

LANE COUNTY MEDICAL SOCIETY | JUNE 2026

MEDICAL MATTERS

Children Come First

Dr. Corey Rood explores the intersection of child advocacy, trauma-informed care, and medicine at Eugene's Kids FIRST center.



REGISTER:
Healthcare Advocacy
Series Session #2
on June 15th



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LCMS MISSION STATEMENT

The Lane County Medical Society is a professional organization that represents, unifies, and supports its physician members as they practice medicine. The Society promotes the interests of member physicians and advocates for the health of the community.



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Advertiser Spotlight

Chambers Construction reflects on its longstanding partnership with the local healthcare community.

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New providers have been added to the PWP. Visit lcmedsociety.com/pwp to view the full list or for more details.

From Community Partnerships to Physician Support

We are fortunate to live in a community with an abundance of resources for families and youth – Kids FIRST, Parenting Now, 15th Night, WellMama, CASA, Bags of Love, Kidsports, ShelterCare, Eugene YMCA, St. Vincent de Paul – the list goes on. Each organization offers different resources based on the needs of the groups they aim to serve.

Many LCMS members also serve on the boards of these organizations or volunteer their time and efforts. Much of that passion, compassion, and understanding comes from personal experiences and connections with patients, fueling the desire to do more for the community. Often, those connections allow us to partner with organizations, share their missions with the broader membership, and better support physicians in the ways they may need most.

Please know that LCMS is also a resource for physicians. While, as staff, we can never fully understand the experiences our members face in their work, we can empathize with the challenges, difficult conversations, and importance of feeling supported.

Our goal is to create spaces and opportunities for physicians to connect with colleagues, share stories, find wellness among friends, and continue building a stronger healthcare community together.

What We Did

On the topic of community connection and support, last month we hosted the first gathering of the Healthcare Advocacy Series at Pacific ClearVision Institute. Rep. Nancy Nathanson joined attendees to provide updates on legislation passed during the short session, as well as bills and priorities being explored for the

upcoming 2027 long legislative session.

Attendees shared concerns about credentialing burdens, increasing malpractice insurance costs, and cuts to Medicaid. On a more positive note, Rep. Nathanson discussed the success of closing loopholes in recent legislation and the impact physicians can make by providing testimony or personal stories that support proposed legislation.

Now is the time to get involved in preparation for the 2027 long legislative session. Bills will be written and submitted by September of this year. We urge you to use your voice and expertise to advocate for yourselves and your patients. The next Healthcare Advocacy event will take place on June 15. Registration is open on our website.

LCMS also hosted the third biennial fundraising gala for the Physician Wellness Program (PWP) in early May, themed around a Derby Soiree. Guests donned their best derby attire, enjoyed ample time to socialize, cheered on their chosen horses in our simulated horse race, and bid on fun auction packages donated by many generous local businesses.

At the end of the night, we were able to raise nearly \$46,000 to help sustain the PWP, a vital resource available to all Lane County physicians. Thank you to all who attended, sponsored, and donated.

What We're Doing

The LCMS Community Health & Engagement Committee (CHEC) has been working on a physician shadowing initiative aimed at simplifying connections and processes between students and clinics. The goals include vetting students, ensuring minimum requirements are met, reducing the number of emails and requests sent

to physicians and offices, providing parameters around timing, and more.

Through work with the Asklepiads Pre-Medical Society at the University of Oregon, Angel, LCMS's Communications & Marketing Director, has connected with students to develop a system that works for both student and clinic schedules.

We will be launching the first cohort this fall and are looking for more small and independent practice physicians and clinics to participate in future cohorts.

Lastly, on July 10, we're partnering with the Eugene Emeralds on a fundraiser for the Physician Wellness Program for the second consecutive year. Tickets supporting the PWP can be purchased using the QR code below. I highly encourage you to invite friends and colleagues to enjoy an evening at the ballpark cheering on our local MLB affiliate team while supporting physician wellness. See you there. ♦



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Chart Notes

Healthcare Advocacy Series Session #2 on June 15th, 2026

Engage in the Healthcare Advocacy Series with our second session on Monday, June 15th, 2026, at 5:30 PM. Location to be announced. This gathering will bring together physicians and local legislators with the goal of helping to influence bills and share updates for the 2027 legislative long session. Designed as an informal, social-style event, the evening will focus on listening to concerns and selecting potential topics. Scan the QR code or visit lcmdsociety.com to reserve your spot. Registration is required.

LCMS, in partnership with community organizations, is organizing this series to connect healthcare professionals and legislators around shared concerns and potential policy efforts.

“It’s not the most rainbows and sunshine work. Child abuse pediatricians have a hard time voicing our importance... Each of our patients has a story, and those experiences may be affecting their adherence to your recommendations, their willingness to talk and open up to you, their willingness to share the truth.”

– DR. COREY ROOD ON TRAUMA-INFORMED CARE. SEE MEMBER PROFILE ON PAGE 14.

PWP Fundraiser at the Ballpark with the EMS!

Join us for a fun-filled fundraiser with the Eugene Emeralds at PK Park on Friday, July 10th! Each ticket purchased contributes directly to the Physician Wellness Program (PWP). This event is open to everyone— so bring your

clinical staff, friends, and family members! *Tickets must be purchased through our special link or QR code for proceeds to benefit the PWP.



UPCOMING

Join the Small and Independent Practice Physicians (SIPP) gathering on June 10th at Summit Bank (96 E Broadway Eugene) Connect with peers and explore the essentials of small business banking with Summit Bank. From practice financing and business accounts to questions about managing an independent practice, this informal evening is designed to support small and independent physicians. See page 22.



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The Children In the Waiting Room

BY ELISABETH LAWLER, MD
LCMS MEMBER SINCE 2015

From the moment families arrive, something shifts. The nervous energy at check-in softens as counselors welcome each child with genuine warmth and enthusiasm. Wooden name tags — each bearing a playful, anonymous camp name like “Cookie,” “Pizza,” “Pom Pom,” “Junebug” — are strung around necks, small but powerful symbols of belonging.

Over the course of the week, camp comes alive through songs, dance, and quiet moments of reflection; through performances and rituals that feel both joyful and deeply intentional. Returning campers move through it with the ease of a second home, while first-timers quickly find their place. For many children, this is more than just a camp — it’s a lifeline.

On October 5th, 2020, my husband, Abner Satterthwaite-Phillips, a Family Medicine and Addiction Medicine physician in Eugene, went from full-time physician to full-time patient when we were blind-sided by his diagnosis of stage 4 colon cancer.

Our daughters were five and nine at the time. Too young to understand what we were telling them, but old enough to feel the fear, chaos, and stress that descended on our home overnight. The two and a half years that followed were a relentless stream of chemotherapy, surgeries, frequent hospitalizations, extended trips out of state for care — driven by our primal desperation that he survive at all costs — and ultimately capped by intense grief.

As a family medicine physician, I treat adults who carry the long shadow of childhood trauma in their bodies: in their blood pressure, their substance use, their mental health. The ACE literature makes this undeniable:



Both photos: Campers embrace the joy and chaos of “Color Wars” during Camp Kesem, one of the week’s most anticipated traditions.

adverse childhood experiences before age 18 significantly increase the risk of poor mental and physical health outcomes across a lifetime.

What is less recognized, however, is that parental cancer functions as one of these experiences. Nearly 2.9 million US children have a parent diagnosed with cancer, and research shows these children are significantly more likely to miss school, visit the emergency department, and struggle with mental health.¹ Roughly 27% develop clinically relevant PTSD symptoms.²

It also tells us something hopeful, that early support can meaningfully change this trajectory. That is where Camp Kesem and other pediatric grief support programs step in.

Camp Kesem is a national nonprofit offering free, week-long summer camps and year-round support for children ages 6–18 affected by a parent’s cancer. The University of Oregon chapter is run by a group of compassionate undergraduate volunteers — many of them former campers themselves — who fundraise and organize relentlessly year-round so that families pay nothing. Nearly every family navigating a parent’s cancer also faces financial hardship: lost income, medical debt, a caregiver stretched impossibly thin, and a patient navigating cancer as a

single parent. Camp Kesem removes the financial burden for all families, so kids can spend a week among peers and counselors who truly understand.

I enrolled my older daughter somewhat reluctantly the summer following Abner’s diagnosis. She resisted getting on the camp bus, but returned in tears when I picked her up because she didn’t want to leave. She had found friends who understood her experience in a way her schoolmates couldn’t. She still FaceTimes or texts them regularly, and they reunite yearly at camp.

Last summer, I volunteered in the medical cabin and saw from the inside what my daughters had described for years: children met exactly where they were, welcomed with warmth and intention, given space to laugh loudly and cry quietly, to sing, to play, to grieve.

The “cabin chats” — where campers share openly in a supported setting — offer something many of these children have never had: permission to feel all of it without fear of being judged or made to feel different, to let their guard down and be seen, surrounded by people who don’t need it explained.

The evidence supports what I witnessed firsthand. A 2026 study of over 1,800 Kesem families found that 78% of parents strongly agreed camp

1. “Associations of Parental Cancer With School Absenteeism, Medical Care Unaffordability, Health Care Use, and Mental Health Among Children,” *JAMA Pediatrics*, 2022.

2. “Child Posttraumatic Stress After Parental Cancer: Associations With Individual and Family Factors,” *Journal of Pediatric Psychology*, 2022..

YOUTH ADVERSITY

had a favorable impact on their child, including significant improvements in psychological well-being, coping, and quality of life. Parent-reported outcomes include an 84% reduction in anxiety, 87% improvement in communication skills, and 90% improvement in feelings of security at home.⁴

My two daughters process grief in entirely different ways — one talks and writes about it, one smiles through it. Camp has given both of them language, connection, and a place to meet their grief at each developmental stage, so it does not harden into something else.

As physicians treating patients with a cancer diagnosis or any other life-threatening illness, the children in those families are patients too, even when they aren't in our exam room, and often the impact on their children is our patients' biggest concern. Asking about them and connecting families with programs like Camp Kesem is a simple, evidence-based act that can meaningfully alter a child's trajectory.

Our community is also fortunate to have Courageous Kids, a free grief support program through PeaceHealth that has served Lane County families for thirty years. Beyond their annual summer camp, they offer year-round support groups run by mental health specialists for children navigating the loss of a parent, sibling, or primary caregiver, whatever the cause, with a parent group running alongside every session, all at no cost to families.

The Dougy Center in Portland is the national grief center for children and families. For those not able to attend in-person programs in Portland, their website offers numerous resources for families navigating a parent's serious illness or death at any stage. Their podcast, *Grief Out Loud*, is an accessible and deeply human series worth recommending to any family trying to find their footing, looking for relatable stories, and seeking advice.

These programs are vital to our



community. Lane County faces a devastating shortage of mental health providers, with wait times for child and adolescent therapy stretching months, if appointments are available at all. For families already in crisis, navigating insurance barriers, finding a therapist who accepts new patients, and sustaining regular appointments can feel impossible.

Many simply fall through the gaps. These programs don't replace ongoing mental health care, but they fill a meaningful void for children who might otherwise have no structured support at all. In a landscape where access is so limited, free, evidence-based, peer-

supported interventions that meet children where they are are so essential.

The effect this has had on my daughters is what led me to join the Camp Kesem advisory board — not only as a physician who believes in the evidence, but as a mother who has lived it.

A social worker at Willamette Valley Cancer Institute pointed to a camp flyer on her bulletin board during one of the lowest moments of my life and tore off a small info tab for me, now nearly six years ago. I left with that small piece of paper amid a firehose of information. It became a turning point for our family.

These resources exist. Overwhelmed families won't always find them on their own — but we can make sure they don't have to. ♦

Camp Kesem: www.kesem.org

Courageous Kids: www.peacehealth.org/courageous-kids

Dougy Center: www.dougy.org

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*Appointments are scheduled through Cascade Health or Joyful Living Counseling.
Lane County physicians are provided a number of free and confidential sessions annually.

3. "Cancer Support Camps and the Measurement of Quality of Life Among Children of Parents With Cancer," *Supportive Care in Cancer*, 2026.

4. "Supportive and Psychosocial Peer-Group Interventions for Children and Adolescents of Parents With Cancer: A Systematic Review," *Patient Education and Counseling*, 2023.

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A Place to Belong: Supporting Youth Experiencing Housing Instability

BY THE EUGENE FAMILY YMCA
FOR LANE COUNTY MEDICAL SOCIETY

For many young people in our community, stability isn't guaranteed, but connection, care, and a sense of belonging can make all the difference.

Through strong partnerships with Eugene School District 4J and Looking Glass Community Services, the Y is helping ensure that youth experiencing housing instability have access to safe spaces, supportive relationships, and opportunities to simply be kids.

"For our McKinney-Vento students, the Y is a safe and welcoming home base," says Kristine Craft, McKinney-Vento liaison with 4J. "Kids get ready for school here, warm up on cold days, and have caring adults who make them feel supported. It's a place where they can simply be kids."

Across the district, more than 700 students qualify for support under the McKinney-Vento Act — federal legislation that protects the educational rights of students experiencing housing instability. These young people may be staying temporarily with friends or family, living in hotels, or navigating other uncertain housing situations. What they share is a need for consistency, support, and a sense of normalcy. That's where the Y steps in.

Through reduced-cost memberships, financial assistance, and access to essentials like showers, childcare, and safe spaces, the Y helps remove barriers so youth and families can focus on school, health, and well-being. For many, it's also a place to build routine — something as simple and powerful as starting the day with stability.

For Deanna, with two children



Kristine Craft, Alison Wagner, Eve Cornelius, and Mary Kate Coy — the dedicated 4J McKinney-Vento Liaisons supporting students and families experiencing housing instability.

in elementary school, that access makes a meaningful difference.

"My son is seven and on the autism spectrum, and it's not always easy for us to get out to places," she says. "The Y gives him a chance to just be a kid — to swim, spend time in KidZone, and do things he really enjoys. Being able to experience that together means a lot."

As their family prepares to move into a new apartment, Deanna says the Y will continue to be part of their routine. "We'll still be using it. It's something that's really important for our family."

This kind of work is strengthened through a partnership with Looking Glass, the leading provider of services for youth experiencing homelessness in Lane County.

"Looking Glass serves over 5,000 youth annually across 33 locations," says Brittany Means-Luna, Vice President of Homeless Youth and Alternative Education Services. "One of the greatest needs for young people is community connection — having access to healthy activities, supportive relationships, and spaces where they feel they belong."

At the heart of this work is a shared belief: every young person deserves the opportunity to feel safe, supported, and connected.

"At the Y, we show up for our youth every day with open doors and a commitment to community," says Rachel Jackson, Youth, Teen, and Family Director. "For youth experiencing homelessness, this work is especially important. We know that we can change the trajectory of a child's life." ♦



Looking Glass Community Services Vice President of Homeless Services, Brittany Means-Luna, who serves at Looking Glass Community Services.



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Dr. Corey Rood and his partner, Joey, enjoy a stroll through Hendricks Park.

Photos provided by Angel Montes



MEMBER PROFILE

Children Come First

Dr. Corey Rood explores child abuse pediatrics through the lens of trauma-informed care, advocacy, and human connection.

BY VANESSA SALVIA

FOR LANE COUNTY MEDICAL SOCIETY

Child abuse pediatrics is not one of the glamorous medical specialties. Dr. Corey Rood, a child abuse pediatrician and medical director of Kids FIRST, knows this better than most.

The Kids First team provides intervention and advocacy for children who are victims of or witnesses to crime, most often sexual or physical abuse, severe neglect, or firsthand experience of domestic violence. Kids are usually referred to Kids FIRST through law enforcement, child welfare workers, and medical professionals. The majority of the children served by Kids FIRST are under age 12. The center sees somewhere between 600 and 700 families each year, some with more “than one child.”

“It’s not the most rainbows and sunshine work,” Rood says. “Child abuse pediatricians have a hard time voicing our importance.”

A Specialty Few Choose

The first child abuse pediatrics board certification exams were offered in 2009. Today, there are about 350 practitioners across the country. Before 2009, Rood says, physicians could complete shorter fellowships that were not board-approved or accredited. By the time Rood was graduating from residency in 2013, the child abuse pediatrics fellowship was well established. “I made the decision that I would go into fellowship because I enjoyed it so much and was drawn to it more than general pediatrics,” he recalls.

He completed his fellowship training at The Ohio State University and Nationwide Children’s Hospital in Columbus. Those three additional years focused on the medical diagnosis of all forms of child maltreatment: how they affect children, how to treat children, how to work them up, and how to prevent children from experiencing maltreatment for the first time or future maltreatment if they’ve already been victims of abuse or neglect.

Inside Kids FIRST

The Kids FIRST building in Eugene is deliberately unremarkable from the outside. Inside, it is split into two mirrored halves, each with its own family room and interview spaces designed to make children and their families feel safe.

As Rood describes what makes Kids FIRST unusual, he interlaces his fingers, tipped by perfectly manicured nails, together in front of him. Most children’s advocacy centers handle advocacy and forensic interviewing. Few have both medical and mental health services on site. “We have an entire mental health team and an entire medical team,” he says.

Forensic interviews are recorded so the entire team can watch together, and a child only has to tell their story once. Medical evaluations, including a full physical exam,

“I made the decision that I would go into [a child abuse] fellowship because I enjoyed it so much and was drawn to it more than general pediatrics... No child or family should ever go through something like that... There’s always going to be another family that needs you.”

documentation of injuries, screening for neglect, and lab work or imaging, follow when criteria are met.

The Case That Changed Everything

Rood serves as the Designated Medical Provider for Lane County under Oregon’s Karly’s Law, which requires that any child with a suspicious or confirmed inflicted injury receive a medical assessment within 48 hours and that assessment be reviewed by a qualified physician. Between 100 and 200 additional cases per year come to him for review through Karly’s Law. The center staff provides educational programming for libraries, classrooms, and community groups, covering body safety, consent, and the warning signs of abuse and neglect.

Originally from Coos Bay, Rood was raised in Salt Lake City, completed his undergraduate education in Utah, and then headed to Oregon Health & Science University for medical school. His residency took him to the University of New Mexico in Albuquerque, where his Spanish language abilities helped. Rood’s decision to become a child abuse pediatrician is “not the happiest story,” he says.

As a second-year resident working a night shift in the pediatric ICU, Rood cared for a three-year-old boy who had been brought in by ambulance with severe injuries. The story given to dispatch did not match what

paramedics found. Over three nights, Rood was on shift as the family gathered. He was there when life support was turned off.

“No child or family should ever go through something like that,” he says. What stayed with him was that cases like this needed a medical professional to stand up and say, “This is abuse, and here are the reasons why.” He watched colleagues tiptoe around the case, worried about legal involvement, but Rood felt a pull toward those cases that made others uncomfortable.

A mentor in residency, Dr. Leslie Strickler, guided him toward the fellowship. He then returned to Utah briefly before an opportunity arose at the University of California Irvine, where he spent six years as a clinician, associate professor, and division chief of the child abuse pediatrics division, serving a population of six million. The work was relentless. 60- to 80-hour weeks became routine. He was passionate, but eventually depleted.

“I’m no longer happy,” he remembers thinking. “This isn’t how I was when I first started.”

Rebuilding Professional Community

The decision to come to Eugene a little over a year ago was partially about finding a way to be happy again. His partner’s family is in Gig Harbor. His father’s side is from Oregon. He knows from experience that work-life balance is a necessity, and it’s

something he actively encourages for his team.

“There’s always going to be another family that needs you,” he says as he brings his hands together, fingers interlaced once again to indicate that both work and personal life must exist together. “But to be there for the next family, I needed to learn to be there for myself. That means putting the cell phone down, enjoying a glass of wine with my partner, laughing with friends, and just not sitting outside of work talking about work.”

His membership in LCMS is helping rebuild a sense of professional community that’s harder to maintain at a small non-profit than it was at large institutions, where interaction was built into the day. He’s already connected with a handful of physicians, including Dr. Sandra Rood, who turned out to be a distant relation.

“But to be there for the next family, I needed to learn to be there for myself. That means putting the cell phone down, enjoying a glass of wine with my partner, laughing with friends, and just not sitting outside of work talking about work.”

Why Trauma-Informed Care Matters

Trauma-informed care has become a growing topic in medicine over the past decade, rooted in research showing that adverse childhood experiences strongly affect physical and mental health well into adulthood. To Rood, trauma-informed care, as well as work-life balance, are both skills that have to be learned, practiced, and refined, the same way a physician learns any clinical technique.

“Each of our patients has a story,” he says, “and those experiences may be affecting their adherence to your recommendations, their willingness to talk and open up to you, their willingness to share the truth.”

Following a generic, scripted protocol with every patient means missing what their truth actually is. And in his line of work, truth is everything. ♦



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Building Care from the Classroom

BY SONA HODAIÉ
EXECUTIVE DIRECTOR,
SPRINGFIELD EDUCATION FOUNDATION

Springfield students are learning more than science and healthcare skills — they are discovering confidence, purpose, and the ability to care for their communities.

In a district where many students face barriers tied to under-funding, pandemic-related learning loss, housing instability, and limited access to healthcare or career exposure, hands-on programs can open doors that traditional classrooms sometimes cannot.

Through innovative classroom experiences supported by the Springfield Education Foundation (SEF), students are gaining real-world skills while beginning to see futures in healthcare and public service that once may have felt out of reach.

At Thurston High School, those opportunities come to life through Kristen Rosenblum's Career & Technical Education (CTE) Health Sciences pathway. In classrooms designed to mirror real medical settings, students practice CPR, learn first aid, and build patient care fundamentals. For many students — especially those from underserved or economically disadvantaged backgrounds — it is their first hands-on exposure to healthcare, and the first time they can realistically imagine themselves in those careers.

The immersive, real-world nature of CTE programs is especially impactful for students who thrive through experiential learning. Instead of learning solely through lectures or textbooks, students build confidence through action, collaboration, and problem-solving. These environments foster belonging, resilience, and practical skills that students carry far beyond graduation.

Programs like this are made possible through SEF's Innovative



Students at Thurston High School practice CPR using equipment provided through SEF grants in preparation for CPR certification.

Educator (IE) Grants, which provide funding for classroom projects and programs built around the needs educators identify every day.

In Springfield Public Schools, students continue to perform below state averages in both proficiency and graduation rates, with low-income and marginalized students disproportionately affected. IE Grants help bridge opportunity gaps by expanding access to innovative educational experiences and resources that district funding alone often cannot provide.

“It’s really important because of how funding works in education,” Rosenblum says. “My program gets about \$500 a year for basic supplies like pencils, paper, and gloves. You just don’t have the resources for projects like this. The grants allow you to dream. Without this, I could have taught CPR, but not actually have certified students.”

Because of SEF funding, students can now earn CPR certifications directly in class — an achievement that

creates immediate opportunities for employment, volunteer work, and future healthcare pathways. For students seeking stable local careers, those certifications can represent an important first step toward financial security and community impact.

“Career Technical Education is all about relevant, real-world instruction that helps students imagine themselves and their futures,” says Kimberlee Pelster, principal of Thurston High School. “The SEF grant is a great way to recognize the dedication instructors like Kristen bring — providing enriching, hands-on learning experiences for our students.”

The impact extends beyond technical training. Supportive learning environments and mentorship can be transformative for students navigating stress, instability, or difficult life circumstances. Programs grounded in trauma-informed practices help students feel capable, safe, and empowered while building practical life skills.

Early exposure to healthcare careers also matters because representation

Photos provided by Angel Montes

YOUTH ADVERSITY

matters. For some students — particularly first-generation college students or students from historically underserved communities — this may be the first time a healthcare profession feels attainable. Students begin to see themselves differently as future nurses, paramedics, physicians, therapists, or emergency responders.

That training also has immediate community value. Springfield includes areas where emergency response times and healthcare access can be limited. A student trained in CPR becomes a potential first responder at home, at a park, or during a family emergency. Students bring this knowledge back to their households, strengthening health literacy, prevention, and preparedness throughout the community.

And these efforts exist within a broader ecosystem of care. SEF supports every Family Resource Center across Springfield’s 21 schools, helping students and families facing barriers such as food insecurity, housing

instability, transportation challenges, and financial stress. By helping meet basic needs, schools are better positioned to help students learn, grow, and pursue meaningful futures.

SEF is especially focused on supporting marginalized students. Children of color comprise 30% of Springfield Public Schools students, including 24% who identify as Latine, and the district ranks among the top ten in Oregon for the number of students experiencing homelessness.

One in 20 students living in Springfield will experience homelessness during their lifetime. Investments in innovative learning programs help ensure students who face the greatest barriers still have access to opportunity, mentorship, and pathways toward long-term success.

Today’s student practicing chest compressions could become tomorrow’s nurse, physician, paramedic, or healthcare advocate. More importantly, Springfield is growing

future caregivers from within its own community — young people equipped not only with skills, but with compassion, confidence, and a commitment to helping others thrive. ♦



Springfield Education Foundation (SEF) is a 501(c)(3) nonprofit that partners with Springfield Public Schools to strengthen classrooms and expand opportunities for students. For over 30 years, SEF has invested more than \$4.1 million through grants to local schools, providing direct funding for programs, tools, and experiences that help students thrive. Scan above to learn more.

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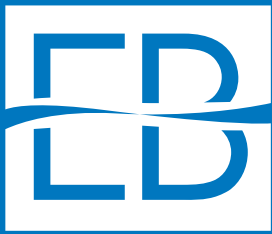


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SCAN ME



Remembering Dr. George “Wally” Johansen

George Wallace Johansen (Wally) passed away peacefully at his home in Eugene, Oregon on March 23, 2025. He was born in Edinburg, (Walsh County) North Dakota on February 22, 1932 to Henry and Frances (Murphy) Johansen.

He graduated from Bismark High School in 1949, and he graduated from Macalester College, located in St. Paul, Minnesota, in 1952. Wally attended medical school at the University of North Dakota and University of Illinois in Chicago (graduated in 1956).

Wally volunteered to serve as a Captain in the US Army Medical Corps in 1958. He served in the Army for two years and he was stationed at Enewetak Atoll in the South Pacific and at Fort Ord in California. He also served in the Army reserves until 1963. He completed medical residency in Otolaryngology at the Cleveland Clinic in Cleveland,

Ohio and at Marquette University in Milwaukee, Wisconsin. He married his first wife Carol (Churchill) in 1960. They moved to Eugene, Oregon in 1964 where they raised three children, Scott, Jill and Peter. After dissolution of his first marriage, Wally married Carol Susan Graham (Silliman) in 1994 and they spent many wonderful years together in Eugene.

Wally practiced as a dedicated and caring ear nose and throat surgeon at the Eugene Clinic and Sacred Heart Hospital (subsequently Peace Health) for more than 40 years. Wally loved to ski, jog, and play tennis. He was a member of the Eugene YMCA, Downtown Athletic Club, and the Eugene Swim & Tennis Club at various points in his life. He was actively involved in several organizations throughout his life, including the Elks Club, the Military

Officers Association, the Oregon Medical Association, and the Lane County Medical Society.

At the time of his death, Wally was survived by his wife, Carol Susan Johansen (Suzie), son Scott (his wife Christy and grandchildren Camille and Kathleen), daughter Jill (her husband Jay Staggs and grandchildren Sarah and Erik), son Peter (and grandchildren Rio and Jubilee), Carol’s son, Scott Graham (Kathy and grandchildren Duncan, Robert, and Sean), sister Marjorie Erickson, and his brother Gerald Johansen.

He was preceded in death by his sister Norma, and brothers Clinton, Robert, Ralph, Donald, Douglas, and Richard. Sadly before finalizing this obituary Suzie passed away in Eugene on July 7, 2025. Wally and Suzie left behind many wonderful friends in Eugene. ♦



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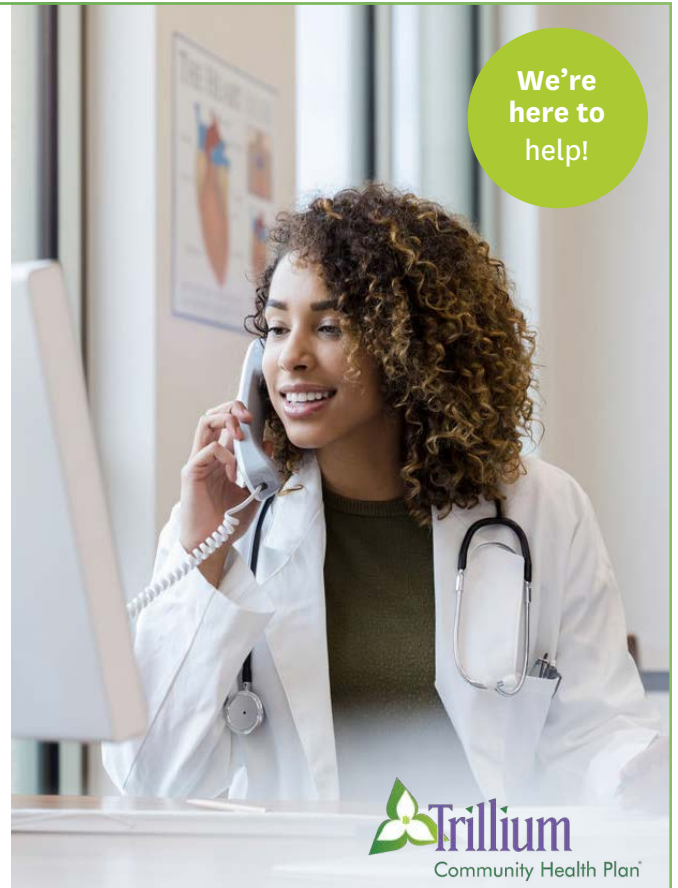
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Building for Care: Supporting Wellness Through Thoughtful Construction

At Chambers Construction, community isn't just something we talk about — it's where we live, work, and build. As a proud supporter of the Lane County Medical Society, we value the opportunity to partner with the healthcare professionals who care for our neighbors across Eugene, Springfield, and the greater Lane County area.

Healthcare in our region is deeply connected. Whether it's a family visiting their primary care provider, a specialist appointment across town, or ongoing treatment close to home, these experiences happen in spaces that should promote comfort, efficiency, and trust. At Chambers, we understand that the environments where care is delivered can make a meaningful difference for both patients and providers.

For decades, our team has been building and renovating healthcare facilities throughout the local area. From tenant improvements in existing clinics to ground-up medical buildings, we've had the privilege of working alongside providers to bring their visions to life. Each project reflects not only the technical needs of modern medicine, but also the personality and priorities of the people delivering that care.

One of the things that sets healthcare construction apart is the need to work within active, often sensitive environments. Many of our projects take place while clinics remain open, requiring careful planning, clear communication, and a deep respect for patient privacy and safety. Our teams are experienced in navigating these challenges, ensuring care can continue with minimal disruption.

We also recognize the unique character of our local healthcare



landscape. The Eugene-Springfield area is home to a diverse network of independent practices, specialty clinics, and healthcare organizations, each playing an important role in supporting the overall wellness of our community. Our approach is rooted in collaboration —working closely with physicians, administrators, and design teams to create spaces that enhance workflow, improve patient experience, and support long-term growth.

Beyond construction, our commitment extends to the well-being of the providers themselves. Physician wellness is an increasingly important conversation, and one we take seriously. The physical environment can have a real impact on daily stress levels, efficiency, and job satisfaction. Thoughtful layouts, natural light, comfortable workspaces, and efficient patient flow aren't just design features — they're tools that help create a more sustainable and supportive workplace.

Our partnership with the Lane County Medical Society is one way we stay connected to that mission. By supporting their efforts, we're investing in the people who make a difference in our community every

day. It's an opportunity for us to give back while staying engaged with the evolving needs of local healthcare providers.

As a locally based general contractor, this work is personal to us. The facilities we build and renovate are the same places where our families receive care, where our friends work, and where our community turns for care in times of need. That connection underscores our drive to deliver quality, reliability, and craftsmanship in every project.

Looking ahead, the future of healthcare in this region continues to evolve. From advancing technology to new models of care, providers are adapting to better serve patients in a changing world. Chambers Construction is proud to be part of that progress — helping create spaces that are not only functional, but forward-thinking and built to last.

We are grateful for the opportunity to support the Lane County Medical Society and the broader healthcare community here at home. Together, we are constructing more than just buildings — we are helping shape a healthier future for Eugene, Springfield, and all of Lane County. ♦

Announcements

New Members

Welcome to LCMS! We're excited to welcome our newest physician members. Visit the LCMS website for events or email info@lcmesociety.com

LCMS Events

Batter-up! Join us for a fun-filled fundraiser with the Eugene Emeralds on Friday, July 10th at PK Park!

Each ticket supports LCMS's Physician Wellness Program (PWP). Open to all—staff, friends, patients, and families. Scan the QR code for the special link to get your tickets.



Save the date! LCMS Picnic at the Park on August 29th. Stay tuned for more details!

Community

Lane County Caduceus meets every Wednesday from 7:30-8:30pm for licensed healthcare professionals seeking peer support during addiction recovery. Contact us for more info.

Join the Small & Independent Practice Physicians (SIPP) gathering on June 10 at Summit Bank.

Connect with fellow physicians and learn about small business banking, practice financing, and resources for independent practices in an informal networking setting.



NOTES

Members coordinating group events have the benefit of requesting support through the LCMS Support Form, which can range from magazine announcements to nominal financial assistance. Email us for more information.

LCMS will soon launch the Clinical Undergraduate Shadowing Program (CUSP), a shadowing initiative designed for undergraduate students interested in medicine. To learn more or be added to the interest list, please email angel@lcmesociety.com.

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