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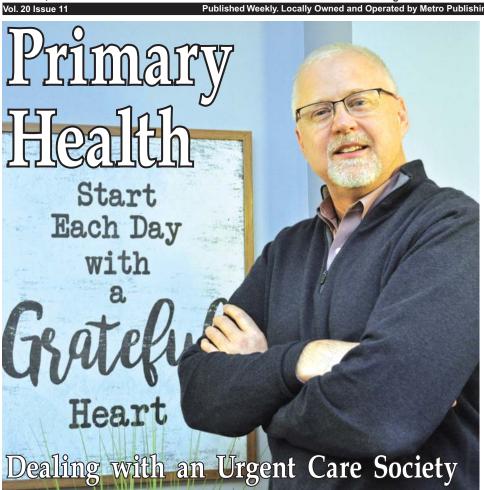
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Mike Eskew, DNP, APRN with Primary Health Partners in N.W. Oklahoma City.

by Vickie Jenkins, Staff Writer

March 18, 2019

Dr. Krista Schwarz and Mike Eskew, DNP, APRN, of Primary Health Partners recently opened a medical office January, 2019. At Primary Health Partners the focus is back where it belongs, on the patient, and how to provide the best care possible to the person in front of you at that moment.

Direct Primary Care (DPC) is a membershipbased delivery model in which partners pay a monthly or annual fee for comprehensive primary care services and direct access to their physician. Payment is simple, no coinsurance bills. Our practice is limited to a small

number of patients than typical primary care practices to enable better access, longer appointment times, and extended services.

I had the pleasure of interviewing Mike What an outstanding individual! "Direct Primary Care is new for some people. The original Direct Primary Care was started in Yukon, OK. Since then, we have a DPC in Edmond, this one (as of January 2019) and a new DPC to be built in the summer of 2019. Our plan here is a little different from other doctors' offices," said Eskew. With DPC, you have a membership fee that is like a subscription for the year. You would pay

See ESKEW Page 3

## Redlands **Maintains Strong** Reputation





by Bobby Anderson, RN, Staff Writer

For Jalelah Abdul-Raheem, P.h.D, RN, there was a certain comfort level that she fell in love with at Redlands Community College in El Reno.

Having worked there once before, she knew what she would be coming back to when she accepted the position of Interim Department Head of Nursing and Allied Health.

"Redlands is very community and family oriented," she said. "Everybody looks out for everybody. It's a real strong network and very supportive."

Maybe that's why Redlands graduates are some of the most sought-after in Oklahoma.

Or maybe it's just one of the reasons.

With a small ratio of students per instructor, a simulation lab, great employment opportunities after graduation and a live NCLEX review, Redlands has one of the best nursing programs in the area.

Community support is huge in Canadian County for the school and vice versa.

See REDLANDS Page 2

### REDLANDS Continued from Page 1

The Canadian County Health Department has requested Redlands students work with their OB nurse practitioner. Students have adopted a mission in El Reno treating recently released inmates and recovering drug and alcohol addicts.

Students serve in the twice-monthly, bilingual health clinic.

Redlands admits students one time each year to the traditional day program.

LPN to RN admission occurs for a handful of individuals in the spring.

The program threads theory and simulation together to help build understanding of the specific content being taught. Simulations enhance student understanding, build confidence prior to clinical as to what to do, say, and provide appropriate interventions for patients.

Redlands Nursing Program graduated its first class in 1981. The program is a two-year nursing program with new classes beginning in the fall of every year.

Students graduate with an

Associate in Applied Science Degree and upon graduation, are eligible to take the NCLEX exam to become a Registered Nurse. Redlands also offers options for LPNs attending the nursing program. LPNs who meet admission criteria are given credit for Fundamentals of Nursing.

Walking into a facility with her Redlands name badge on is always a treat for Abdul-Raheem.

"We have a very positive perception," Abdul-Raheem said. "(Employers) know we are community based. They have a lot of good things to say about our students and because we like to partner with others our name really gets out there."

A small faculty to student ratio allows Redlands instructors to team teach.

"Students are able to get more one-on-one instruction and they're able to get more of a mentorship from faculty that they hang on to," she said.

Redlands is located at 1300 South Country Club Road in EI Reno, Oklahoma.

For more information visit: https://www.redlandscc.edu/nursingassociate-applied-science or call 405.262.2552



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- Great employment opportunities after graduation



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## Mercy Hospital Kingfisher Awarded Prestigious Accreditation



Mercy Hospital Kingfisher for the first time has earned the Joint Commission's Gold Seal of Approval for hospital accreditation, a national symbol of quality that reflects a hospital's commitment to providing safe and effective patient care.

Mercy Hospital Kingfisher is one of only two critical access hospitals among 39 in the state to ever achieve Joint Commission accreditation.

"I'm so grateful for our co-workers and their commitment to provide the best care for our patients every day," said Brian Denton, administrator of Mercy Hospital Kingfisher. "The people of Kingfisher are full of community pride with high expectations of our businesses, leaders and schools. Our Joint Commission accreditation reflects the high standards set by our community and we are honored to provide the high-quality health care they deserve."

The Joint Commission is the nation's oldest and largest standards-setting and accrediting body in health care. Around 77 percent of all U.S. hospitals currently maintain accreditation from The Joint Commission. However, only about 25 percent of the 1,300 critical access hospitals are accredited.

"The Joint Commission is the gold standard of independent hospital accreditations" said Jim Gebhart, regional strategy officer for Mercy. "I can't emphasize enough how rare it is for a critical access hospital to earn the prestigious Gold Seal of Approval and what an

accomplishment this is for the entire team at Mercy Hospital Kingfisher."

Hospitals apply for a three-year accreditation but cannot pay for the recognition.

Mercy Hospital Kingfisher has worked toward this designation for more than three years and underwent a rigorous, unannounced onsite survey with interviews in December. During the review, a team of Joint Commission surveyors evaluated compliance with hospital standards in several areas, including emergency management, environment of care, infection prevention and control, leadership and medication management.

"Joint Commission accreditation provides hospitals with the processes needed to improve in a variety of areas from the enhancement of staff education to the improvement of daily business operations," said Mark G. Pelletier, chief operating officer, Division of Accreditation and Certification Operations, The Joint Commission. "In addition, our accreditation helps hospitals enhance their risk management and risk reduction strategies. We commend Mercy Hospital Kingfisher for its efforts to become a quality improvement organization."

The Joint Commission's hospital standards are developed in consultation with health care experts and providers, measurement experts and patients. The standards are informed by scientific literature and expert consensus to help hospitals measure, assess and improve performance.

#### ESKEW Continued from Page 1

\$79.00 to see Dr. Krista Schwarz or \$69.00 to see Mike Eskew, the Nurse Practitioner.

"Here, we are not concerned about how fast the patients come in and out, but the care the patients are getting. Once the provider is chosen, you will see that provider each time. No more guessing work of which doctor you will see, or when you can schedule an appointment that day. No more waiting two weeks before the doctor can work you in. A lab is located here, plus an onsite pharmacy where you can get your prescriptions for wholesale prices. This means more time for the patient to spend with the provider, eliminating the red tape that deals with insurance issues. We don't deal with any insurance matters because the monthly membership fee takes care of that. We offer a higher level of quality," Mike explained.

When Mike was little, he wanted to be a veterinarian. He had a special gift of caring. After he became a nurse, he worked in ICU at OU Medical Center. Through the years, his jobs consisted of high school science teacher and girls' basketball coach. Mike went back to school, attending Duke University for his BSN, Masters and Doctrine. He continued with his Masters; teaching nursing at Southern Nazarene University. After that he was asked to join Dr. Krista Schwarz at Primary Health Partners.

What is your favorite part of your job? "When I take care of a patient and if that patient leaves completely satisfied, I know that I have done a good job. It makes me feel good to know they are satisfied with me," Mike replied.

In your opinion, what qualities make a good nurse? "I think a nurse needs to have a positive influence on others. I think it is very important for a nurse to know how to teach. If there is no teaching on the nurse's part, the learning will be temporary. Without the knowledge of teaching, they are missing interaction with a very important component. If there is teaching, it will be with them permanently," Mike answered.

Asking Mike to describe himself, he answered, "I'm a well-rounded individual that likes to care for others. I love the study of science and I love the beauty of nature; I just enjoy being outdoors." Mike's biggest asset at work is his ability to communicate with his patients. "I think communication is one of the most important things a doctor and a patient can have," he said.

What advice would you give to someone if they were thinking about going into the medical field? "The medical field is a wonderful field to go into and we will always need good health care providers. They can expect challenges along the way but they need to remember, primary health care is part of the solution. I would encourage people to be a part of health care but also to choose a specific area of health care that contributes to the solution and not the problem," Mike replied.

Summing up Mike's life in one word, "Blessed."

For more information visit: www.primary-healthpartners.com

#### Oklahoma Ranks in Top 14 Percent in Preparedness for Medical Countermeasure

The Oklahoma State Department of Health (OSDH) was recently assessed in the top 14 percent of all medical countermeasure supply recipients across the nation who have been reviewed by the Centers for Disease Control and Prevention (CDC).

The CDC conducted an operational readiness review site visit of the OSDH. The process evaluates state and local capabilities to distribute and dispense

life-saving medicines such as antibiotics in affected areas of a public health emergency such as plague, anthrax or pandemic flu.

The review included aspects of performance measures in the areas of community preparedness, emergency operations coordination, emergency public information and warning;

See RANK Page 5

## klahoma's

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### Remembering E.J.

At just 36 years old, E.J., an electrician of Mustang, Oklahoma, suffered a fatal aneurism. When he became an organ donor at the time of his untimely death, he was able to save the lives of five others in need.

Organ, eye and tissue donation saves lives. Please make your decision to donate life and tell your family. Register to be an organ, eye and tissue donor on your Oklahoma driver's license or state ID card or register online at www.LifeShareRegistry.org. You may also call 800-826-LIFE (5433) and request a donor registration card.





## CAREERS IN NURSING WHEN WOUNDS WON'T HEAL: SUMMIT WOUND CARE

w Robby Anderson RN Staff Writer

An open wound that just won't heal can be a matter of life and limb.

Traci Davis, RN, is the director of wound care and hyperbarics at Summit Wound Care in Edmond and says seniors need to know when to seek care for a problem that can quickly get out of hand.

Davis says an open wound that hasn't gotten at least 50 percent better in four weeks is indicated for advanced wound care.

"But, if you can get in sooner rather than later that's always the best approach," Davis said. "That way we can do any cultures or x-rays. Especially, diabetics if they are doing their weekly checks and notice they have a small opening that would be an indication to come in to prevent it getting into a deeper, diabetic foot ulcer."

What to know

According to the American Podiatric Medical Association, a diabetic foot ulcer is an open sore or wound that occurs in approximately 15 percent of patients with diabetes and is commonly located on the bottom of the foot. Of those who develop a foot ulcer, six percent will be hospitalized due to infection or other ulcer-related complication.

Diabetes is the leading cause of non-traumatic lower extremity amputations in the United States, and approximately 14-24 percent of patients with diabetes who develop a foot ulcer will require an amputation. Foot ulceration precedes 85 percent of diabetes-related amputations. Research has shown, however, that development of a foot ulcer is preventable.

Anyone who has diabetes can develop a foot ulcer. Native Americans, African Americans, Hispanics, and older men are more likely to develop ulcers. People who use insulin are at higher risk of developing a foot ulcer, as are patients with diabetes-related kidney, eye, and heart disease. Being overweight and using alcohol

and tobacco also play a role in the development of foot ulcers.

Ulcers form due to a combination of factors, such as lack of feeling in the foot, poor circulation, foot deformities, irritation (such as friction or pressure), and trauma, as well as duration of diabetes. Patients who have diabetes for many years can develop neuropathy, a reduced or complete lack of ability to feel pain in the feet due to nerve damage caused by elevated blood glucose levels over time.

Vascular disease can complicate a foot ulcer, reducing the body's ability to heal and increasing the risk for an infection. Elevations in blood glucose can reduce the body's ability to fight off a potential infection and also slow healing.

Often times, wound patients have issues with arterial or venous disease.

"We see them every week so we tend to recognize changes," Davis said. "As a whole, Dr. (William G.) Morgan III and ourselves we look at every system in the body and make sure everything is working together because if everything isn't working together it makes for difficult wound healing."

The holistic approach is one Dr. Morgan adopted long ago. Where some see wounds, Dr. Morgan sees much more.

"It's all connected," Dr. Morgan explained. "It's not that we're treating a wound, we're treating a person that has a wound. All these things we deal with are connected.

"One of the rules about about wound care is that every wound is a window to an underlying problem."

"That's a rule with no exceptions."
And if left unchecked, those wounds can lead to life-altering amputations.

"It's extremely dangerous because diabetic foot ulcers very quickly get infected and can get staph infections very easily," Davis said.

Lower-limb amputations may be See SUMMIT Page 5



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Summit Medical Center Wound Care and Hyperbaric Center's Traci Davis, RN and Dr. William G. Morgan III help those with non-healing wounds.

#### **SUMMIT**

Continued from Page 4

rising after decades of decline, according to new data published in Diabetes Care, the journal of the American Diabetes Association.

After years of decline, the rate of amputations jumped by 50 percent between 2009 and 2015.

Oklahoma ranks No. 8 in the country in the number of individuals living with diabetes.

Davis has worked with Summit's

patients for the last eight years. She says it's like family.

"The patients, Dr. Morgan and the relationships we have here," Davis said of why she stays. "We are a little bit different in that we are more family-oriented, take care of each other and try to take care of our patients holistically and try to be advocates for them in other areas of their health care and get them to the right places they need to go."

Patients are able to self refer to the clinic.

#### RANK

Continued from Page 3

medical countermeasure dispensing, medical material management and distribution; responder safety and health; and volunteer management.

The goal of the CDC is for jurisdictions to have medical countermeasure programs established by June 30, 2022. Oklahoma achieved this status in two-thirds of the modules measured nearly four years ahead of the target date.

"This review reflects extraordinary level of commitment and dedication by the OSDH Emergency Preparedness and Response Service and a large number of state and local partners," said Interim Commissioner of Health Tom Bates. "Oklahoma has made tremendous progress in improving preparedness to face health emergencies. Our agency stands ready to respond to a public health threat, and will continue to work to improve our practices. I appreciate the efforts of our staff at the state level as well as the county local emergency response coordinators."

The Public Health Emergency Preparedness program is managed by the CDC and supports preparedness activities nationwide through funding and technical assistance. The funding supports state and local efforts and their ability to receive, distribute, and dispense medical assets from the Strategic National Stockpile.

For more information about OSDH's efforts in public health preparedness, visit www.health.ok.gov.

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## OK American Cancer Society Launches "80 percent in Every Community" Initiative for Colorectal Cancer

When Melissa Howell turned 50 a few years ago, she celebrated the milestone binge-watching chick flicks with one of her best girlfriends. It was a rite of passage, a turning of the proverbial page into mid-life.

But after her celebratory weekend, it was back to reality with a trip to her physician.

"It wasn't too long after my 50th birthday when I made an appointment with my doctor," Howell said. "I knew at that time 50 was the recommended age for a colon screening, and I went in not expecting him to find much. Other health issues in the past had taught me to be proactive and not wait. Through the years I learned to not procrastinate when it comes to my health."

Howell's colonoscopy revealed numerous polyps, and about seven were biopsied.

"One of those came back malignant," she said. "The good news was that he found it extremely early and was able to remove it. I had no follow up, and no radiation or chemotherapy was necessary. When my doctor called to give me the news, he said, 'Someone saved your bucket by convincing you to come see me.' But the truth is, no one convinced me. I just did it because it needed to be done. I'm glad I did. I hope others follow American Cancer Society guidelines, talk to their physician and get screened, because it could save their life."

Colorectal cancer is one of the leading causes of death in the United States, according to statistics from the American Cancer Society. And Oklahoma ranks as one of the highest states in the nation regarding colorectal cancer and death rates.

"Just last year, more than 19,000 Oklahomans were diagnosed with cancer," said Janet Pulliam, Senior Manager for Hospital Systems for the Oklahoma American Cancer Society. "This year we expect that number to rise to more than 20,500 people. More than 1,800 of those will be diagnosed with colorectal cancer, and 760 are expected to die from colorectal cancer.



Melissa Howell was diagnosed with numerous polyps early.

The real tragedy is many of these cancer cases and deaths could have been prevented if more people were screened for colorectal cancer."

The five-year survival rate is 90 percent for those who are screened early, Pulliam said. And in fact, many live much longer than that or are cured.

"Only about 39 percent of cases are diagnosed early," she added. "If the cancer is not detected until a later stage, the five-year survival rate drops to 14 percent. Oklahoma ranks last in screening. At OKACS we knew that to make an impact in our statewide screening, we would have to do something differently. So late last year we pulled together key stakeholders from our health care systems to form the Central Oklahoma Colorectal Taskforce. We are working together to identify gaps in care, methods of filling those gaps, and available resources. It will take us all to raise our screening rates and reduce incidences of colorectal cancer."

The American Cancer Society's guidelines traditionally recommended 50 as the age to begin colorectal cancer screening. However, that was lowered to 45 last year for people of average risk for colorectal cancer.

"Screening for colorectal cancer is an essential tool to prevent and detect colon cancer earlier," said Dr. Christian Ellis, a surgical oncologist at Mercy Hospital in Oklahoma City. "If a person has a relative who has been diagnosed with colorectal cancer or advance polyps, they should begin screening even earlier at age 40, or 10

years before the earliest diagnosis of colorectal cancer in their relative."

A colonoscopy is the gold standard for screening, Ellis said, but other less-invasive tests are available now that can be done in the privacy of your own home. The best way to determine the right test is to talk to your physician.

"Colorectal cancer is a preventable disease, but only if there is early detection and treatment," he said. "I want to encourage you to exercise, eat nutritional foods, maintain a healthy weight and of course avoid tobacco and other substances that can increase your risk for cancer. As a board member of the Oklahoma American Cancer Society, I speak for its members by expressing our desire for you and your family to live a healthy and cancer-free life."

Colorectal Cancer March is Awareness Month, and the American Cancer Society is partnering with other organizations to increase screenings in Oklahoma and nationwide. OKACS, the National Colorectal Cancer Roundtable, Fight Colorectal Cancer, Mayo Clinic, Exact Sciences, and UPS are launching the next campaign to reach an 80 percent colorectal cancer screening rate nationwide. "80% in Every Community" is an initiative which aims to substantially reduce colorectal cancer as a major public health problem. The initiative seeks to build on and grow the tremendous success of the "80% by 2018'' initiative.

Learn more about the initiative and screening guidelines at www.cancer.org/



(AS PUBLISHED IN THE 2019 EDUCATION GUIDE TO NURSING)

## Unique Online RN to BSN

#### Oklahoma Christian University features premier program

Oklahoma Christian University combines three key features to create a unique program. OC's School of Nursing helps registered nurses achieve a bachelors of science in nursing degree that is competency-based education (CBE), 100% online and offers a GPA transcript to create a RN-to-BSN program that has thought of everything.

CBE means a registered nurse's training, education and work experience allow them to earn college credits for what they already know. Skip class for skills mastered on the job by testing out of that segment and earning college credit. Start an online, four-month subscription to the course material and test out of as many classes as possible for \$4,000! Most students graduate within 12 months or three subscription periods.

Online degrees are for flexibility and convenience, not independent study! An Oklahoma Christian academic coach supports each student in all aspects of gaining a degree. Coaches are faculty members of the School of Nursing who communicate with students at least once each week to provide resources, answer questions and challenge deeper thought. Nurses use online classes to accommodate work schedules and hospital shifts, but still develop relationships within Oklahoma Christian's online community of nursing students.

Oklahoma Christian's RN-to-BSN perfectly prepares students for graduate school. Your courses will require writing scholarly papers and preparing professional presentations to fully equip you to pursue a master's degree. Many schools offer BSNs using a pass/fail grading system, OC students earn grades and graduate with a cumulative grade point average (GPA) and a full transcript. Graduate schools require a GPA for admittance and Oklahoma Christian makes sure students graduate with all they need to advance their careers even further.

Oklahoma Christian helps undergraduates gain admittance into prestigious



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OC Financial Services can help you navigate the cost of education. If you are currently employed as a nurse, check with your human resources department about tuition benefits that your employer may offer. Oklahoma Christian's caring staff will help direct you to federal student loans, nursing grants or nursing scholarships, and payment plans.

Oklahoma Christian earned national nursing accreditation after meeting high standards of quality, peer review, and establishing self-regulation. A degree from an accredited program makes graduates more competitive in the job market. Employers prefer to hire accredited practitioners who are trained under nationally established standards for nursing education. Graduates from accredited nursing school programs qualify to attend other accredited schools to pursue





## Measles: An old foe returns

Every year, the World Health Organization lists its top threats to global health. Alongside usual suspects like air pollution, cancer and heart disease, a newcomer has joined the 2019 edition: vaccine hesitancy.

The anti-vaccine movement has gained momentum in recent years as parents refuse to vaccinate their children out of fear for autism and other side effects. "It's causing outbreaks of communicable diseases like measles that had vanished from this country," said Stephen Prescott, M.D., president of the Oklahoma Medical Research Foundation.

Already in 2019, at least 10 states have reported cases of the measles, which were declared eliminated in the U.S. in 2000. Outbreaks have recently occurred in New York, New Jersey and the Pacific Northwest.

While usually not often lifethreatening, measles brings a widespread rash that covers most of the body. It's often accompanied by fever, cough, runny nose and other cold-like symptoms.

"In some instances, it can be much more severe and require hospitalization, supportive treatment with fluids and oxygen," said OMRF's Prescott, a physician and medical researcher. "If complications become severe, measles can even result in death."

One complication is viral pneumonia. According to the Centers for Disease Control, as many as 1 in 20 children who get measles will get pneumonia, which can be lethal, especially in the very young. Also, about 1 in 1,000 will develop lifethreatening swelling of the brain that can lead to deafness, mental disability and convulsions.

"While severe complications are rare, the more cases there are, the greater the chance of these worstcase outcomes," said Prescott.

The vaccine is usually administered in two doses: one at 12 to 15 months, and the second between the ages of 4 and 6. The CDC reports this two-dose regimen is 97 percent effective.

"The vaccine works, which is great news considering measles is one of the most highly contagious diseases in the world," Prescott said,



Oklahoma Medical Research Foundation immunologist Eliza Chakravarty, M.D. (Photo Courtesy Oklahoma Medical Research Foundation).Eliza Chakravarty, 2018

"It is a disease that is incredibly efficient at infecting people, especially young children."

When an infected person sneezes or coughs, the measles virus enters the air and can infect anyone who comes in contact with the airborne particles – or touches objects or surfaces where the germs have settled.

"A lot of viruses are transmitted this way, but what makes measles more likely to spark an outbreak is that the virus lives for a long time outside of the body," said OMRF's Eliza Chakravarty, M.D., an immunologist. "One infected person could go into a classroom, movie theater or daycare, and it puts everyone there at high risk."

Globally, the World Health Organization reports that between 2000 and 2017, vaccinations prevented an estimated 21.1 million measles deaths.

"Numbers like that are staggering," said Chakravarty. "I sincerely hope we're not going to have to learn how dangerous these preventable diseases are the hard way before we correct course."



# 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 know how you like to be loved? If you said YES, good for you, you have done your homework. If you said NO, then read on.

**A.** If you think about being in love, what does that really mean? What is it that you love about that person and how is that love expressed?

There is an amazing book called The 5 Love Languages by Gary Chapman. It is a read that is strongly suggested for anyone looking to define their language of love or couples who are struggling with mixed up love signals. It definitely should be read before couples marry.

#### So here are the 5 Love Languages:

- 1. Words of Affirmation Actions don't always speak louder than words. If this is your love language,unsolicited compliments mean the world to you. Hearing the words, "I Love You." are important -- hearing the reasons behind that love sends your spirits skyward.
- **2.** Physical Touch A person whose primary language is physical touch is, not surprisingly, very touchy. Hugs, pats on the back, and thoughtful touches on the arm -- they can all be ways to show excitement, concern, care and love.
- **3.** Acts of Service --Can doing the dishes and taking out the trash (without being reminded) really be an expression of love? Absolutely! Anything you do to ease the burden of responsibilities weighing on an "Acts of Service" person will speak volumes. The words he or she most wants to hear: "Let me do that for you." When others serve you out of love (and not obligation), you feel truly valued and loved.
- 4. Quality Time In Quality Time, nothing says "I Love You" like full, undivided attention. Being there for this type person is critical, but really being there with the TV off, not looking at your phone--makes you feel truly special and loved. Whether it's spending uninterrupted time talking with someone else or doing activities together, you deepen your connection with others through sharing time.
- 5. Receiving Gifts Don't mistake this love language for materialism; the receiver of gifts thrives on love, thoughtfulness, and effort behind the gift. If you speak this language, the perfect gift or gesture shows that you are cared for and valued.

So now here is where problems can occur. When a person knows how they want to be loved (which I think most people do) and they tell their partner and the partner doesn't provide love in that way, problem!!

Here is an example: Terri's love language is gifts. Not expensive, break the bank gifts but to wake up and find sticky notes on the bathroom mirror saying, "I Love You," and "I can't wait to see you tonight," would make her day. Her husband, Todd's love language is physical touch. When Terri realized Todd was just not into gifts or loving gestures, she became frustrated with "asking" and pulled away from any physical affection. Todd never really thought about sticky notes because that was not something he needed. Their love languages were different but not unsolvable if they can see what is happening and make changes.

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## NURSEEFALK

I'll say hippo and the reason is they're very chill but they'll kill you if you hurt their family.



Christina Eaton, MA

Great Pyrenees. They herd their family and make sure everyone's safe.



Ashley Seyer, LPN

What's your spirit animal?



Care of Moore

A bear because I'm grumpy half the time.



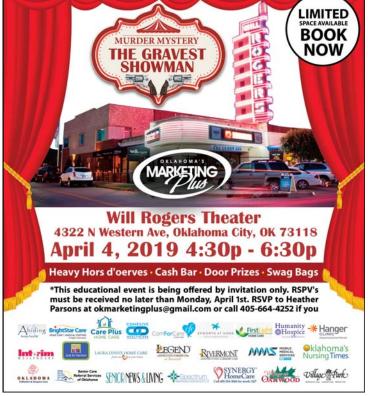
Nathan Thompson, MA

Elephant. I think they're a very strong, family-oriented.



Heather Decher, LPN







Doing what's right isn't always what's easiest.

But as part of the United Way of Central Oklahoma,
you're not afraid of these questions.
You're part of the answer. Raise your hand and
stand with us. Give today at

StandUnitedOKC.com

