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Encouraging words LPN helps OBGYN patients by setting them at ease

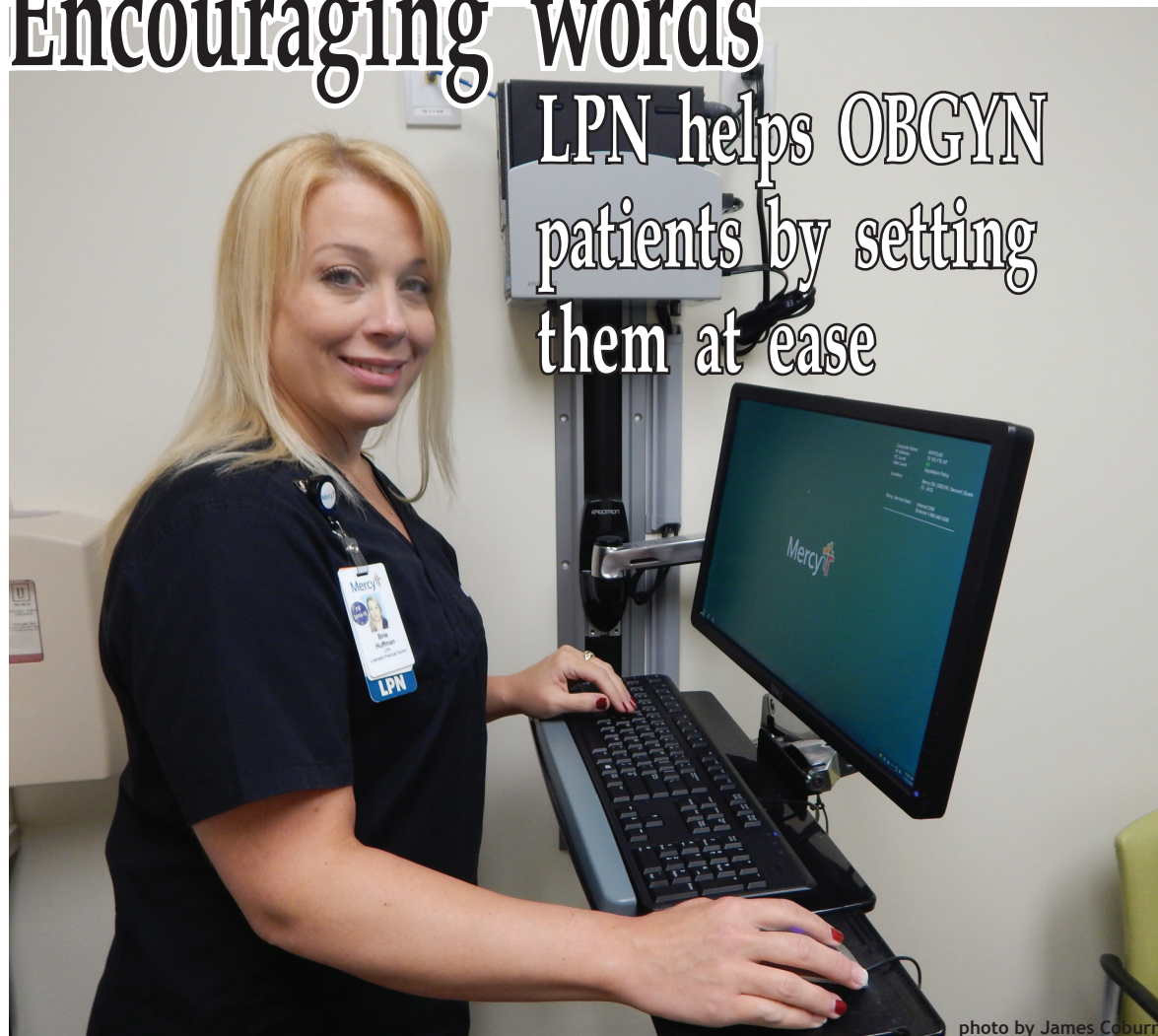


photo by James Coburn

Brie Huffman feels good about her role as an LPN at Mercy Edmond I-35. She says being physically active will help expectant mothers during labor.

by James Coburn
Staff Writer

Brie Huffman has a knack for identifying with her patients well and putting people at ease. She takes care of OBGYN patients in the

clinic of Dr. Cunningham at Mercy Edmond I-35.

"Most of the things they go through, I've been through. I've been a mother," said Huffman, LPN. "I've had some of the problems

they're suffering from, and some of the surgeries they're about to endure I've had myself."

A licensed practical nurse, Huffman has worked with expectant mothers for the last 10 years. The first eight years of her career were spent gaining experience in a hospital, long-term care and home health.

She earned her nursing degree at the Moore/Norman Technology Center and has been an

FIRST RN TO BSN GRADS TO RECEIVE DEGREES AT OC COMMENCEMENT

Oklahoma Christian University (OC) will present 98 graduate degrees and four undergraduate degrees at its summer commencement ceremony on Aug. 14. The ceremony starts at 10:30 a.m. in OC's Hardeman Auditorium.

The undergraduate candidates come from OC's School of Education and School of Nursing, including the first graduates from the university's RN to BSN degree completion program.

The 98 master's candidates will receive degrees in 15 different areas of study through OC's Graduate School of Business, Graduate School of Engineering and Computer Science, and Graduate School of Theology.

The 62 recipients of OC's master of business administration degree pursued one of nine tracks: accounting, finance, general business, health services management, human resources, human resources management, leadership and organizational development, marketing, and project management.

The 27 recipients of OC's master of science in engineering degree pursued one of four tracks: electrical and computer engineering, engineering management, general engineering, and mechanical engineering. The other graduate candidates will receive a master of accountancy degree or master of divinity degree.

Overall, the degree candidates come from a combined nine states and nine countries.

Burt Smith, an OC professor at both the undergraduate and graduate levels, will deliver the commencement address.

Smith is a respected marketing professional in the Oklahoma City metro. He owns EMI Research Solutions and has served clients such as Cox Communications, OG&E, Blue Cross and Blue Shield, Subway, and the Oklahoma City Zoo.

His many honors include OC's 2009 Gaylord Chair of Distinguished Teaching award, the Journal Record's Centennial Class of Achievers Under 40, and Business OKC's



OKLAHOMA CHRISTIAN UNIVERSITY

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HUFFMAN

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LPN licensed in good standing for 18 years.

Empathy comes easy for Huffman as she provides compassionate care for the women she helps. It's also rewarding for her to take care of new moms who experience the miracle of birth. Some of the expectant mothers have never had children before.

"Common questions are obviously about symptoms they have never experienced in their life," Huffman said. "Pregnancy is a huge change for your body, and there are many things that are normal, that are also alarming to them. So my biggest job is to relieve their fears."

Husbands will frequently accompany their wives to the clinic where they are made to feel welcome. They love to hear their baby's heart beat or hear the ultrasound when we do a new OB visit," Huffman said. "Husbands get to see their baby for the first time. It's really powerful. We see husbands tear-up a lot. It's just great."

Mothers will usually return to the clinic about a month after their babies are born. Mercy likes to retain its patients by having them come

back every year, she said.

"We can monitor their overall OBGYN health every year with annual exams or other needs that may arise if they're having problems, or if they need guidance on being pregnant in the future," she continued.

Huffman said she loves Mercy's mission of providing compassionate care. It is the core value that she carries as a nurse. Huffman wants to help people and to understand that she does not come from a place of judgement, she said.

"I come from a place of love in the care that I provide to my patients every single day," she explained.

Huffman also helps to educate Dr. Cunningham's patients about the benefits of breastfeeding infants. There is a packet explaining the benefits of lactation that is given to patients.

"Dr. Cunningham doesn't believe in giving them formula to start out with," Huffman said. "We encourage throughout the pregnancy breastfeeding."

Women who are concerned about any difficulties they experience with breastfeeding their babies are referred to a lactation consultant through Mercy. Breastfeeding helps

to enrich the immune system of a baby. Breastfeeding also helps with bonding, she said.

Smoking during pregnancy is also discouraged. Expectant mothers are encouraged not to smoke and are provided resources about smoking cessation. They are given a number to call, 1-800-QUIT-NOW to help them.

"They'll provide nicotine patches. They'll provide counseling and services to actually move them through the process of quitting," Huffman said. "Fortunately very few of my patients come in from smoking, or if they did smoke before they got pregnant, they quit or are quitting."

Huffman has seen a lot of positive outcomes among former smokers who quit smoking for their own sake and for the health of their babies. They begin to lookout for themselves more so they can be more attentive to their baby.

Nicotine has an impact on the fetus as it matures. Smoking incurs the risk of low birth weight babies. It can cause respiratory problems at birth as the pre-term labor risk increases. Some expectant mothers may not even be aware of the dangers that smoking imposes on a baby's health, so education is

key. And Huffman loves successful outcomes among her patients.

"It's rewarding. A lot of people have jobs and go home without really caring about what they do," said Huffman, who likes to work out during her spare time. "I care about what I do. I go home every day feeling fulfilled. I feel I have made a difference in someone's life. If I can make this experience that is awkward and frightening, less awkward and frightening for them, they usually leave here with a smile on their face. They feel comfortable they were taken good care of."

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CAREERS IN NURSING

RESPONSIBLE ADVOCATE: ADON GAINS WISDOM WHILE SERVING ELDERLY

by James Coburn - Writer/Photographer

Tracy Lemons, RN, enjoys taking care of the elderly at Bradford Village in Edmond because it's one of the few professions in life that allows her the opportunity to be able to make a difference in the lives of people who can no longer fully care for themselves, she said.

"I enjoy listening to their life stories and I gain a lot of wisdom from their experience," said Lemons, assistant director of nursing at Bradford Village in Edmond. She has been in nursing for more than 25 years.

Lemons became a registered nurse in 1996 and has served the residents' health care needs at Bradford Village since April.

She earned her Bachelor of Science in Nursing degree at Oklahoma City University's Kramer School of Nursing in 1996. Before she became a registered nurse, Lemons had worked as a CNA at St. Anthony Hospital in Labor and Delivery. Her experience primed her

to become a nurse. She worked as an RN at St. Anthony in rehab and skilled nursing for seven years before accepting a position in a nursing home as nursing director at Edwards Redeemer in Oklahoma City.

"I'm of the impression that the cycle of life -- if we are allowed to live out our days -- all of us are going to one day be elderly," Lemons said. "So I know that elderly people are special. They have walked through this life and some of them are now at the end stages. And I think they add a significant value to life."

She has learned more about different decades of American life through conversations of family life and their careers. Residents also share some of the funniest stories with her.

"I remember when I worked at a home. There was a lady and she was about 89 years old," Lemons said. "She had a very vivid memory

of her past."

The woman's father had been a preacher and she loved him. So her father would always try to be perfect.

"She said, 'I want to tell you this.' She said, 'In the end, my father realized his feet were made out of clay just like everybody else's,'" Lemons said. "So you never forget that your feet are made out of clay."

It's stories like that which Lemons gains wisdom as she appreciates the elderly, she said. Lemons also is grateful to work with a group of nurses who are loyal to the residents living at Bradford Village, she said. Part of the mission statement at Bradford Village is when you put the resident first, the bottom line will take care of itself, Lemons said.

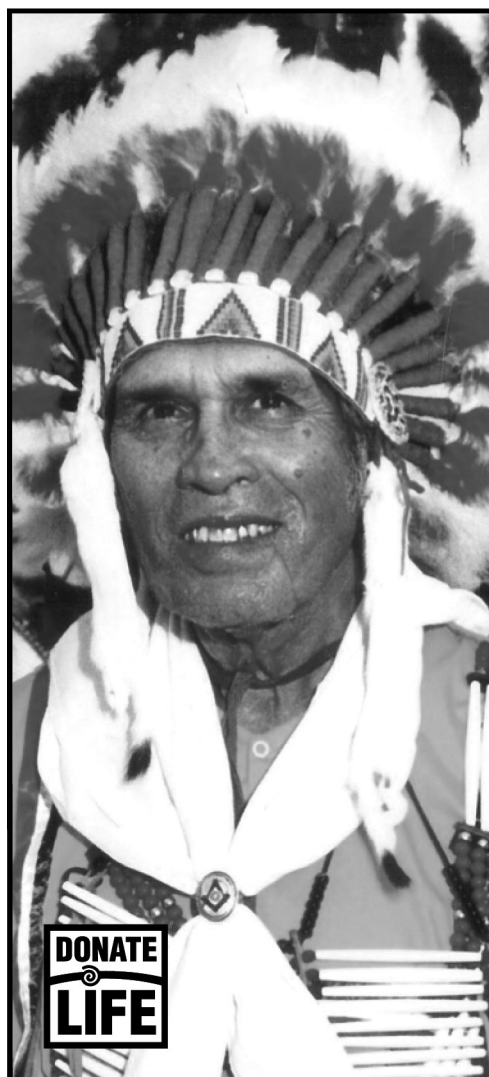
"Because we know that, we always want to ensure that we are giving them the best quality of care that we possibly can," she added.

Lemons spends her leisure time studying God's word she finds in the Bible. She also listens to music.

There are many career avenues for nurses. And, there are special qualities a nurse needs to work in the field of long-term care. Lemons said the main quality a nurse needs to have is to be a responsible advocate for the elderly, especially with Alzheimer's disease increasing in scope in the United States. A lot of men and women living with dementia are not able to communicate their needs, she said.

"And so you have to anticipate their needs," she said. "And try to in some way include them and incorporate them in their plan of care, because I think many times they feel inadequate when their mental abilities are declining. So it's in those times that nurses need to be an advocate to ensure they receive the highest level of care."

Both Lemons and the author of this story had a father with



Our dad was everything. He was a baseball player, bull rider, musician, welder, jewelry maker, Air Force Korean War veteran, Shriner and Cherokee dancer. What a dad! He was all man. He loved life, his wife, and us, his three daughters. It took us by surprise when he died suddenly, but it was no surprise that he had indicated on his license that he wanted to be a donor. We had no hesitation when we were asked about donation. Dad was so full of life that it just made sense that he would give life to others. There will never be another man like him and we all will miss him.

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Tracy Lemons, RN, ADON, feels right at home in her career at Bradford Village in Edmond.

Alzheimer's disease.

"I know the in and the out," she said. "Sometimes they remember you and sometimes they don't. And it was very disheartening for me when he didn't remember who I was."

Being an advocate encompasses providing a continuity of care, Lemons said. This way a loved one might remember your face in times when they do not recall your name, she continued.

"If you have the same people

taking care of them at all times; that is very important," she said.

Lemons mentioned that the Bible says, "To everything there is a season and a time for every purpose under heaven."

So when a person becomes seasoned in the cycle of life, Lemons said she has the privilege to care for them and ensure they receive the dignity, respect and the quality of life they deserve during these times of their lives.

OC

Continued from Page 1

40 Under 40. He is one of less than 1,600 professionals worldwide to hold the Sales and Marketing Executive International's Certified Marketing Executive designation. The lifetime achievement award for the Oklahoma City chapter of the American Marketing Association is named in his honor.

Smith has raised more than \$1.3 million as an auctioneer for charities across Oklahoma and Texas. He regularly blogs at www.drBURT.com and authored the book, "The Great

Game of Networking."

Oklahoma Christian, recognized as one of the best universities in the western United States by U.S. News and World Report and The Princeton Review, offers undergraduate programs in more than 60 fields of study, an undergraduate Honors Program, and graduate programs in accountancy, business administration, engineering, Christian ministry, divinity and theological studies.

The last 10 years have featured the 10 largest enrollments in OC history, including a record 502 graduate students and 2,479 total students in the most recent academic year.

KENDRICK STARTS AS CEO OF TEN-HOSPITAL OKLAHOMA NETWORK

Jim Kendrick joins ten Oklahoma hospitals affiliated with Community Health Systems as Network CEO. Kendrick will oversee efforts to further enhance quality, improve access to care and expand services for patients across Oklahoma.

"Formalizing the hospitals and clinics into a health network will help us accelerate the plans we have to enhance the care we provide," said Kendrick. "Together, we'll leverage the resources and connections among us and with community partners to reinforce growth, strengths and goals of each hospital and our network."

Kendrick began his hospital career in Oklahoma. He has two decades of executive healthcare management experience, serving in leadership roles at hospitals and healthcare organizations in Oklahoma, Mississippi and Texas. Most recently, Kendrick served as CEO of Longview Regional Medical Center in Longview, Texas. During his nearly 10 years at Longview, he led the organization through an expansion that almost doubled the number of licensed beds, added a new 21-bed NICU and remodeled all existing patient rooms.

"Jim has the right experience to guide our ten hospitals and clinics in expanding the services offered to the communities we serve," said Charles Womack, MD, Chairman of the Board of Trustees at Deaconess Hospital. "He has a strategic approach to managing healthcare organizations that will distinguish our network in Oklahoma."

Hospitals in the network include Blackwell Regional Hospital, Clinton Regional Hospital, Medical Center of Southeastern Oklahoma in Durant, Marshall County Medical Center in Madill, Midwest Regional Medical Center in Midwest City, Deaconess Hospital - Oklahoma City, Ponca City Medical Center, Mayes County Medical Center in Pryor, Seminole Medical Center and Woodward Hospital. Midwest Regional Medical Center, Deaconess Hospital - Oklahoma City and Medical Center of Southeastern Oklahoma are owned, in part, by physicians.

The network also includes more than 70 affiliated medical practices and six home health agencies.



Jim Kendrick, CEO

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OBU College of Nursing Welcomes New Faculty

OBU

Oklahoma Baptist University is pleased to announce the addition of two new faculty members to the College of Nursing. New faculty include Dr. Mary Dickey, assistant professor of nursing, community health nursing; and Dr. Nichole Jackson, assistant professor of nursing, simulation director.

Dickey earned a BSN from the University of Oklahoma, a Master of Science in Nursing Education from the University of Texas, and a Ph.D. in Public Health from the University of Oklahoma Health Sciences Center. She conducted medical missions and research in China for more than 20 years with the International Mission Board. She previously served as an ER / ICU nurse, a nursing lecturer, and a rehabilitation nurse, among other positions. She is a licensed nurse in Oklahoma and Texas, and she is fluent in both Mandarin and Cantonese.

Dr. Lepaine McHenry, dean of the College of Nursing, is excited for Dickey to join the nursing faculty. "Mary Dickey has been on the mission field in China for over 20 years and will bring a wealth of knowledge and experience on working with diverse populations. Her research focus in public health will be an asset to our college in program development and clinical experiences for students."

Jackson earned a BSN from OBU, a Master of Science in Nursing also from OBU, and a Doctorate of Nursing Practice from the Duquesne University Graduate School. She previously taught nursing courses at Oklahoma State University-Oklahoma City. She also worked as an RN at Integris Baptist Medical Center Heart Hospital for seven years and as a nurse extern in Integris's Jim Thorpe Rehabilitation Unit prior to that.

McHenry is likewise pleased to welcome Jackson to the faculty. "Nichole Jackson, an OBU alumna, comes to us with a focus of simulation in nursing. Her graduate project focused in this area and she brings valuable experience in teaching and simulation. Her knowledge in simulation will assist us in creating a premier simulation center."



Dr. Nichole Jackson



Dr. Mary Dickey

Evaluating the Lasting Impact of Direct Exposure to Terrorism

OU Research uncovers some positive growth among survivors

As terrorism and terrorist attacks make headlines worldwide, researchers at the University of Oklahoma Health Sciences Center work to better understand the lasting exposure of terrorism on those directly impacted by it and their work has uncovered some positive consequences for survivors.

The research involved evaluation of two groups of individuals from the Oklahoma City community. About half, 138 people, were direct survivors of the April 1995 bombing of the Alfred P. Murrah Federal Building and 80 percent of them were injured by the blast.

"What we were really interested in finding out is how people who were directly impacted, compared with those not directly impacted, cope in the aftermath of terrorism, and what mechanisms they use to do so," said researcher Phebe Tucker, M.D. Dr. Tucker is a psychiatrist with OU Physicians who, along with her colleagues, has treated survivors of the Oklahoma City bombing since it happened 20 years ago.

Researchers found direct survivors had significantly more symptoms of depression and anxiety almost 20 years later than did those without direct exposure. However, they also found there were some positive consequences for survivors.

"We used the post-traumatic growth inventory to evaluate change. That inventory is designed to look at positive coping in individuals after a crisis," she explained.

The inventory involves 10 parameters for positive coping skills. It looks at things like social support, spirituality and positive life changes.

"Many survivors noted that they experienced post-traumatic growth in areas such as learning about "how wonderful people are," having a "greater appreciation for the value of my own life," discovering that "I'm stronger than I thought I was, changing life priorities and having a

"stronger religious faith," Tucker said. "Post-traumatic growth may be a sign of resilience. We are still learning a lot about resilience in the mental health field."

There were some differences among survivors and those seemed to center on posttraumatic stress symptoms, gender and education.

"Post-traumatic growth was endorsed more by survivors with higher posttraumatic stress scores and by women than by men. In general, women are more likely to experience post-traumatic stress disorder after trauma. The thought is that perhaps those who most needed to use positive coping skills actually used them accordingly," Tucker said. "However, at 20 years, we did not see any difference in the current use of mental health treatment between those directly impacted by terrorism and those who were not."

Survivors who were college graduates were also more likely to score high on the post-traumatic growth index, reflecting more use of positive coping mechanisms.

"What it all seems to point to is that while a group of individuals directly impacted by terrorism will be negatively impacted for many years, it is not the majority of survivors," she explained.

Tucker added that she is extremely grateful to the many survivors who have participated in this ongoing research for two decades now.

"The thing that is a little unique about this study is that a lot of the people have stayed in the community. In 1996, this group became part of a registry created and maintained by the Oklahoma Department of Health. And many agreed to participate in research later on. They felt it was important to learn from their experiences," Tucker said.

She added the results may point to what one survivor described

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GROWTH
Continued from Page 8

as learning to “forgive, but not necessarily to forget.”

Next, Tucker and fellow researchers at the OU Health Sciences Center will begin evaluating the results of a series of open-ended questions they asked.

“Scales are important, but letting people tell their stories and listening to them tell how the bombing has affected them in their own words is also important,” Tucker said.

Tucker presented the findings recently at the Annual Meeting of the American Psychiatric Association in Toronto. The research was supported in part by the Arnold and Bess Ungerman Endowed Chair in Psychiatry.

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**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*

I recently had a good friend tell me that "my drinking" was becoming a problem. "What drinking are you talking about, I replied." I don't know how to get real with myself so how can I admit my behavior to someone else. What am I going to do?

You are writing to me so you must have some reality about your abuse or dependency of alcohol. It probably started very innocently but as with most addictive substances it soon became more powerful than you. And one of the things human beings do is deny, deny, deny. Even when it is staring us right in the face, we refuse to see it, and we do our best to convince others that they don't see it either.

When we become addicted to powerful substances and some activities; we lose sight of our spiritual connections. We are empty of a healthy relationship with a healthy higher power.

I encourage you to connect with a therapist and a 12 step recovery program. The 12 steps is a spiritual (not religious) program with an emphasis on accountability. The following is a list of the steps. (You can use your specific addictive substance or activity.)

1. We admitted we were powerless over our addiction - that our lives had become unmanageable.
2. Came to believe that a Power greater than ourselves could restore us to sanity.
3. Made a decision to turn our will and our lives over to the care of God as we understand Him.
4. Made a searching and fearless moral inventory of ourselves.
5. Admitted to God, to ourselves and to another human being the exact nature of our wrongs.
6. Were entirely ready to have God remove all these defects of character.
7. Humbly asked God to remove our shortcomings.
8. Made a list of all persons we had harmed, and became willing to make amends to them all.
9. Made direct amends to such people wherever possible, except when to do so would injure them\or others.
10. Continued to take personal inventory and when we were wrong promptly admitted it.
11. Sought through prayer and meditation to improve our conscious contact with God as we understood God, praying only for knowledge of God's will for us and the power to carry that out.
12. Having had a spiritual awakening as the result of these steps, we tried to carry this message to other addicts, and to practice these principles in all our affairs.

Mercy Participates in National Clinical Trial to Develop Blood Test to Detect Breast Cancer *Blood test results may also lead to clinical trial to determine when to use MRI*

For the last 12 years, doctors have monitored Pam Hilliard closely at Mercy Hospital Oklahoma City after tests determined she has a 20 percent chance of developing breast cancer during her lifetime based on abnormal cell growth called lobular neoplasia.

Since then, she has been an advocate for and participant in breast cancer-related clinical trials at Mercy in the hopes of finding answers for future generations.

This past June, she provided a blood sample to a current clinical trial aimed at developing a blood test that could detect breast cancer and help doctors decide whether or not a patient needs a biopsy or additional imaging tests.

"When I was asked to participate in the blood sample study, I was thrilled because I have adult daughters and granddaughters, and, quite frankly, if they can test with blood before having to go through any additional testing — biopsies or MRIs — it would be very beneficial," said Hilliard, of Luther, Oklahoma.

Dr. Alan Hollingsworth, medical director of the Mercy Breast Center in Oklahoma City, hopes the clinical trial and the additional research work he is conducting will find the much-needed answers to make quicker, more effective diagnoses of breast cancer to save lives.

National Clinical Trial

Over the past 15 years, Hollingsworth has collected blood from more than 1,800 patients, distributing over 10,000 individual samples to researchers internationally.

About two years ago, he contributed about 500 of those samples to Provista Diagnostics, Inc., a private

molecular diagnostics company in Scottsdale, Arizona. Those samples helped refine a proposed blood test prior to the launch a multi-site national clinical trial, including the Mayo Clinic (Rochester, Minnesota and Scottsdale campuses); Cleveland Clinic in Cleveland, Ohio; Scripps Polster Breast Care Center in La Jolla, California, Mercy Hospital Oklahoma City and several other health care organizations across the country.

The blood samples were drawn before patients had biopsies to diagnose possible breast cancer. The blood test and biopsy results will help researchers determine whether the blood test accurately detected whether or not patients had breast cancer.

If the blood test is deemed effective in detecting breast cancer, Hollingsworth said the test will help radiologists decide when to perform biopsies in cases where the mammography results are not conclusive enough to definitively require a biopsy. This would save patients from undergoing unnecessary biopsies.

'Home Run' Research

Based on the data from the multi-site clinical trial, which should be available this fall, Hollingsworth is taking the research a step further by comparing the results of mammograms and blood tests with MRI findings of patients at highest risk for developing breast cancer.

MRI uses strong magnetic fields and radio waves to produce detailed images, most commonly for the detection of tumors and soft tissue injuries, and is highly effective in finding breast cancer.

See TRIAL next page



NURSE + TALK

Read what other health care professionals have to say...

"What is your favorite restaurant and what is your favorite meal to order?" Mercy Hospital in Watonga

"My favorite restaurant is The Cattle Exchange in Canadian, Texas. I always order steak and french fries, a side salad and bread pudding for dessert."



Jennifer Jackson, RN, BSN

"Suchi Neko's in OKC. I love to order the smoked salmon and eel nigiri along with a California roll."



Tasha Clewell, LPN

Each week we visit with health care professionals throughout the Metro



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"I like to go to Eishen's Bar. The fried chicken and okra is the best around."



Miranda Cash, RN

"I love Lucy's Chinese food in Springfield, Missouri. General chicken. Yum, yum!"



Melba Bunch, RN

TRIAL

Continued from Page 10

"Under this concept, all patients would get a mammogram and a blood test," said Hollingsworth. "If the mammogram was negative and the blood test was positive, you'd then be a candidate for MRI. It wouldn't say that cancer was definitely there, but it would be a good enough test to detect most of the cancers being missed by mammography."

Based on strict screening guidelines, only patients who are considered at high risk for developing breast cancer, like Hilliard, are currently eligible for an MRI to screen for breast cancer. Hollingsworth said this excludes the vast majority of people who will get breast cancer who do not have risk factors (about 80 percent). He hopes that if the blood test is a good predictor of cancer, all patients will have access to MRI to screen for potential cancer, not just high-risk patients.

Hollingsworth plans to collect mammography, blood and MRI data from about 200 patients.

"Ideally, if we see 100 patients for screening and we detect three cancers by MRI, we want the blood results to

be positive for cancer in those three patients and negative for the other 97 patients," said Hollingsworth. "If you hit that kind of accuracy where the blood test is perfectly matched, then you've got a really good test, but it doesn't have to be perfect in order to justify a major clinical trial."

Hollingsworth hopes the results of this "proof of concept" study will be successful enough to lead to a multi-site clinical trial and eventually loosen or remove the strict guidelines on when patients can receive an MRI for breast cancer detection.

"The bottom line is we have a tool — MRI — that can find virtually every significant breast cancer out there and we're limited in its use because it's too expensive," said Hollingsworth. "A screening blood test to complement mammography would revolutionize screening and provide access to MRI for all potential breast cancer patients, not just those deemed 'at risk.' This is 'home run' research, which means the odds of striking out are probably slightly greater than hitting a home run and there's no in between. If it works, it will have a major impact on how we screen for breast cancer and provide earlier, more reliable diagnoses."

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