



Healing wounds Valir Wound Care & Hyperbarics Center opens



The Valir Rehabilitation Hospital has opened the Valir Wound Care & Hyperbarics Center with two hyperbaric chambers to promote the healing of serious wounds, says Shelli Freeman, RN and clinical nurse manager.

by James Coburn
Staff Writer

The Valir Wound Care & Hyperbarics Center opened in early June in midtown Oklahoma City, said Shelli Freeman, RN and clinical nurse manager and a wound care certified nurse.

The Wound Care Team is participating in the "White Sock Campaign" September's

Peripheral Artery Disease Awareness Month, an effort that originated to raise awareness for diabetes, peripheral arterial disease, PAD, and the prevention of amputation.

This month, Valir is raising awareness around PAD, a condition that causes narrowing of the peripheral arteries and restricts blood flow throughout the body. PAD is most common

in the legs, where blocked vessels can cause sores and foot ulcers. These sores can result in amputation if not treated properly.

Set inside Valir Rehabilitation Hospital, all wound care patients at Valir Wound Care & Hyperbarics Center are seen by a physician. There are three treatment rooms where they render complete patient assessments for nutrition, vascular and lifestyle to determine what is causing the wounds. Adjustments may be made to help patients in their healing process, Freeman said.

One of the adjunct therapies available in the

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Extra light of hope Phase 1 clinical trials provide hope at Stephenson Cancer Center



Dena Suthers, RN, senior oncology research nurse team lead at Stephenson Cancer Center enjoys giving cancer patients more time to see their children graduate from high school or from college.

A lot of cancer patients have been told their options are exhausted. Stephenson Cancer Center provides an extra light of hope.

Stephenson Cancer Center ranks in the top three cancer centers for clinical trial enrollment in the nation. The National Cancer Institute sponsors trials. And Stephenson Cancer Center offers more clinical trials than anyone in the state. It also has the only phase 1 clinical trials in the state offering cutting edge therapies coming to the market.

Some of the patients come to Stephenson after having been told that they have run out of treatment options in Oklahoma.

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SUTHERS

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These patients no longer have to go out of state to M.D. Anderson or the Mayo Clinic for treatment. They no longer have to travel and be away from their families.

It means that potentially in the last years of their lives, they can remain nearer to their homes. It provides peace of mind.

Phase 1 is typically for drugs that have not been FDA approved, said Dena Suthers, RN, senior oncology research nurse team lead. She has been with Stephenson for two years. They are clinical trials patients can be eligible for and enroll in for cancer treatment.

"Both sets of my grandparents have had a family history of cancer," Suthers said of what prompted her trajectory of care. "And seeing some of our limited options were at times for treatment and how that can be on the patients -- hearing this, and an opportunity to give patients more than just your standard therapy of treatments was a big thing for me."

Family is important to Suthers. She has a 3 year old and a 10 year old who keep her busy. Her work is an investment in the future of humanity.

These are drugs that are very new and innovative with advanced therapies. They are usually for patients with advanced stages of reoccurring cancers who need to see what options exist.

Sometimes the treatments do not work or the patients are not eligible for the clinical trials. But it gives patients and their families peace of mind knowing they tried the next avenue of treatment, too.

"Our role is to see patient records, review them to see studies they may be eligible for," she said. "And then we set them up with a consult of physicians about maybe what the drug is, maybe any side effects, the plan for treatment and any extras they have to get while they are in the study."

She works in the background gathering information so the patient can be in the correct spot for a clinical treatment.

The research nurses will do extra safety checks and the require lab work with diagnostic tests pertaining to a cancer type. Suthers will then set the patients up for the screening to make sure they are eligible. Once the patients are enrolled they are moved to the infusion team that will complete the treatment.

"We have a strict protocol on

inclusion and exclusion, items they have to fit in order to be enrolled to receive their trial drug," she said. "If they are eligible for the study we put all of the information together to submit to the sponsor which would be the drug company."

Suthers is the lead nurse over three other registered nurses and a licensed practical nurse. There are also eight RNs or LPNs rendering the infusion process. Nurse practitioners and physicians fill the team.

"We have 30 different studies currently," Suthers said. "The numbers of patients fluctuate depending on when a patient gets on a study. It depends on whether the drug is working for them and they can stay on the study, and if the drug is maybe causing some side effects. So it fluctuates on how many patients."

"But on an average we enroll 15 new patients a month."

To get a patient on a study will usually take 20 hours of review and consultation. There is also a lot of educating and the review of results in getting the packet together, she said.

Phase 1 nurses are specialized in their approach. Phase 1 studies are set in a separate clinic where patients can be monitored by Phase 1 infusion nurses that are trained to watch for subtle nuances that could affect an outcome.

It is reflective of the Oklahoma Spirit for nurses to know they are

doing something vital that potentially can extend lives.

The department continues to grow and evolve. Suthers can see a difference even during the time she has been with Stephenson Cancer Center.

"It used to be that this is for people as a last option. Now we have studies that are for a very first treatment," she said. "It could be a second line options, a third line option or an option for when they have run out of their standard of care online chemo that have been FDA approved."

A specialized treatment of care for a myriad of cancer types is leading the future of cancer treatment. The specific makeup of each tumor results in the best options for treatment, Suthers said. All cancers are different and have subsets.

"It is outside the ordinary box of 'This is how we have always treated lung cancer.' So that's been cool to see," Suthers said. "Our job with the physicians is to see where do you fit in all the different categories."

She will advocate across the nation for her patients. There are a certain number of slots available across the U.S. for phase 1 treatments. Cancer Centers are competitive. Suthers will see if she can trade slots, when appropriate, with other studies or request to over enroll.

"It's fun figuring out the puzzle," she said. "You become very close with them and their families."



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Nurse Practitioner welcomed to St. Anthony Physicians Group

St. Anthony Hospital is pleased to welcome April Johnson, MSN, APRN, CNP, to St. Anthony Physicians Group Rheumatology.

Johnson is a certified Family Nurse Practitioner. She earned her undergraduate degree in nursing from the University of Oklahoma Health Sciences Center. She then went on to complete her Master of Science in nursing, specializing as a Family Nurse Practitioner, at Midwestern State University in Wichita Falls, Texas.

St. Anthony Physicians Group Rheumatology is located on the second floor of St. Anthony Healthplex North, 13401 N Western Ave, Suite 210. To schedule an appointment please call 405-272-4943.



April Johnson, MSN, APRN, CNP

VALIR

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wound care center is hyperbaric oxygen treatments. Two hyperbaric chambers are used for different modalities.

"Some primary indications are diabetic foot ulcers that are not healing, infection of the bone and a list of other things that are determined appropriate for hyperbaric oxygen treatment," she said.

The treatment works well with bio-therapy skin grafts, burns, surgical debravements, compression wraps and different modalities to help wound heal, Freeman said. A car accident or a fall may lead to a serious wound.

"Especially in Oklahoma we know that we have a large percentage of our population that are diabetics," Freeman said. "Diabetics do not heal as fast as the average person does. So with that being said with the high number of diabetics we also have a large number of non-healing wounds."

Most wounds are difficult to heal not only due to diabetes, but because of respiratory problems and medications used for treatment.

Freeman said the goal of Valir Wound Care & Hyperbarics Center is to help everyone with non-healing

wounds to heal faster. Decreasing the number of amputations is a factor in improving wound-care patients' quality of life, she said.

The clinic has a unique opportunity of presenting more than 150 years of specific wound care experience. This is very special.

"Not a lot of centers can say that," Freeman said.

The process of hyperbarics brings to use 100 percent oxygen that is under compression. The chamber is equivalent to being 33 feet below sea level, or two-and-a-half atmospheres below sea level.

"That compression breaks the oxygen down in smaller particles where not only the red blood cells can carry the oxygen but the plasma can be absorbed," Freeman explained. "That along with vasodilation, aids in getting blood, oxygen and maybe antibiotics to areas that had been restricted prior to the treatment."

An average treatment span for hyperbarics is between 20 to 40 treatments. The treatments are everyday, Monday through Friday, Freeman said. A single visit is approximately two hours long. The beneficial treatment is about 90 minutes depending on specific orders, she said.

Comfort is an important factor at

the Valir Wound Care & Hyperbarics Center. Patients may watch a video or movie they bring from home during their treatment time. Each chamber is equipped with a television screen for viewing pleasure.

They can also watch material provided by the clinic. Many patients have started a Netflix series to view entirely during the duration of treatment.

"We encourage them to watch a movie or see themselves as lying on their couch during their treatment for the day and not focus on the fact that they are inside the chamber," Freeman said. "They can relax, enjoy their movie or take a nap."

"Our hyperbaric technician has over 17 years experience. He is compassionate to the patients and is there for their every need."

Other types of wound care are available. After doing a full assessment, there are nine essential steps of wound healing that are considered.

Different modalities are typically the debravements, topical ointments and dressings. A debravement is a surgical procedure a physician renders at the bedside with a topical anesthetic.

"It's a process where the surgeon removes the non-viable tissue," Freeman said. "It allows to get the bad stuff out

and the body to heal itself."

Freeman said she has a personal investment in the entire industry of healing wounds. She decided early in life to become a nurse when seeing how diabetes impacted her father's life.

"So I had grown up with a diabetic father and the affects that had not only on him but the entire family," Freeman said.

While earning her nursing degree at Seminole State University, Freeman learned how diabetes affects a patient in a myriad of ways. Wound care with diabetes has a major impact on life, she said.

"I became very passionate and saw the need to learn as much about that as possible to help my own father as he progressed through his disease process," Freeman said. "And I look at every patient that comes in as someone's mother, father, son or daughter."

She treats them as family. The staff doesn't look at the hole in the patient. They look at the whole patient. They know that the wound affects their entire lifestyle.

"I really try to look at that component of each patient that walks through the door," Freeman said. "I take a personal investment in seeing their quality of life improve."

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CAREERS IN NURSING

QUALITY AND TRUST - HOME CARE ASSISTANCE PLANS OPEN HOUSE

by James Coburn - Writer/Photographer

A big community celebration is in store for Home Care Assistance, a company based in Edmond, said Greg Bridges, RN, owner of Home Care Assistance with Melissa Hill. The company began two years ago and will be celebrating on September 15.

"We're celebrating essentially our clients," Bridges said. "We've had such a variety of clients. You bond with families and you bond with the clients. And we celebrate our caregivers as well."

This open house celebration is set for 2-7 p.m. September 15 at 323 S. Blackwelder in Edmond.

He said the journey of Home Care Assistance has been a unique exposure to the community. When the company opened, Bridges thought it would primarily provide home care assistance to clients in their homes. But he found many of them live in assisted living facilities, so the company has become heavily involved

in that arena of care as well.

"Some of the ways I think we are unique is the owners are right here," Bridges said. "The buck stops here. You have a lot of situations where the owners actually do the assessments."

Home Care Assistance provides non medical care. Bridges is a registered nurse and writes a care plan based on an assessment he makes for individuals. The care plan allows caregivers to report unusual health problems that might pop up or have otherwise been overlooked. A home health care company might also be involved. The caregivers do not diagnose but simply assess and report back to Bridges.

"We are the other side of that. We take care of A through Z. You're looking at bathing, grooming, sometimes feeding, dressing, safety, transfers, medication reminders and housekeeping," he said.

The caregivers are certified nurse

aides who are also home health aides. Usually there is an aspect of hands-on care that calls for assistance by a CNA. The state requires a CNA and not a home health aide to handle a situation when somebody falls. Pathways are cleared for safe mobility.

Home Care Assistance caregivers also provide social interaction which is a much needed resource to keep individuals from being isolated in their own communities.

"We know that most seniors don't want to go into a nursing home. They don't want to leave their homes and want to stay," Bridges said. "One of the things we offer is one-on-one, so the safety factor is way high. That is one of the reasons we are in so many separate facilities."

Its approach is to provide ways for the elderly to be connected with the world by getting them out and about in a way that reflects the senior's personal best.

"We try to engage them in a number of ways. So it's a lot of reminiscing, socialization; we try to get them out as they can tolerate or as they want," he said. "We try to also be like a family member would be. Sometimes it involves games or something they have done in the past."

People living with dementia tend to focus on memories from the past. They feel they are functioning better when they recall moments in life.

If the client has been an artist then Home Care Assistance encourages such activities. Clients may take trips to a senior center as well.

Home Care Assistance employs about 30 caregivers and is on-call 24/7. There is a lot of in-house training to maximize their potential to serve their clients' needs.

The balanced care approach provides emotional, physical and spiritual support.

Many of the caregivers engage



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The Wilkes

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Jared Wanzer Photography

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LifeShare



Home Care Assistance celebrates its second year anniversary this year, says Greg Bridges, RN, owner of Home Care Assistance with Melissa Hill.

clients in the kitchen to help them prepare meals. The more a client can do independently produces a cumulative impact on their lives. They begin feeling a deeper sense of purpose, Bridges said.

It is a business of humanity that employs many skills. Hill came from a marketing background within the health care industry. They once worked together at OFMQ, so she was very involved with the quality measures that Home Care Assistance now provides in best practices.

Bridges has also learned in life that it essential to be a good caregiver to oneself. He likes to travel. His

family owns a beach house in Maine, so he likes going there and also visiting family in Florida and New York.

"I am physically pretty active I like lifting weights and riding bikes. I used to competitively cycle and have a sports background. My youngest daughter is 11 and I love spending time with her," he said.

All this focus on the richness of life infuses his energy to move forward and operate a successful company. It is a delicate balance that enriches his life. And Home Care Assistance helps to maintain a clean, safe and healthy environment for its clients.



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Edmond Republican Women Book Donation to INTEGRIS Health Edmond



The Edmond Republican Women's Club donated books to babies born at INTEGRIS Health Edmond in September in honor of Literacy Month.

The mission of the ERWC is to create a united effort to rise up as one voice, for a democracy creating a better future for our children and grandchildren.

They donated the book "On the Night You Were Born".

Pictured are several club members including EWRC President Sandra Naifeh and "Caring for America" chairperson Deb Corbett; also Dr. Katie Shepherd, OB/Gyn, Lauren Bailey, Women's Center Clinical Manager and Evelyn Radichel, Women's Center Clinical Director.

Academy Students Brighten Up Pediatric Unit at Medical Center

With the start of a new school year comes a sweet story of students doing something positive for their community.

Elementary students at the Stanley Hupfeld Academy at Western Village, under the direction of Art Teacher Allison Canton, created colorful ceiling tiles for the Pediatric Unit at INTEGRIS Baptist Medical Center.

Thanks to their generosity and artistic talent, hospitalized children now have something other than white sterile ceiling tiles to look at.



Examples of the art work that is making the Pediatric Unit at INTEGRIS Baptist Medical Center much more kid-friendly and inviting.

Oklahoma's Nursing Times Hospice Directory

- another free service provided by Oklahoma's Nursing Times -

Alpha Hospice: 7512 N Broadway Ext., suite 312 Okc, 405-463-5695 Keith Ruminer/volunteer coordinator/chaplain

Autumn Bridge Hospice: 405-440-2440

Autumn Light Hospice: 580-252-1266

Carter Healthcare & Hospice: OKC - OKC Pat McGowen, Vol. Coordinator, 405-947-7705, ext. 134; Tulsa - Samantha Estes, Vol. Coordinator, 918-425-4000

Centennial Hospice: Becky Johnson, Bereavement Coordinator 405-562-1211

Choice Home Health & Hospice: 405-879-3470

Comforting Hands Hospice: Bartlesville: 918-331-0003

Companion Hospice: Steve Hickey, Vol. Coordinator, Guthrie: 405-282-3980; Edmond: 405-341-9751

Compassionate Care Hospice: Amy Legare, Bereavement/Vol. Coordinator, 405-948-4357

Cornerstone Hospice: Vicky Herrington, Vol. Coordinator, 918-641-5192

Crossroads Hospice: Elizabeth Horn, Vol. Coordinator, 405-632-9631

Cross Timbers Hospice: Ardmore-800-498-0655 Davis-580-369-5335 Volunteer Coordinator-Shelly Murray

Excell Hospice: Toni K. Cameron, Vol. Coordinator 405-631-0521

Faith Hospice of OKC: Charlene Kilgore, Vol. Coordinator, 405-840-8915

Frontier Hospice: Kelly Morris, Vol. Coordinator, 405-789-2913

Golden Age Hospice: 405-735-5121

Good Shepherd Hospice: 4350 Will Rogers Parkway Suite 400 OKC OK 73108 405-943-0903

Grace Hospice Foundation: Sharon Doty, Dir of Spec. Projects - Tulsa 918-744-7223

Harbor Light Hospice: Randy Pratt, Vol. Coordinator, 1009 N Meridian, Oklahoma City, OK 73107 405-949-1200

Horizon Hospice: LaDonna Rhodes, Vol. Coordinator, 918-473-0505

Heartland Hospice: Shawnee: Vol. Coord. Karen Cleveland, 405-214-6442; OKC: Vol. Coord. Tricia Woodward, 405-579-8565

Heavenly Hospice: Julie Myers, Coordinator 405-701-2536

Hope Hospice: Bartlesville: 918-333-7700, Claremore: 918-343-0777 Owasso: 918-272-3060

Hospice by Loving Care: Connie McDivitt, Vol. Coordinator, 405-872-1515

Hospice of Green Country: Tulsa: 918-747-2273, Claremore: 918-342-1222, Sapulpa: 918-224-7403

INTEGRIS Hospice, Inc. & the INTEGRIS Hospice House: Ruth Ann Frick, Vol. Coordinator, 405-848-8884

Hospice of Owasso, Inc.: Todd A. Robertson, Dir. of Marketing, 877-274-0333

Humanity Hospice: Kay Cole, Vol. Coordinator 405-418-2530

InFinity Care of Tulsa: Spencer Brazeal, Vol. Director, 918-392-0800

Indian Territory Home Health & Hospice: 1-866-279-3975

Interim Healthcare Hospice: 405-848-3555

Image HealthCare : 6116 S. Memorial Tulsa, Ok. 74133 (918) 622-4799

LifeChoice Hospice: Christy Coppenbarger, RN, Executive Director. 405-842-0171

LifeSpring In-Home Care Network: Terry Boston, Volunteer and Bereavement Coordinator 405-801-3768

LifeLine Hospice: April Moon, RN Clinical Coordinator 405-222-2051

Mercy Hospice: Sandy Schuler, Vol. Coordinator, 405-486-8600

Mission Hospice L.L.C.: 2525 NW Expressway, Ste. 312 OKC, OK 73112 405-848-3779

Oklahoma Hospice Care: 405-418-2659 Jennifer Forrester, Community Relations Director

One Health Home Health in Tulsa: 918-412-7200

Palliative Hospice: Janet Lowder, Seminole, & Sabrina Johnson, Durant, 800-648-1655

Physician's Choice Hospice: Tim Clausing, Vol. Coordinator 405-936-9433

Professional Home Hospice: Sallisaw: 877-418-1815; Muskogee: 866-683-9400; Poteau: 888-647-1378

PromiseCare Hospice: Angela Shelton, LPN - Hospice Coordinator, Lawton: (580) 248-1405

Quality Life Hospice: 405 486-1357

RoseRock Healthcare: Audrey McCraw, Admin. 918-236-4866

Ross Health Care: Glenn LeBlanc, Norman, Chickasha; April Burrows, Enid; Vol. Coordinators, 580-213-3333

Russell Murray Hospice: Tambi Urias, Vol. Coordinator, 405-262-3088; Kingfisher 405-375-5015; Weatherford-580-774-2661

Seasons Hospice: Carolyn Miller, Vol./ Bereavement Coordinator, 918-745-0222

Sequoyah Memorial Hospice: Vernon Stone, D. Min. Chaplin, Vol. Coordinator, 918-774-1171

Sooner Hospice, LLC: Matt Ottis, Vol. Coordinator, 405-608-0555

\$6.5 million grant will benefit cardiovascular research at OMRF



Oklahoma Medical Research Foundation scientist Rodger McEver, M.D.

The Oklahoma Medical Research Foundation has received a five-year, \$6.5 million grant from the National Institutes of Health. The grant will continue support for OMRF heart and blood research that's been ongoing for more than a decade.

First awarded in 2003, prior Center of Biomedical Research Excellence (COBRE) in Vascular Biology grants to OMRF have provided almost \$23 million for recruiting and mentoring top-tier junior investigators and supporting their research with state-of-the-art core laboratory facilities.

"The original rounds of funding went to support our investigators while they were newer and getting established at OMRF," said Rodger McEver, M.D., who runs the project and is head of OMRF's Cardiovascular Biology Research Program. "Now they're all scientists with their own funding, so the COBRE did exactly what it was supposed to do: mentor young researchers and prepare them to work independently."

Numerous OMRF researchers have benefited from the COBRE, said McEver, including Courtney Griffin, Ph.D., Tim Griffin, Ph.D., Lijun Xia, M.D., Ph.D., and Sathish Srinivasan, Ph.D. Their work has helped advance understanding of several major disease areas, including arthritis, colon cancer, inflammatory bowel disease and vascular disorders such as lymphedema.

The latest grant will primarily cover costs for shared research resources like microscopy, which will help cement the long-term success of scientists' research projects.

"The newest, most-sophisticated technologies are expensive, but by centralizing how they're run, we can put them together in an efficient way," McEver said.

According to McEver, the grant is testament to the accomplishments of the scientists who've worked on the project over the past 13 years. "We've had a lot of success with the people who were part of the first phase of the project. Their achievements really show how successful this COBRE initiative can be and exactly what it can accomplish with hard work."

Funding for this research is provided by grant 1P30GM114731 from the National Institute of General Medical Sciences, part of the National Institutes of Health.

The Hospice Directory above does not represent a list of all Hospice facilities statewide. For a complete list visit www.ok.gov/health



Vicki L Mayfield, M.Ed., R.N., LMFT
Marriage and Family Therapy Oklahoma City
If you would like to send a question to Vicki, email us at news@okcnursingtimes.com

Q. Do you think it is ok not to forgive someone who has hurt you?

A. I too have asked myself this question? The subject of forgiveness can be complicated by religious beliefs and scriptural references rendering us in a position to often feel guilt and shame if we choose not to forgive.

Recently I had the opportunity to hear a lecture by Dr. Janis Spring who wrote the book, *How Can I Forgive You? The Courage to Forgive, The Freedom Not To*. I want to share some of her wisdom about the subject. This made sense to me and validated my own struggle with forgiveness.

There are two unhealthy responses to interpersonal wounding: 1. **CHEAP FORGIVENESS** *Cheap forgiveness is a quick and easy pardon with no processing of emotion and no coming to terms with the injury *It is premature, superficial, undeserved, *It is an unconditional, unilateral, often compulsive attempt to keep the peace.

People often say, "we have moved on." Moved on where? 2. **REFUSING TO FORGIVE** *Refusing to forgive is a reactive, rigid, often compulsive response to violation that cuts hurt parties off from life and leaves them stewing in their own juices. *It is a decision to continue punishing the offender.

There are two healthy responses to interpersonal wounding: 1. **ACCEPTANCE** *It is a healing gift to the self *It is a responsible, authentic response to an injury when the offender can't or won't engage in the healing process - when that person is unwilling or unable to make good. *It is the realization that we will never get the apology or recognition of the pain that has been perpetrated on us. 2. **GENUINE FORGIVENESS** *Genuine forgiveness is a hard-won transaction, an intimate dance between two people bound together by an interpersonal violation. *As the offender works hard to earn forgiveness through genuine, generous acts of repentance and restitution, the hurt party works hard to let go of resentments and need for retribution.

You are not a better person if you forgive.

The person who hurt you becomes a better person if he/she genuinely feels remorseful and makes atonement.

Forgiveness is very personal. No one knows the depth of your pain but you.

A narcissist will not forgive - there is an avoidance of the complex understanding of forgiveness.

Baby Safety Awareness Month: Preventing Preventable Injuries

According to Safe Kids Worldwide, preventable injury is the number one cause of death of children in the United States. Every year 8,000 families lose a child because of preventable injury, and nearly 9 million children are treated for injuries in emergency departments every year.

When it comes to accidents, we know some are inevitable such as a slip or a fall, as its part of growing up. However, it's important that we safe guard our families, providing the safest environment possible. "The safety needs of babies and children change as they get older and more mobile," said Angela Strickland, RN, MSN, Women and Pediatrics' Educator & Perinatal Bereavement Coordinator at St. Anthony Hospital. "It is important to anticipate those changes before they occur," she added. Babies learning how to crawl and walk are two examples of anticipated changes. "Prior to a baby starting to crawl around the home, it is important to cover electrical outlets, move breakables and other small items, move cords out of reach and ensure there are no small items the baby could place in their mouth," suggested Strickland. Parents should also be prepared for climbing phases. "It's important to safe guard large pieces of furniture or items that they may grab or climb on that aren't stable."

From plants and pets to house hold chemicals and more, there are many items in homes that can be considered hazardous and dangerous. Baby gates, cabinet locks, and just keeping some items out of reach can make the environment safer, but the importance of safety extends further than just your home. "It's extremely important that parents read the manual that comes with their baby's car seat, as well as the car manual, to ensure they are installing and using the car safety seat correctly," advised Strickland.

Safe Kids Worldwide reports that road injuries are the leading cause of unintentional deaths to children in the United States. Just by correctly using child safety seats, the risk of death can be reduced by as much as 71 percent. "The Oklahoma State Department of Health has a program that can assist parents in the correct use of their car seat, as well as assist them installing the seat," said Strickland.

Other important baby safety tips include proper toy safety. "Children who begin riding bikes and other outdoor toys should use proper safety equipment including helmets and pads," reminded Strickland. Parents should also be aware of safety when participating in outdoor activities. "A child should NEVER be left unattended around water such as pools, hot tubs, fish ponds, lakes or other bodies of water," she warned.

September is recognized as baby safety month, but as we've seen, it requires our full attention year round. For more information on injury prevention for babies visit the Oklahoma State Department of Health at ok.gov, the American Academy of Pediatrics at healthychildren.org, or Safe Kids Worldwide at safekids.org.

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Linda Cook, RN, associate dean, professor.

"I like to exercise and spend time outdoors."



Diana Blackman, RN, chair of the Gateway Education Program.

Each week we visit with health care professionals throughout the Metro



Please Let us know Your Thoughts

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"I like to sew and I like to take walks with my dog."



Sara Manning, RN, chair of Clinical and Laboratory Education.

"Garage sales. I love to go garage selling for treasures. It's all about the hunt."



Stacie Swim, RN, clinical instructor.



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