING MOMENTUM

Another benefit of looking beyond the scale — even if you do hope to see the number on the scale shift — is that when you pay attention to how the results of your new habits make you feel every day, this can be more motivating than simply focusing on a far-off goal.

You may also notice a synergy to the changes you’re making. For example, eating better and staying active may improve your energy and help you sleep better; and feeling refreshed and energetic can make it

easier to plan and prepare nutritious meals and decide to go for a walk instead of lounging on the couch, which continues to support energy and good sleep.

When you feel better and know you’re feeling better, this can strengthen your new nutrition and exercise habits. It becomes easier to do the work to maintain those habits long term and to return to them if you find yourself offtrack along the way because life throws you a curveball.



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Natural sources of PROBIOTICS

DR. HOWARD LEWINE
HARVARD HEALTH PUBLISHING

Q: Is there a best amount of probiotics we should get each day?

A: There are two ways to get more probiotics into your gut: fermented foods and dietary supplements. Fermented foods are the best natural source of probiotics.

Probiotic supplements, which are typically sold over the counter, are reserved to treat specific ailments as suggested by your doctor. They are not recommended for everyday use. Plus, supplements do not have the same FDA oversight as medications do.

Fermented foods, on the other hand, are an excellent natural source of probiotics. Fermenting is one of the oldest techniques for food preservation. Foods that are fermented go through a process of lactofermentation in which natural bacteria feed on the sugar and starch in the food, creating lactic acid. This process creates an environment that preserves the food and promotes beneficial enzymes, B vitamins and omega-3 fatty acids as well as various species of good bacteria.

Another way to look at fermentation is that it takes one type of food and transforms it into another kind. For instance, cabbage becomes sauerkraut, cucumbers become pickles, soybeans turn into miso, and milk can be made into yogurt, cheeses and sour cream.

Not all fermented foods contain probiotics. Some foods undergo steps that remove the probiotics, as with beer or wine, or make them inactive, like baking and canning. However, most fermented foods are probiotic foods, as well.

If there is a potential downside to fermented foods, it is that their taste



Fermented foods are an excellent natural source of probiotics.

The most common fermented foods that naturally contain probiotics, or have probiotics added to them, include yogurt, kefir, kombucha, sauerkraut, pickles, miso, tempeh, kimchi, sourdough bread and some cheeses.

and smell can be quite strong, which may be unpleasant for some people. The unique flavors and textures of fermented foods are due in part to the different species of bacteria used.

On the upside, there are many types of fermented foods from which to choose, so there is a good chance you can find something you will enjoy.

The most common fermented foods that naturally contain probiotics, or have probiotics added to them, include yogurt, kefir, kombucha, sauerkraut, pickles, miso, tempeh, kimchi, sourdough bread and some cheeses.

Yogurt is considered the go-to player of probiotic foods because it has a flavor and texture that's generally

appealing to Western palates. It's easy to add yogurt to your diet. Besides having it for breakfast or a midday snack, you can substitute yogurt whenever you use mayonnaise in egg salad or potato salad, or in almost any baking recipe. Yogurt also can be the basis for sauces, salad dressings or marinades.

How many probiotic foods do you need? That's not easy to answer as there is no recommended daily intake for probiotics, so there is no way to know exactly which fermented foods or what quantity is best. Therefore, the general guideline is to just add as many fermented foods to your daily diet as possible.

The Behavioral Risk Factor Surveillance System puts together a national survey from the federal government, which also includes statewide and countywide data. The University of Nevada, Reno, has provided this survey to them as well, Oslund said. “We’re able to track the trends in use as measured by the numbers of events and trainings and awareness that we do with our Facebook page and Instagram,” she said. “We also use national trends. We constantly look at the drug trends, what’s happening, where, when we can expect it to happen, what it is.”

Oslund said government data often can be a few years old.

“And the advantage of being in the coalition is we go to weekly meetings or monthly meetings or even just email connections with law enforcement, the hospitals and everything,” she said. “So, we know what they’re seeing, we know where we need to focus our efforts. But we do track the data. We do have the science-based prevention and awareness behind what we’re doing.”

NICOTINE POUCHES, NEW DRINKS, VAPES

Oslund and Magney said a current drug trend they’re following is the use of powdered nicotine pouches like those made by Zyn. Oslund said PACE get emails about nicotine use, because tobacco use has fallen. But vaping is popular and nicotine pouches are even more popular, she noted.

“We’ll be watching to see what type of health issues come from that, so that we’ll be able to do some more in-depth training,” Oslund said.

PACE also does hands-on research by placing themselves into the community, she said.

“We go to the convenience stores and smoke shops. We go to see what products they have and

then we research the products. During one, we were doing a tobacco scan and all of a sudden we saw there were mushroom gummies and mushroom drinks. So then, we started researching to see how much use is happening, where it’s happening and what are the true effects of what they’re using,” she said.

“The focus for the shroom drink is, you can feel better without it being an alcohol drink. They’re not talking about what is in the drink. So people are using and not knowing what’s going to happen to their health,” Oslund explained.

In addition, she said they found a new vape product that resembles a key fob, allowing people to discreetly vape at work.

“We bring awareness to parents, teachers, law enforcement, of what’s being seen in our communities, in our state and in our nation, so that they have a better chance of finding out if there’s somebody in danger from their use,” Oslund said.

VARIED TYPES OF PROGRAMS

As their goal is to intervene before substance use starts, Magney explained, PACE sends out advertising for “universal programs,” which “are not dependent on anyone’s level of use or whether they’re using or not.”

Oslund said they might speak at a school about universal programs.

“Then, there are programs that

are evidence-based, called ‘selective programs.’ That’s when you have some reason to think that somebody, primarily youth, are engaging in risky behaviors or maybe starting to use,” Magney said. “So, at each level, things get progressively narrower and more focused.”

For their “indicated programs,” Oslund said, they fund juvenile probation and other social workers to get involved with youth and adults.

Oslund said they also hold focus groups, “where we put out that we need 10 youth or 10 adults or whoever we’re seeking the information from,” Oslund said.

“I will talk to the sheriff. I’ll talk to the police chiefs in our communities. We talk to tribal people. So, we’ll talk to leaders in the communities and in the agencies and organizations to see what they’re seeing,” she said.

According to Oslund, they also meet with local medical organizations such as Northeastern Nevada Regional Hospital to find out what drug-related issues they are treating, such as a condition called hyperemesis associated with heavy marijuana use which causes nausea in the mornings coupled with abdominal pain and sometimes a fear of vomiting.

“We found out that the ERs here and in Ely were seeing a lot of that happening,” as well as using up valuable resources on “frequent flyer” patients, she said.

“So, we try to educate the user but also the families and friends, so they can be aware of the dangers of what is happening,” Oslund said.

“We also do a community needs assessment every three years, which kind of helps us determine priorities,” Magney said. Oslund said this “comprehensive community prevention plan” helps with writing grants or providing services. “Other agencies and organizations also use our CCPP for some of the work that they’re doing.”

GRANT FUNDING HELPS SAVE LIVES

She said they use block grant funding for operations, trainings and their efforts, but also portion some of it out to “people who provide the prevention program and other programs in our community, some of it goes to the Eureka Sheriff’s Office, if they’re doing the training.”

“We also support crisis-intervention teams, and we’re looking at Mobile Outreach Safety Teams, and so we’ve written grants waiting to hear if we get it,” Oslund said. In addition, she said PACE receives state funds for tobacco awareness and prevention.

“We have mental health awareness funding that pays for the ASIST suicide prevention trainings that are put on in the tri-county area. And we also provide funding for other providers.

“We’re able to track the trends in use as measured by the numbers of events and trainings and awareness that we do with our Facebook page and Instagram. We also use national trends. We constantly look at the drug trends, what’s happening, where, when we can expect it to happen, what it is.”

LAURA OSLUND, PACE Coalition Executive Director

► see **PACE**, page 40

Oslund noted how the goal of PACE is not for them to do all the work but rather “for us to be able to find funding for others who are trained or to be trained.”

“We have Mental Health First Aid training that we’ve provided out, so people can have a better understanding of what they might see,” she said. “We provide Narcan [an overdose reversal medicine] out to the tribal communities, even to our sheriff and police departments and our first responders.”

Earlier in January, Oslund trained 27 Elko city staff members on how to use Narcan, giving them kits.

“We’ve been providing that for five years and probably over 1,000 double doses of Narcan, we’ve been able to get out,” she said.

“People come to us at the events and tell us that Narcan they received from us saved their loved one or somebody’s life,” Magney said. “One of our staff members actually was at a local pharmacy and someone came in

saying that a person was overdosing or appeared to be overdosing in the parking area. Our staff member had Narcan with them, so they went out and administered Narcan.”

PACE also hosts trainings on responsible alcoholic beverage serving. “It’s nice that we have local law enforcement who see the importance of it, so they require it, especially for special events,” Oslund said. “If they’re going to sell at the fair or something like that, everybody who is going to work the booth has to come in and be trained for awareness of use, overuse and not selling to underage.”

PACE also funds people who conduct ID checks at various events, Magney said.

TAKE BACK DAYS

Magney said “Elko has had pretty good success with its Drug Enforcement Administration Take Back Days.”

“We’re always wanting to get the word out about those and keep collecting more of the unused and expired medications or drugs that people have in their

homes, to keep them out of the wrong hands,” he said.

“Kids explore things. A lot of adolescents get the drugs that they’re misusing from their home medicine cabinets. So, if we can get those unused and expired ones out of the home and get them properly disposed of, that’s a big help. We really want to increase the amount of substances we get off the street during the Take Back days and Laura has been greatly involved with that,” he said.

Oslund said PACE, which formerly partnered with Elko’s Trac-B Exchange, is looking into setting up its own harm reduction program. For them, she said, a needle exchange would not involve “giving somebody permission to use but more on the prevention of the disease part of it — so, keeping HIV, AIDS, hepatitis and everything from spreading.”

Oslund said funding is always one of the organization’s needs. “With grant funding, it’s very specific on how you can use it,” she said. “You get X amount for advertising, X amount for travel.”

So, some kinds of funding can be hard to come by.

While PACE does get occasional donations from Nevada Gold Mines, “we may have to partner on joint grants and not just individualized grants. We are looking at the opioid settlement funds and others that are in perpetuity,” Oslund said.

“We didn’t want to compete and we knew a lot of other agencies and organizations were writing for it, so we didn’t want to take from what they could do. But we may just become a little more aggressive in seeking out the funds, instead of sitting back and seeing if it happens,” she said.

“We really try to support a broad range of nonprofit organizations in the community,” Magney said.

PACE will be at about seven health fairs this year. It will also participate in Elko County School District STEM fairs and career fairs, “to keep our awareness going, and hopefully prevent some of the issues that communities can have,” Oslund said.

Staffing

 continued from page 12

their needs and whatnot,” Tapia said.

“And then one of the unique staff we have on board is also a social services coordinator” — Lisa Pacheco, Tapia said. “She is able to connect with resources in the community that can help with things like transportation, housing and even groceries in some instances. She’s been getting integrated into the community very quickly and gathering all of those resources.”

The goal is to touch every field they can, Tapia said.

“Through the behavioral health program that we have as well, we can also refer patients internally through a contract we have set

up with a psychiatry. So, beyond therapy and counseling, if the patients need anything more, we can actually provide that as well,” Tapia said.

“Talk therapy is a key piece of what our behavioral health clinicians do,” Tallman said. “For people who prefer a Telehealth visit, we could also facilitate those as well. Sometimes it’s a privacy issue — people maybe don’t want to always come into a clinic and risk potentially bumping into their neighbor. Maybe, they want to be private about their health and their medical and behavioral health needs.”

The health center and others across the country have tried for years to remove the stigma of mental health and behavioral

health issues.

“People view it in more of a negative light. It’s one of those ‘Conceal, don’t feel’ kind of things. We’re opening up those conversations and creating more avenues. So that way people feel more comfortable to access health — and maybe aren’t having a lot of those internal reservations about approaching us,” Tapia said. “I think just constantly talking about and keeping those conversations open and welcoming, making sure it’s a place of non-judgment, people will slowly adapt to shifting that mindset.”

Tapia said he feels the COVID-19 pandemic caused people to better understand the reality of mental health struggles.

Another important role of the

behavioral health program, Tallman noted, is to “connect our patients to other resources they might need,” which Pacheco will specialize in.

“If there’s food insecurity, those kind of concerns, she is a conduit, because we know there are lots of other great organizations in the community that are working on different things that affect the community that we serve,” Tallman said.

“It’s one of those things where people need help with something but they just don’t know where to start. She is where you start,” Tapia said.

“People shouldn’t be shy about asking for help. I mean, everybody needs help sometimes,” Tallman said.



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