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VGo Robots Transform Healing Process for Children

Erin Lonsdale, BSN, RN stands beside one of the two VGo robots at The Children's Center Rehabilitation Hospital. The robots will allow the patients an opportunity to enjoy life outside of a hospital room.

by Vickie Jenkins

Starlight Children's Foundation and Astellas USA Foundation are partnering to advance children's health and education through technology with the placement of two VGo robots at The Children's Center Rehabilitation Hospital in Bethany, Oklahoma. Patients

and staff gathered at the facility to unveil and celebrate the new technology.

VGo robots offer hospitalized children the convenience and ease of telecommuting into a school or health care setting. Remote control access with 2-way audio-video motorized mobility puts students with

injuries, extended illnesses and other physical challenges back in the classroom, and gives doctors, nurses and child life staff the ability to care for patients over long distances. VGo robots allow users to easily move about in real-time through the school or hospital environment by means of a laptop or handheld remote control.

The VGo robots are funded as part of a \$250,000 grant from Astellas USA Foundation that will have a positive impact on quality of life for thousands of patients and staff every year at more than a dozen pediatric Starlight

All about hope

Nurse navigator at Stephenson Cancer Center addresses patients' concerns



Dee Delgado, RN, a nurse navigator at Stephenson Cancer Center in Oklahoma City, offers comfort and guidance to cancer patients during the course of their treatments.

story and photo by James Coburn, Staff Writer

Stephenson Cancer Center in Oklahoma City is like a lighthouse on the shore offering guidance and a plan to patients living with a diagnosis of cancer.

"We're trying to be a bright light of hope and we let them know they're not alone," said Dee Delgado, RN, a nurse navigator at Stephenson Cancer Center in Oklahoma City.

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VGo

Continued from Page 1

community partners across the nation, including children's hospitals and pediatric rehabilitation centers, such as The Children's Center Rehabilitation Hospital.

"We feel blessed to be chosen as a recipient of the VGo robots. These robots will allow the patients an opportunity to enjoy life outside of a hospital room," said Melissa Richey, Director of Communications and Marketing, The Children's Center Rehabilitation Hospital. "The robots will also allow siblings of patients, who aren't able to sit bedside, the chance to communicate, which will drastically strengthen that bond between them."

Remote controlled through a laptop, iPad or iPhone, VGo robots allow a patient or a doctor to navigate and interact with people in a different location. VGo is uniquely integrated with a camera, microphones and a video display - all on a light-weight, motorized and stylish platform. VGo robots are optimized at 4 feet tall so they work equally well when interacting with people who are sitting or standing.

"Astellas USA Foundation supports creative ways to positively impact patients and their families," said Jeff Winton, president of the Astellas USA Foundation. "We are proud that, through our work with Starlight Children's Foundation and VGo robots, we are giving hospitalized children a chance to experience the classroom alongside their peers."

"It's critically important for hospitalized children to stay connected to the outside world, to continue their education and to simply have fun while receiving medical care or rehabilitation," said Amy Stillion, Senior Director, Global Impact & Philanthropy of Starlight Children's Foundation. "We are so pleased to partner with Astellas USA Foundation in supporting the critical

needs of patients at The Children's Center Rehabilitation Hospital. This generous gift by Astellas USA Foundation will transform the healing experience for thousands of children in Oklahoma City and all across the US."

In 2016, Astellas USA Foundation is funding the placement of 22 VGo robots in 13 Starlight community partners' locations in Massachusetts, Illinois, Oklahoma and California. Previous support from Astellas USA Foundation to Starlight has funded the renovation of two state-of-the-art, family-friendly healing environments -- a pediatric dialysis unit in Oklahoma City and teen lounge in Chicago -- both of which opened in the past few months.

VGo was founded by veterans of visual communications and robotics industries who invented a simple and secure solution to enable a person in a distant location to replicate themselves in another location. VGo was acquired in 2015 by Vecna, a leader in autonomous logistics and IT solutions for healthcare.

Astellas USA Foundation is a tax-exempt, nonprofit corporation that awards grants to support charitable scientific, literary and education programs.

The Children's Center Rehabilitation Hospital is an innovative leader in offering medical services that can only be found in the region while also providing a promising pathway from hospital to home. The Children's Center Rehabilitation Hospital is more than a place where children come to heal. They come to learn and grow in a supportive, caring environment.

Starlight Children's Mission is on a mission to improve quality of life for children, families and communities. We harness the power of giving to advance children's health through a global network of community partners. Starlight supports kids and families in 11 countries and territories around the world.

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DELGADO

Continued from Page 1

A nurse for 30 years, Delgado earned her Bachelor of Science in Nursing degree at the University of Central Oklahoma when it was called Central State University. Today she works in the ears, nose and throat clinic at Stephenson.

Cancer can be a confusing diagnosis for new patients who are not familiar with the scope of their treatments offered in a modern world.

"We had over 800 new cancer patients last year that I helped navigate," she said of her clinic at Stephenson. "So we're a very large clinic. So basically when new cancer patients come in for their first appointment, that's when I go in and meet with them and their family, introduce my role and give them information."

There is a comprehensive evaluation that takes place among a group of experts including surgeons, medical oncologists and radiation oncologists.

Endocrinologists attend the meetings when thyroid cancer is discussed at the Tumor Board twice a month.

Delgado likes to be there when their doctor talks to them to discuss the treatment plan. Her job is also to help coordinate the Tumor Board meetings. They want to make sure they have all the information available when presenting a new cancer patient, she said. They get a lot of outside referrals so it's important to know of any related scans that have been downloaded into their system.

"My job is after our meeting, I am getting in touch with the patients and letting them know what the recommendations are," Delgado said. "If the recommendation is for surgery then I'm letting the surgery schedulers know so they can start looking for operating room times."

Her clinic is like a chain. Everyone has a link and they all depend on one another, she continued. She makes arrangements when patients need chemotherapy or radiation treatments.

"Sometimes we get patients from Texas or Arkansas as well. So I have to coordinate those therapies back to their home town or near to them," she said.

Patients today are consumers who do their shopping in the world of the Internet. Most patients investigate

their malignancy online, so many of them know about the course of their diagnosis when they first come to Stephenson Cancer Center. Anything caught early is much easier to deal with in terms of the disease spreading.

"When you're dealing with head and neck cancers it's so much more obvious sooner than if it was abdominal or something," she said.

The warning signs for throat cancer include coughing when eating or or drinking food, she said. After a meal they may be aspirating into their lungs. There could be something wrong with their vocal cords. A lot of patients are hoarse and have not improved when being treated by antibiotics prescribed by their primary care physician.

"They say they have a sore throat or say, 'You know I've had this knot in my neck,'" Delgado said. "Sometimes patients have had it for an extended period of time. By the time they decide to come to us for treatment, you have to deal with patients in the grieving process."

Delgado looks beyond their fears to let them know that Stephenson Cancer Center is there to help comfort them. She lets them know they are not alone and the center will

be there for them to do everything it can.

"We're all about hope," Delgado said.

In a broader sense, Stephenson Cancer Center is always on the innovative edge of research. New patients are screened to see if they are appropriate for a study. Then a team of research nurses working with Stephenson doctors follow the patient through the research process.

"It's amazing what is out there," Delgado said.

Stephenson ranks in the top three cancer centers for clinical trial enrollment in the nation. The National Cancer Institute sponsors trials. It 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. Patients no longer have to go out of state to M.D. Anderson or the Mayo Clinic for treatment. Since Stephenson Cancer Center opened five years ago, it has recruited more than 30 physicians who are specialized in their field. Stephenson invests in recruiting these experts from the best institutions in the country.

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CAREERS IN NURSING

BLESSING FOUND - LPN GIVES LOVE AND RECEIVES PLENTY BACK

by James Coburn - Writer/Photographer

Grace Living Center Wildewood is family oriented, said Tracie Parks, LPN, Grace Living Center Wildwoode, located in Oklahoma City. She makes a second family with the nursing staff and residents at Grace because everybody works as a team and they care about their residents, she said.

The elderly keep her in the long-term care field of nursing.

"They're in need. They let you know they're in need and they appreciate you for what you do," Parks said. "They're like family."

Parks is a 2010 nursing school graduate of Platt College in Moore.

"What inspired me was my nephew passed away with cancer," Parks said. He was only 27 and Parks wanted to make a difference in the lives of others.

"I was looking at them and seeing what they were doing for him," she continued. "What made me go ahead and do it was when I dropped my son off to college.

Driving home I said, 'It's time for me to think about myself.' And I went to nursing school," she said.

She was a CNA when she was 21 years old, and the experience turned out to be valuable for her career as a nurse, she said. She became familiar with long-term care by providing the hands-on care that is required for the daily lives of the residents.

"You can help them, also," she said. "We work as a team and we look out for each other. If someone can't get something done on time, there is always someone there to back you up. We keep it going."

She formerly worked as the assistant director of nursing at Grace Living Del City. She ventured off into home health but decided to return to Grace two years ago. Grace offers its staff a lot of flexibility with their hours in case they need to attend to a personal need such as a sick child.

"They work with you. If

something comes up, management is always ready to step in and take over if emergencies come up," Parks explained.

Nursing is also hard work, Parks said. Days or nights can be challenging at times, so it takes a compassionate and caring nurse to benefit the lives of the residents, she added.

"You have to be understandable. You have to be able to multi-task," Parks said. "Once you get those qualities down and get into a routine you'll be fine. A new nurse can get with someone to mentor them on how to multi-task."

There will be residents with different personalities, similar to one's own home, she said. So Parks said nurses learn to work with those personalities because two people will never be the same.

"That's pretty much it. Once they get that down they're going to be OK," she said.

Parks has made many friends at


Grace. Many of the residents greet her as soon as she arrives at work. They are happy to see her, she said. When she leaves work, her heart follows.

"Just knowing that you have helped someone and just the feeling of someone looking forward to seeing you, appreciating you and what you do on an everyday basis. They depend on you for everything," she said. "And I know I'll get my blessings helping someone else."

The residents at Grace Wildwoode are given abundant activities for enrichment. During the 4th of July Parks was working a double shift. She shared the day with the residents.

"They went outside and watched the sparklers," she said. "They looked up at the fireworks from the Zoo or downtown. They looked forward to that. They waited until they could see the fireworks."

"They had watermelon and they just had a good time. There were



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Mike was born with Nail Patella syndrome, which affects both the skeletal system and kidneys. He was put on dialysis until he could receive his transplant. On April 1, 2011, Mike received a call that he was getting a second chance at life with a new kidney. Since his transplant, Mike has lived his life to the fullest. Mike is humbled by the lifesaving gift he received.

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Tracie Parks, LPN, Grace Living Center Wildwoode, says the Grace nursing staff and the residents inspire her to achieve her personal best in life.

family members who came to visit."

Some of the other activities shared by the residents include the game of Trivia. Parks said that they also love and look forward to playing Bingo on a regular basis.

"They go out. We take them to movies and they go fishing on weekends sometimes. There are a lot of activities here," Parks said.

And Parks enjoys her life, too. When she is away from Grace she sticks to her hobby of writing in her spare time.

"I spend time with my grandchildren and just my family

itself," she said. "I've got a 7-year-old granddaughter that is having a birthday today. So that will be one thing I'll be doing today."

The facility has been spruced up with a new parking lot. A sidewalk is also being installed so that staff can take residents to a store during the days they need to purchase an item.

"I just love my job. I like working with the residents and I love my employees that I work with," she said.

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America's Nurses Are Committed To Addressing The Opioid Crisis

by Pamela F. Cipriano, PhD, RN, NEA-BC, FAAN

At the close of another annual gathering of the American Nurses Association, it was clear: the commitment of our nation's nurses to help treat and prevent opioid dependence and overdose — which has grown to epidemic proportions over the last 15 years — has never been stronger.

We are also aware of the challenges that lie ahead.

At the root of this problem is people's fear — fear of their pain and fear of being judged if they ask for help with dependence.

In a roundtable discussion held during the meeting, many nurses discussed the need to overcome the widespread cultural expectation that medication will "make it all better." Instead, we must promote alternative treatments, including physical and occupational therapy, acupuncture, mindfulness, and other holistic approaches. However, it was noted that many of these alternative treatments, which a nurse might recommend for pain management, are not covered by insurance companies to the extent that drugs are, if at all.

Another nurse at the meeting pointed out the need for better oversight of the re-ordering and renewal process for opioid pain prescriptions.

In a powerful moment, a West Virginia nurse bravely shared her own story of opioid dependence. Her journey included recovery. Many do not.

A Message to Patients

Year after year, the public ranks nurses as the nation's most honest, ethical, and trustworthy profession. If you are experiencing opioid dependence, let us be there for you in this struggle, too.

So many of your battles for better health already begin with a conversation with a trusted nurse. The same can be true for the struggle to be free of opioid dependence. When we ask about your history of



substance use, we do not intend to bring about shame or guilt. It is an essential question to understand your health history. I say this as a professional who firmly believes that dependency is a neurobiological disease — not a choice and certainly not a weakness.

A Call to Action

According to the Centers for Disease Control and Prevention, the rate of overdose deaths involving opioids has increased by 200 percent since 2000.

Some may want to blame pharmaceutical companies, policymakers, and physicians — and sometimes even patients. Rather than spending time assigning blame, nurses are ready to lead on the front lines of beating this epidemic. More than three million strong, registered nurses can play an increased role in assessing, diagnosing, and managing the care of patients battling dependence. Additionally, nurses can elevate the problem of opioid dependence so that it receives the same level of attention and awareness as heart disease and cancer.

We know that education of health care providers and consumers is essential. ANA has joined the American Association of Colleges of Nursing and 40 other provider groups in a pledge to train more than 540,000 opioid prescribers over the next two years. As a result, the future of nurse education and training is likely to emphasize the

See OPIOID page 9

OMRF scientists find clues to MS-induced vision loss



Oklahoma Medical Research Foundation scientists Robert Axtell, Ph.D. and Scott Plafker, Ph.D.

A pair of scientists at the Oklahoma Medical Research Foundation are bringing together their expertise to find new ways to study one of the most prominent symptoms of multiple sclerosis: vision loss.

MS is an autoimmune disease where the body's immune system attacks its own healthy tissues. The disease attacks myelin, the protective layer that covers nerves and fibers throughout the body. This damages the nervous system's ability to carry signals to and from the brain, causing a wide range of symptoms that include problems with vision, tremors, paralysis, muscle spasms and more.

For nearly 20 percent of MS patients, vision loss is the first symptom of the disease and often occurs long before an MS diagnosis. This vision loss, called optic neuritis, occurs when the myelin protecting the optic nerve is stripped away, resulting in temporary blindness. This usually occurs in one eye.

"It just happens out of the blue," said OMRF vision researcher Scott Plafker, Ph.D. "The optic nerve

transmits information from your retina to your brain, telling your brain that your eye has seen an image, and your brain then interprets that image and processes it. When that nerve becomes inflamed, that process is interrupted and you lose your vision."

At some point, more than 50 percent of all MS patients will experience optic neuritis. MS flares cause worsening of this vision loss, but when they resolve, the vision usually comes back. In some cases, though, repeated instances of vision loss can become permanent.

Plafker and OMRF MS researcher Bob Axtell, Ph.D., teamed up to look at how they can help cells in the eye better protect themselves and prevent long-term loss of eyesight in MS.

Their research, published in the scientific journal *Molecular Vision*, revealed that mouse models of optic neuritis showed the same flaring processes that human patients experience. The vision wanes and then recovers in a cycle, which had

See VISION page 9

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Okc, 405-463-5695 Keith Ruminer/volunteer
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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:
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Comforting Hands Hospice: Bartlesville:
918-331-0003

Companion Hospice:
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405-282-3980; Edmond: 405-341-9751

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

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Coordinator, 918-641-5192

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

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Coordinator, 405-840-8915

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Golden Age Hospice: 405-735-5121

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Parkway Suite 400 OKC OK 73108 405-943-0903

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of Spec. Projects - Tulsa 918-744-7223

Harbor Light Hospice: Randy Pratt, Vol.
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405-701-2536

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888-647-1378

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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

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Vol. Coordinator, 405-262-3088; Kingfisher
405-375-5015; Weatherford-580-774-2661

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

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Vernon Stone, D. Min. Chaplin, Vol. Coordinator,
918-774-1171

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

VISION

Continued from Page 8

never been shown before in mice.

The OMRF researchers also determined that a loss of specific cells, called retinal ganglion cells, occurs in a particular pattern, indicating that central vision is especially vulnerable to these disease flare-ups.

"Through this research, we found there are two different immune pathways that can drive the inflammation in the central nervous system," said Plafker.

Axtell added, "These pathways determine how bad the optic nerve damage is, and that's what we're seeing in this research. We've observed this phenomenon in mice before, but now we're seeing what's actually going on in greater detail. It's very exciting."

Now that they know the pathways

associated with the strength of the disease, researchers can use them as specific targets for therapy. With the discovery that mice serve as a reliable model for optic neuritis, Plafker said they can monitor inflammation in the optic nerve and loss of cells, as well as responses to treatments or other factors.

"We're trying to protect the nerve, which is your eye's ability to communicate to the brain," said Plafker. "When that communication channel is disrupted or damaged, vision loss occurs."

Chelsea Larabee in the Plafker laboratory spearheaded the project with assistance from OMRF researchers Jonathan Wren, Ph.D., Shruti Desai, Yang Hu, Constantin Georgescu, Ph.D.

This work was supported by a Nathan Shock Center Grant, number P30AG050911, from the National Institutes of Health.

OPIOID

Continued from Page 8

Centers for Disease Control and Prevention's (CDC) Guideline for Prescribing Opioids for Chronic Pain. Furthermore, ANA has created a webpage of information and resources for nurses to educate and advocate for the prevention and treatment of opioid dependency.

Through our collective commitment, we've also pledged two things. First, we will help double the number of health care providers registered with their state Prescription Drug Monitoring Programs in the next two years. Second, we will launch an awareness campaign that reaches more than four million health care providers with information on opioid dependence, prescribing practices, and actions they can take to be a part of the solution.

The gravity of the opioid crisis has transcended an otherwise hyper-partisan environment on Capitol Hill to produce a package of opioid-related bills, poised to arrive on the President's desk before the fall. ANA has been actively engaged in discussions in which the bills were crafted. At each turn, we seek to eliminate barriers to treatment and expand access to prevention and treatment options for patients with opioid dependence.

Adequate funding for prevention and treatment services is, undoubtedly, a key piece of the puzzle. In February, President Obama

put forward a proposal for \$1.1 billion in new funding to address the opioid epidemic in his FY2017 budget. This crisis warrants such additional investments.

The time to contribute to an urgent and comprehensive response is now. Consumers: Get educated on the problem of opioid dependence. Then join the chorus of advocates calling for appropriate funding to help close the treatment gap.

The American Nurses Association (ANA), which represents the interests of the nation's 3.6 million registered nurses, is committed to loosening the grip of opioids on our society through advocacy, education, and policy initiatives.

35th president of the American Nurses Association (ANA), which represents the nation's 3.6 million registered nurses.

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**Vicki L. Mayfield, M.Ed., R.N.,
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question to Vicki, email us at
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SILENCE LIKE A CANCER GROWS

What do we know about holding on to frustrations that linger, annoyances that grow and anger that simmers constantly? We know about disease, illness and symptoms that multiply and divide. We know that silence is not good. It is not always in our best interest to be seen and not heard.

PEOPLE TALKING WITHOUT SPEAKING PEOPLE HEARING WITHOUT LISTENING

Robotic is not living. It is not being invested in what is going on around you. There are situations we cannot change, people we cannot fix but always we have choices. There are people that we can engage and speak our thoughts and feelings. Listening to understand and connect is different from just hearing someone talk.

PEOPLE WRITING SONGS THAT VOICES NEVER SHARE AND NO ONE DARED DISTURB THE SOUND OF SILENCE

So we visit our doctors and take our pills, 3 pills turns into 5, into 8. We feel terrible. The tests reveal more toxicity at work in our bodies. We drink 12 beers now instead of 6. When we are asked what happened to us to cause so much conflict, people are caught off guard. "You mean you want to know about terrible things that happened to me, pain that I have never talked about. You mean the times I saw my mom beaten by her boyfriends, living in our car because we had no home, taking care of my sisters because my dad was drinking and tearing the house apart?"

HEAR MY WORDS THAT I MIGHT TEACH YOU TAKE MY ARMS THAT I MIGHT REACH YOU

We do not have to accept the disease model of life. Facing our realities, our fears, our traumas and talking about them can change us. Finding solace and companionship in healthy communities can change us. People can be transformed by using their voice. The goal is not to change people or situations that cannot be changed. That wastes our time. The goal is to change us from diseased people into people fully living our lives.

Move away from silence. Write your song and share it. Disturb the sound of silence.

(The Sound of Silence by Simon and Garfunkel)

SSM Health named to 'Most Wired' List

List highlights industry-leading health systems and hospitals using technology in innovative ways to enhance care and improve patient experience.



SSM Health has been named to the "2016 Health Care's Most Wired" list, marking the third straight year the organization has received this industry recognition from the American Hospital Association (AHA) Health Forum. In Oklahoma, St. Anthony Hospital, Bone and Joint Hospital at St. Anthony, St. Anthony Shawnee Hospital, and St. Anthony Physicians Group are included as members of SSM Health.

The AHA's Most Wired list annually recognizes U.S. hospitals and health systems making continuous advancements in the implementation of technology, such as telehealth networks and electronic health records. The list is determined by the AHA's annual Most Wired Survey, which highlights the adoption of innovative technology to improve care delivery, patient experience, clinical quality and safety, clinical integration, IT infrastructure, and administrative management.

"We're thrilled to be recognized nationally for the third straight year by the AHA for our efforts in leveraging the use of our electronic health record to improve the health of the communities we serve," said Philip Loftus, Senior Vice President, Chief Information Officer for SSM Health. "It's a strong validation of the close partnership between IT and our clinical teams over the past several years to enhance the use of our electronic health record platform."

Over the next couple of years, SSM Health plans to take its EHR to the next level by identifying and taking advantage of best practices from each of its regional EHR platforms. The goal is to develop and implement a next-generation EHR that will be more intuitive, and simplify learning and use by our clinical staff across the system.

"While we're a national leader when it comes to EHR integration, we're always striving to expand our capabilities to create an even better patient experience," Loftus said. "Bottom line, in a rapidly evolving industry like health care, we're constantly challenged to stay on the forefront and to raise the EHR bar even higher."

As part of its "Most Wired list" announcement, the AHA also released the results of its annual HealthCare's Most Wired survey. The 2016 Most Wired survey and benchmarking study is a leading industry barometer measuring information technology (IT) use and adoption among hospitals nationwide.

Detailed results of the survey and a full list of Most Wired winners can be found in the July issue of Hospitals & Health Networks Magazine, which is published by the AHA's Health Forum.

BOARD-CERTIFIED PATHOLOGIST JOINS OU PHYSICIANS

Laura Adhikari, M.D., has established her practice with OU Physicians. She has also been named an assistant professor for the University of Oklahoma College of Medicine.

Adhikari is board certified in anatomical and clinical pathology as well as cytopathology. She has specific expertise in fine needle aspiration technique and cytology (diagnosing diseases by looking at single cells and small clusters of cells).

Adhikari completed a cytopathology fellowship at The Ohio State University, Columbus. She completed her pathology residency at Mayo Clinic, Rochester, Minnesota and earned her medical degree at the University of Texas Medical Branch, Galveston.



NURSE + TALK

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

What did you like about July 4th? Sooner Hospice

"I love all the fireworks and spending time with my family."



Kathy Cooper, RN

"Running around with the kids and spending time with family."



Sheli Ross, RN

Each week we visit with health care professionals throughout the Metro



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"It's a special time for me to spend with my family. I have a son who is in the Reserves. I think a lot about the service men."



Pam Vetovitz, RN

"Being off so I can spend time with my family."



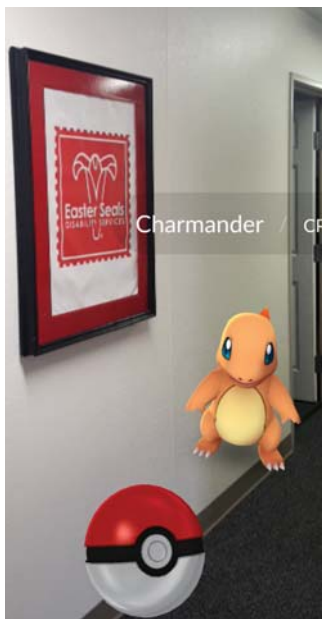
Debbie Wells, RN

POKEMON GO HELPS OCCUPATIONAL THERAPY PATIENTS

Easter Seals Oklahoma Occupational Therapists are utilizing the popular phone app game Pokemon Go with patients to help with hand-eye coordination when looking for and catching Pokemon. It also helps with spatial awareness, visual perception skills, following directions and instructional cues, fine motor skills, impulse control and social skills in taking turns with peers.

Easter Seals Oklahoma invites Pokemon Go players to consider scheduling a tour of its facility while playing the game. Easter Seals Oklahoma is open Monday through Friday, 7:30 a.m. -5:30 p.m.

For more than 90 years, Easter Seals Oklahoma has provided services to children and adults with disabilities and other special needs and support to their families. Services include an early learning and inclusion academy, adult day health center, therapy services, screenings and financial assistance. For more information, please visit www.eastersealsoklahoma.org.



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