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A helping hand
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patient care

Staci Crow, LPN, enjoys getting to know her patients at Innova Home Health while she educates them about health and safety measures.

by James Coburn
Staff Writer

Her nursing staff and patients at Innova Home Health keep Staci Crow, LPN, LVN, loyal to those she serves, Crow said.
“They need help,” she said.

“And when they come out of the hospital they need to learn what the hospital hasn’t taught them and the safety portion of it and about their medications,” Crow said. “I just like home health and taking care of people in

their home setting.” She has been a nurse for almost 12 years since graduating from DeMarge College in 2004. She began her career in hospice for three years before making the transition to home health. Four years ago, she joined the

team of professionals at Innova.

Innova Home Health is a nationally accredited Medicare certified and state licensed home health care agency.

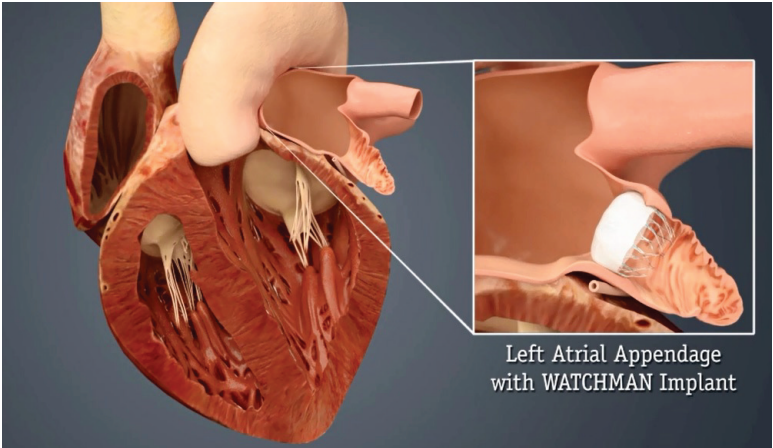
Patients heal better with home health, Crow said. Patients get more hands-on care with

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Heart Hospital is the first hospital in Oklahoma to offer patients with non-valvular atrial fibrillation (AF) an alternative to long-term warfarin medication with the newly approved Watchman Left Atrial Appendage Closure Implant.

Cardiologists Sean Halleran and George Chrysant preformed the first such implant in the state on Monday, Oct. 5.

Atrial fibrillation is a heart condition where the upper chambers of the heart beat too fast and with irregular rhythm. It is the most common cardiac arrhythmia, currently affecting more than five million Americans.

“People with atrial fibrillation have a five times greater risk of stroke,” says Halleran, an electrophysiologist at INTEGRIS specializing in electrical /rhythm issues of the heart. “Atrial fibrillation can cause blood to pool and form clots in the left atrial appendage. These blood clots can then break loose and travel in the blood stream to the brain, lungs, and other parts of the body.”

The most common treatment to reduce stroke risk in these patients is blood-thinning warfarin medication. Despite its proven efficacy, long-term warfarin medication is not well-tolerated by some patients and carries a significant risk for bleeding complications. Nearly half of AF patients eligible for warfarin are currently untreated due to tolerance and adherence issues.

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HEART

Continued from Page 1

patients to reduce their risk of atrial fibrillation related stroke," says Chrysant, an INTEGRIS interventional cardiologist. "The Watchman Implant closes off the left atrial appendage to keep harmful blood clots from entering the blood stream and potentially causing a stroke. By closing this off, the risk of stroke may be reduced and, over time, patients may be able to stop taking warfarin."

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The Watchman Implant has been approved in Europe since 2005 and is FDA-approved in the United States. It has been implanted in more than 10,000 patients and is approved in more than 70 countries around the world. For more information on the Watchman Implant, please visit watchmanimplant.com.

St. Anthony Pediatrician Gives Tips on Identifying and Treating Common School Illnesses

School has been in session for some time now, which means teachers and students are back in the swing of things, and so are those common school illnesses.

"Two common illnesses we see when children go back to school are viruses that often cause vomiting and diarrhea, commonly referred to as the stomach bug. We also see strep throat during this time," said Brittany Daniels, M.D., St. Anthony Pediatrician. "Viruses are more common than bacterial illnesses such as strep throat, so there is a good chance you'll see a virus more than strep," she added.

According to Dr. Daniels viruses have a wide range of symptoms. "Symptoms could include diarrhea and vomiting; however, any vomiting that looks lime green in color or has blood in it, should be evaluated immediately," Dr. Daniels explained. Viruses can also cast themselves in more simple symptoms. "Viruses can cause a runny nose, cough, congestion, and can even affect the eyes. Matting or crusting of the eyes can occur especially in the morning, as well as red eyes."

Strep throat has another set of symptoms to look for, such as the common sore throat. However, there are other identifiers you can look for. "If you look at the back of the throat, you may see white blotches on the tonsils," said Dr. Daniels. "Some things that make me think it's more likely strep include a sore throat with decreased appetite, without the coughing and congestion."

Fevers are common for children and even adults who are feeling under the weather: however, this common symptom, regardless of age, isn't always a bad one. "When it comes to fever it's not necessarily a bad thing to have. A fever is your body's natural response to killing or fighting off infection. With that being said, we know a fever can still make a child feel bad, so often we like to treat the fever. Children older than six months can have Motrin, while all children can have Tylenol," Dr. Daniels commented. "However, if your baby is less than two months old and has a fever, you must seek care immediately," she added.

Treating these illnesses isn't always easy, as some just have to run their course. "Viruses are treated with supportive care. Unfortunately, antibiotics will not help you get rid of a virus. Typically viruses will resolve in 4-5 days," explained Dr. Daniels. "However, if your child tests positive for strep, they will need an antibiotic to treat it."

To try and avoid these illnesses as much as possible, Dr. Daniels gives us everyday prevention tips. "Good hand washing is important, along with keeping the counters and surfaces in your home clean with Lysol. Also, a daily multivitamin is great for children even when they aren't sick. Something to look for in a vitamin that may help build their immune system is Vitamin C." Dr. Daniels then added, "These vitamins are a great idea, however they have not been proven to shorten the duration of viral illnesses. It's just important for everyone to know they shouldn't treat these vitamins as medicine for a specific illness."

Looking for more tips on treating these common school illnesses? See more from Dr. Brittany Daniels below: -For a cough, if your child is older than five, you may give them over the counter cough medicine. Cough medicines however are not recommended for kids under five, as they are not FDA approved for this age range. -For vomiting and diarrhea, avoid any medicines to slow the diarrhea such as Pepto-Bismol. It is best to let the diarrhea run its course, to avoid the bowel wanting to stop working for a short period of time. -For a sore throat, cold liquids can sometimes ease the pain. Your child may not want to eat during this period, but please make sure they drink enough to stay hydrated. -When taking an antibiotic, a child should not go back to school until they have had 24 hours of antibiotics. They should start feeling better and improving after 48 hours of taking antibiotics.

Dr. Daniels' office is located at St. Anthony Healthplex Mustang, at the corner of State Highway 152 and Sara Road.

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CROW

Continued from Page 1

assessments which can be reported to a physician. She can follow-up with any changes to prevent her patients from returning to the hospital. They don't have to make as many doctor appointments either, she continued.

"It's more for the nursing staff to keep the patients independent at home," Crow said. "You build a relationship with family members and you educate them to keep their loved one safe as well."

Crow is content to stay with Innova because of the staff's ethics and personal responsibility they take in offering exceptional care, she said. They are professional and loyal to their patients by being their advocates.

"In home health there's not an every day smooth," Crow said. "You got to have a level of balance. You have some days that go real smooth and other days that are more difficult. You want to get each patient prepared and safe as well."

Crow knows at any moment that she has the help and guidance of her staff at the Oklahoma City office. She may call them anytime for a wealth of assistance. They support each other and always go above and

beyond when it comes to staff support. Continuing education is encouraged and abundant.

They come together and work well as a team. They are like one big family, Crow said. She would chose Innova for her own family because of the familiarity and kindness of the nursing staff, she said.

"You always have the same nurse," Crow said. "We try to give the patients the same nurse each time. That way they feel more comfortable and they open up to you. The communication is a lot better because when you have changes in nursing, they have to start from day one instead of seeing the nurse who has always been coming in. That's where you establish being like a family."

Crow gets to know her patients well. They speak of life events and memories of what is meaningful. They share how they got married, funny stories and sad stories, she continued.

Eighty-five percent of her patients are without family because they have passed away. They may not have children, but have nieces and nephews who are not actively involved in their lives.

She is not only there as a nurse. She is there to be a listener and to help them whenever it is necessary.

Someone is there every week to make sure they are okay.

"When they ask you to do something -- you do it. You find that level of care," she said. "I chose to do home health because so many elderly are at home and they don't have family to assist them. So I'm kind of like their next of kin."

Crow's venture into nursing sparked when she was 15 years old, working as a dishwasher in a nursing home. She noticed patients who were unable to feed themselves at the dinner table and wanted to assist them.

"The director of nursing came out and said, 'You can't do that. You're not certified.' So I said, 'Send me to school,'" Crow explained. She became a CNA for four years before venturing into home health and hospice as a nurse. "Home health is where I benefit because when my grandfather was real sick, I remember the nurses coming in and taking care of my grandma and my aunts, and giving them support and educating them to where he could have a quality of life at home and not live in the hospital," she said.

Her grandmother told her when she was 11 or 12 that she would grow-up and be a great nurse.

"I knew that's what I wanted to do for the rest of my life," she said.

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CAREERS IN NURSING

YOU ARE SOMEONE'S REASON TO SMILE: EPWORTH VILLA

by Vickie Jenkins - Writer/Photographer

Rhonda Spears, enjoys her job as an RN at Epworth Villa, Oklahoma City, Oklahoma. Spears became a nurse in 2007 and her first job in the medical field was working at Grace Living Center. She has worked here at Epworth Villa for almost 6 years. "I enjoy working with the staff and the residents here," she comments. "It makes me so happy to see everyone when I walk in the front door," she adds.

Spears became a nurse because she always wanted to help others and make a difference in other's lives. Some of the qualities that Spears possesses are; passion, caring, loving, always thinking of the other person first and putting their feelings ahead of herself.

Spears traits can be contributed to the way she was raised. I grew up in Hennessey, Oklahoma. "My mother worked in a local long-term care facility when I was growing up and I think that is why I enjoy being

around others. I always knew I would do something that would consist of taking care of people. I admired my mother for her genuine love and concern for others," she comments.

"Growing up in Hennessey, Oklahoma, I moved to Oklahoma City to go to nursing school. I still love to go back to Hennessey and visit all my friends. In fact, I still work at the local nursing home, Hennessey Care Center on weekends or whenever they need an extra hand or something. I love it," she says with a smile. "I work a lot but I still make time to spend with my family and friends," she adds.

"What do you think your biggest asset as a nurse is?" I ask Spears. "I think it would be the importance of the connection of friendship with the residents and their family members. It is like a small community here at Epworth and I need to be friendly with each resident and each member of their family. Of course, that's not a

hard thing to do," she adds.

Asking Spears what the favorite part of her job is, she replies, "It has to be laughing. It is so nice to see our residents laughing and having a good time. We can tell when everyone is having a good day; they are laughing and talking and having fun. Of course, that's pretty easy to do around here," she laugh."

"What inspires you to come to work every day?" I ask. "The most important thing is knowing that when I come to work and walk in that door, I am greeted by the staff and residents with lots of smiles and by my first name. We get to know each other very well and that makes a big difference. I come to work to take care of the residents and know that they realize they are in our care. It's a great feeling."

Spears' hobbies include sports, traveling and spending time with her family. "I absolutely love sports of all kinds," she says. "If you could

describe yourself in 3 words, what would those words be?" I asked Spears. "I would have to say, loyal, patient and thoughtful," she replies.

Ending the interview, I asked Spears to give me her opinion on Miss America's, Miss Colorado's Kelley Johnson's monologue of 'I'm just a nurse.' I think she explains it very well. "A nurse is a lot of talents rolled into one. I don't think a lot of people realize what a true nurse consists of. People don't realize how much time a nurse spends with the patient, standing by their bedside during the day and night. Nurses are some of the most compassionate people you will find. Not only does a nurse take care of their patients but they spend time with the patients family members. I loved Kelley's speech and I think it took talent and bravery to do what she did. Kelley Johnson showed everyone what she was made of. I thought her words were so touching, it made me cry," states Spears.



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Rhonda Spears, RN, enjoys working at Epworth Villa, located in Oklahoma City, Oklahoma. Making sure the residents are happy and cared for is one of Rhonda's daily goals.

On a personal note, I give a big thank-you and shout out to nurses everywhere. We wouldn't be able to

do without you. Thank you for taking care of us in the utmost professional way.

SAVING LIVES ONE FOOT AT A TIME

OU Experts urge awareness and proper foot care for those with diabetes



Dr. Kiersten Weber, a podiatrist with the Harold Hamm Diabetes Center, checks Elizabeth Hixon's foot. Hixon, who has diabetic neuropathy, discovered a wound on her foot following a day of shopping. Even minor wounds like Hixon's can become serious in patients with diabetes without proper care.

Most of the time, a simple bandage can heal a wound, but one Oklahoma woman discovered it would take a lot more to heal the wound on her foot, a problem concealed by the absence of pain.

It is an all too common story in the world of diabetes care and one that could lead to amputation if ignored. The experts at the Harold Hamm Diabetes Center at the University of Oklahoma know it well. With proper awareness and foot care, though, limbs and lives can be saved.

Elizabeth Hixon had no idea she had injured her foot on a recent trip to the store. She was focused on buying gifts. Hixon works year-round preparing presents to bring Christmas smiles to more than 60 orphans. It's her way of honoring her kidney donor, a young, single mother of two children. On that day, though, another shopping trip for gifts ended with an unsettling discovery.

"I came home and took my sock off and my foot had blood on the bottom of it," Hixon said.

The sock was soaked in blood, but she had felt no pain. Why? Hixon got her answer from Kiersten Weber, a podiatrist with the Harold Hamm

Diabetes center.

"Unfortunately, it is very common. Elizabeth, having diabetes, also has neuropathy," Weber said.

Neuropathy is nerve damage that can trigger numbness.

"When someone has lost that feeling, he or she may continue to walk and have no idea that an injury has happened," Weber added.

People who have diabetes, like Hixon, are at increased risk for neuropathy. Combine that with reduced blood flow to the feet and they are also at greater risk of developing ulcers and infections that are difficult to heal.

"The complications that people experience can be devastating. In fact, the number one cause for hospital admissions for people with diabetes is foot deformities or foot infections. So I don't think people realize how problematic a complication involving your feet can be in terms of your overall well-being when you have diabetes," Weber said.

She also pointed out that these complications that occur in the feet are almost always preventable. In addition,

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Oklahoma's NURSING TIMES

DIABETES

Continued from page 4

early diagnosis and care is critical to protecting your foot, your leg and ultimately your life.

Weber said diabetes is the number one cause of lower extremity amputations. To make matters worse, a lower extremity amputation puts the patient at risk for even more problems in the future.

“When somebody has an amputation, the risk of a second amputation within five years is 50 percent. The mortality rate in these patients also goes sky high - as high, if not higher than some cancers,” Weber said. Those facts did not escape Hixon, who had already seen what can happen when a wound gets out of control in someone with diabetes.

“I have a sister-in-law who is a diabetic and has lost a foot and a leg,” she said. Hixon was determined to do all she could to help her foot heal and to avoid future injury.

Diabetes experts know proper foot care is critical for those living with diabetes. That includes checking one’s feet regularly for changes.

“Daily activities that I always try to stress, similar to brushing your teeth every day, include examining

your feet. Every day, it’s important to look at your feet. I know that sounds simple, but especially when you’ve lost that feeling you have to use your other senses – your eyes and your hands – to examine your feet. You’re looking for sores, open wounds and any areas of discoloration,” Weber said.

Hixon now examines her feet religiously each and every day, keeping an eye out for any new calluses, bruises or cuts.

“You want to make sure you don’t get a toenail infected or something that would be a minor problem for anyone else, because it can be major for a diabetic,” she said.

Weber also fitted Hixon with custom-made shoes that aid healing and offer additional protection. She advises all patients with diabetes never to go barefoot.

Under Weber’s care, Hixon’s wound healed in just two weeks. Because of the nerve damage, though, the risk of another injury will always be there, and Hixon said she is not only taking all precautions, she urges others she knows with diabetes to do the same.

Meantime, she is back to shopping and wrapping hundreds of gifts, many purchased by her and some donated, that she and her husband will deliver in December to a home for orphans.

Special to the Nursing Times

The Nurse that Saved My Life

by Kari Moroz

Dear Nurse,

I’m being completely honest, I don’t remember your name or even what you looked like, or how long you spoke. You see, I was only 13 years old and preoccupied with my budding social life, the cute boy who had a locker next to mine, and all my pre-teen body insecurities.

Our junior high girls’ health class was summoned to the auditorium one day for a guest speaker. All I can really remember thinking is that if you spoke long enough, I wouldn’t have to take the quiz in geometry class. My best friend and I chose a seat in the back and shared a stick of gum. We giggled and joked until the lights dimmed, indicating that we should be quiet. We somewhat complied as the principal asked us to honor our guest. We half-heartedly clapped and whispered among ourselves, as if that was somehow more respectful when you walked on stage.

You were there to deliver a message on women’s health. When you talked about periods, a thick tension filled the room. None of us wanted to talk about periods. Some of us didn’t even have our periods yet! You continued on even though it was evident that we were all uncomfortable. My friends started to talk quietly, making plans for the football game. I joined in until I heard you mention breast cancer.

I shushed my friends. My grandmother had breast cancer. I didn’t know anything about it, really except that chemo made her extremely sick. You told us we should get into the habit of doing a breast self-exam in the shower, which of course, threw the juvenile crowd into fits of laughter and groping themselves over their shirts. I focused and leaned in so I could hear clearly.

You passed around a silicone breast form. Each girl took a turn feeling for lumps that indicated disease. Reactions varied, from the red-faced girl who touched it as little as possible to the class clown who stuck it in her bra and danced around seductively. You patiently kept talking over the chaos. I’m sure you felt like you were talking to a room full of toddlers. Was anyone listening?

When the silicone breast came to me, I was curious. I held it, pressed my fingers into it to feel for the lumps when I heard you say, “Who has it? Can you raise your hand?” I lifted my hand timidly. “Feel the lump within the lump, do you feel that one? See if you can poke it enough to feel the piece that feels like gravel.” I nodded. “Breast cancer can feel like a tiny, hard rock but you have to poke around for it. Remember that.”

I did remember that. Sixteen years later, when I discovered a lump in my right breast. I knew to prod a little deeper to feel the gravel, exactly what you told me to expect.

So, Nurse, when you continued to speak to our health class full of rude, loud, socially awkward, prepubescent girls, I’m sure you left hoping someone heard something or anything that you had said. I heard you and your warning saved my life. Thank you.

Kari Moroz is the author of “Stage III Mommy: Beating Breast Cancer One Baby Step at a Time.” She is a 9-year breast cancer survivor and lives in Oklahoma City, OK with her husband and two lovely daughters.

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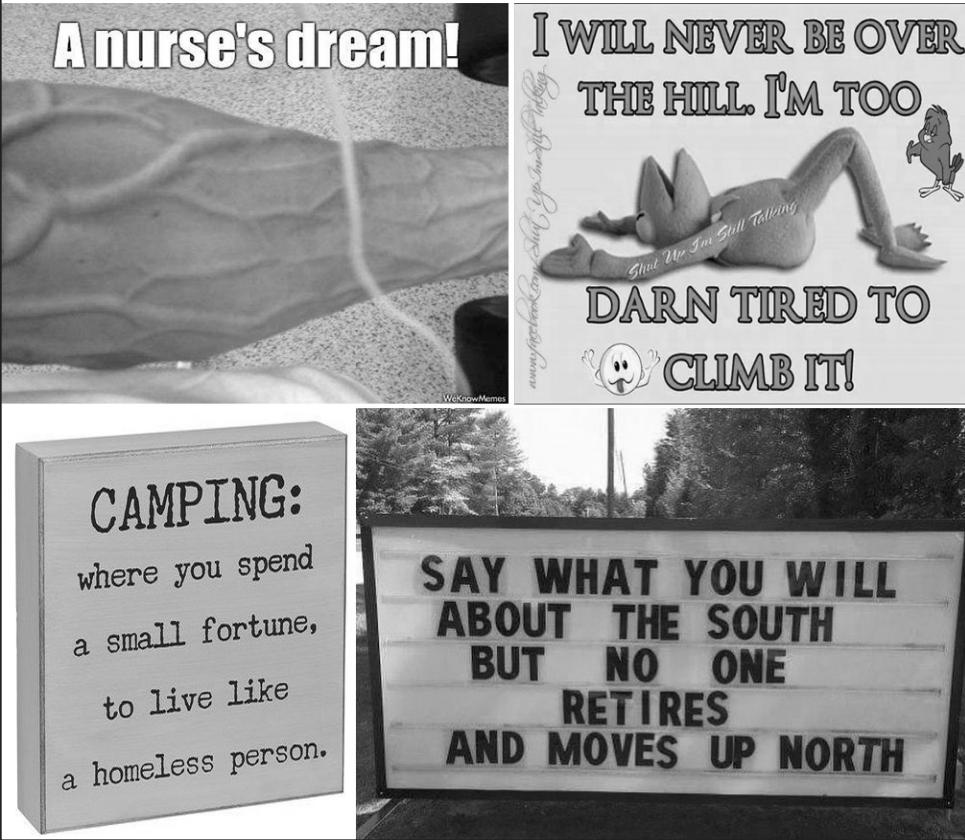
Since cold and flu season is upon us, AllianceHealth Oklahoma is offering a faster and easier way to see a doctor for non-emergency health conditions. The innovative service, called VirtualHealthNow, lets Oklahomans video visit with a doctor, anytime, anywhere via a mobile device, computer or tablet.

Angel B. recently utilized the service and provided this testimonial:

“I received an email about VirtualHealthNow and decided to sign up. I thought I would use it for my son one day, but had no idea that I would end up using it for myself so soon. Late one evening I started experiencing pain with an onset of nausea. As it got worse, I remembered I had this app on my phone and I quickly called VirtualHealthNow. I was very impressed with how easy it was to connect and get professional help that could have potentially saved my life. The doctor advised that I go the ER, which quickly diagnosed me with acute appendicitis and scheduled emergency surgery. I am very pleased with VirtualHealthNow and recommend this service to everyone!” The online service can be accessed from a free app called VirtualHealthNow downloaded from Google Play or the App Store, or on the web at MyAllianceHealth.com.

VirtualHealthNow is intended for patients who have an urgent need to see a physician for minor health concerns like sinus problems, fever, ear infections, cold and flu symptoms, allergies, migraines, stomach pain, and much more. The doctor will evaluate and diagnose the patient, and if appropriate, send prescriptions to the pharmacy—just like an in-office doctor’s appointment.

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Oklahoma's Nursing Times

Hospice Directory

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

Alpha Hospice:

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

Autumn Bridge Hospice:

405-440-2440

Autumn Light Hospice:

580-252-1266

Carter Healthcare & Hospice:

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

Centennial Hospice:

Becky Johnson, Bereavement
Coordinator 405-562-1211

Chisholm Trail Hospice:

Tiffany Thorne, Vol. Coordinator,
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Choice Home Health & Hospice:

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Beth Huntley, Vol. Coordinator,
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Comforting Hands Hospice:

Bartlesville: 918-331-0003

Companion Hospice:

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Vicky Herrington, Vol. Coordinator,

918-641-5192

Hometown Hospice:

Robin Boatman, Com. Relations, Broken
Arrow: 918-251-6441; Muskogee:
918-681-4440.

Crossroads Hospice:

Elizabeth Horn, Vol. Coordinator,
405-632-9631

Cross Timbers Hospice:

Ardmore-800-498-0655
Davis-580-369-5335 Volunteer
Coordinator-Shelly Murray

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Charlene Kilgore, Vol. Coordinator,
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Coordinator, 405-789-2913

Golden Age Hospice:

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Good Shepherd Hospice:

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OKC OK 73108 405-943-0903

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Sharon Doty, Dir of Spec. Projects -
Tulsa 918-744-7223

Harbor Light Hospice:

Randy Pratt, Vol. Coordinator,
1009 N Meredian, Oklahoma City, OK

73107 405-949-1200

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LaDonna Rhodes, Vol. Coordinator,
918-473-0505

Heartland Hospice:

Shawnee: Vol. Coord. Karen Cleveland,
405-214-6442; Norman: Vol. Coord. Lisa
Veauchamp, 405-579-8565

Heavenly Hospice:

Julie Myers, Coordinator 405-701-2536

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918-342-1222, Sapulpa: 918-224-7403

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INTEGRIS Hospice House

Ruth Ann
Frick, Vol. Coordinator, 405-848-8884

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877-274-0333

Hospice of the Cherokee:

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Humanity Hospice:

Kay Cole, Vol. Coordinator
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Spencer Brazeal, Vol. Director,
918-392-0800

Indian Territory Home Health &

Hospice:

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Interim Healthcare Hospice:

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LifeChoice Hospice:

Christy Coppenbarger, RN, Executive
Director. 405-842-0171

LifeSpring In-Home Care

Network:

Terry Boston, Volunteer and
Bereavement Coordinator 405-801-3768

LifeLine Hospice:

April Moon, RN Clinical Coordinator
405-222-2051

Mays Hospice Care, Inc.

OKC Metro, 405-631-3577; Shawnee,
405-273-1940

McCortney Family Hospice

OKC/Norman metro 405-360-2400
Ada, 580-332-6900 Staci Elder Hensley,
volunteer coordinator

Mercy Hospice:

Sandy Schuler, Vol. Coordinator,
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OKC, OK 73112 405-848-3779

Oklahoma Hospice Care

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Johnson, Durant, 800-648-1655

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Tim Clausing, Vol. Coordinator
405-936-9433

Professional Home Hospice:

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PromiseCare Hospice:

Angela Shelton, LPN - Hospice

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Quality Life Hospice:

405 486-1357

RoseRock Healthcare:

Audrey McCraw, Admin. 918-236-4866

Ross Health Care:

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

Russell Murray Hospice:

Tambi Urias, Vol. Coordinator,
405-262-3088; Kingfihser 405-375-5015;
Weatherford-580-774-2661

Seasons Hospice:

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

Sequoyah Memorial Hospice:

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

Sojourn Hospice:

Tammy Harvey, Vol. Manager
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Sooner Hospice, LLC:

Matt Ottis, Vol. Coordinator,
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Tranquility Hospice:

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Dee Fairchild , Vol. Manager OKC Metro:
405.609.3636 Chandler
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Free: 888.901.6334

Woodard Regional Hospice

580-254-9275 Cathy Poe, RN Director



**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. I work with the most amazing woman. She has devoted her career to taking care of developmentally disabled children, many with very challenging needs. She is very passionate about her work and I believe passion is her driving force. How do I find this passion?

A. "Passion plays a central and organizing function in our lives," says Carl Goldberg, Ph.D., associate clinical professor of psychiatry at Albert Einstein College of Medicine in NYC. Passion -- whether it's romantic and sexual or an idealistic drive to improve our lives or the world--invigorates us, inspires us and defines our goals. When people have nothing to long for, Goldberg claims, their days become fragmented and aimless.

It seems that passion today may be in short supply. How often do we talk to someone who is passionate about their work, their relationship or their hobbies? When we do it can be infectious and motivating and maybe cause us to pause and look at our own life.

Is it enough to just go through the motions and then call it a day? It must be very inspiring to work with your passionate friend. Her children are certainly blessed as are their parents.

To find passion you must dig deep into your interests and inventory the possibility of making something happen that would make you feel energized. I recently talked to Erika who was working as an attorney. She signed up for a very rigorous three month yoga training to be an instructor, something she had wanted to do for a long time. When the group leader asked Erika to talk about herself she said, "I am an attorney and I hate it." After the training she analyzed her finances, quit her job and bought a yoga studio. No more depositions for her.

If there is something you have always wanted to do, start planning now. Time has a way of getting away from us and five years passes and we realize we are still doing the same things and not really any better off.

So is there passion in your life that is being stuffed away, underneath something that you are doing that you don't enjoy? See if you can let it out and make some very healthy life changes.

We really do need passion in our lives!!

Specialty Hospital Offering Long-term Care for Medically Complex Patients to Open on the Campus of Mercy Hospital

Beginning this month, patients with medically complex conditions needing care in a hospital setting for an extended period of time have a new treatment option on the Mercy Hospital Oklahoma City campus.

AMG Specialty Hospital Mercy, located on the second floor of Mercy Hospital Oklahoma City, is a 18-bed licensed long-term acute care hospital that provides inpatient diagnostic, therapeutic and rehabilitation services for adult patients with complex medical needs who meet certain admission criteria.

"The new AMG Specialty Hospital Mercy is a hospital within a hospital," said Michael Gerten, chief executive officer of AMG Specialty Hospital

Mercy. "Our patients receive care from an interdisciplinary team based on an individualized care plan that extends the treatment initiated in a traditional hospital setting. We are thrilled to offer inpatient services for longer periods of time so patients can improve their health, resume their normal lives and, hopefully, avoid additional hospitalizations."

Patients who typically qualify for services have conditions involving two or more systems. This often includes patients with complex wounds, ventilator dependency, pneumonia, acute respiratory failure, sepsis, surgical wound complications, diabetic and vascular ulcers, severe

See AMG next page

OMRF accepting applications for 2016 Fleming Scholar Program

Does a summer full of scientific experiments and hands-on lab work sound right up your alley? If so, the Oklahoma Medical Research Foundation's Fleming Scholar Program might be right for you or someone you know.

Applications are now being accepted for the 2016 Fleming Scholar Program. The deadline to apply is Feb. 1.

Applicants must be Oklahoma residents at the time of high school graduation and at least 16 years old to qualify for this award-winning program. High school seniors and college freshmen, sophomores and juniors are eligible to apply. The application process is completed online at www.omrf.org/fleming and includes submission of a long-form essay, letters of recommendation and transcripts.

Students selected as Fleming Scholars are paid and may be eligible for housing.

Those selected will have the opportunity to work for eight weeks under the guidance of senior-level scientists and physicians and hone their research skills while working with state-of-the-art equipment and technologies.

"This program has provided a springboard for many successful careers in science and medicine," said Fleming Scholar Program Director Carlisa Curry. "We feel that students benefit tremendously from this experience. Our scientists also see meaningful contributions from their work, so it is a win-win that has continued to improve every year. This is a unique opportunity that should not be missed."

The program is named for Nobel prize-winning scientist Sir Alexander Fleming, who discovered penicillin and dedicated OMRF's first building in 1949. Since the inception of the program in 1956, more than 500 Oklahoma students have spent their summers at OMRF. Two current OMRF program chairs, Rodger McEver, M.D., and Judith James, M.D., Ph.D., started their research careers as Fleming scholars.



NURSE + TALK

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Abigail Lee, LPN

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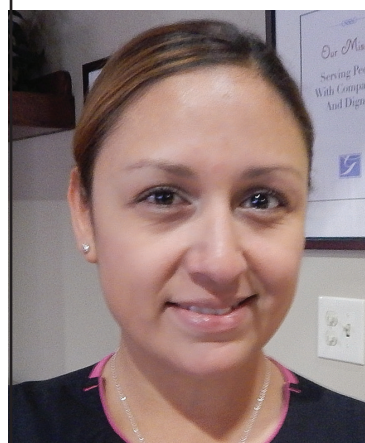
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"I enjoy doing what I do. I love working with the elderly. They keep a smile on my face and I love my coworkers."



Julie Houston, CNA, CMA mentor

"Most of my life, I've always wanted to be in the nursing field. I love helping others. I love being part of their lives because we are all considered a family."



Alma Ruiz, CNA, CMA, ACMA

AMG

Continued from Page 10

malnutrition and acute renal failure, among other complex conditions.

The specialty hospital provides daily physician oversight of patient care, 24-hour nursing, respiratory therapy services, and several clinical programs, including pulmonary and ventilator weaning; transitional rehabilitation; wound care; and a medically complex program, which includes hemodialysis and treatment of infectious diseases. On average, patients at the specialty hospital stay about 25 days.

"We are excited to team up with AMG to open this new specialty hospital to provide much-needed care to patients for longer than what we can provide in the traditional hospital setting," said Jim Gebhart, president of Mercy Hospital Oklahoma City. "Both Mercy and AMG are known for their clinical excellence and compassionate care, which makes this such a great partnership."

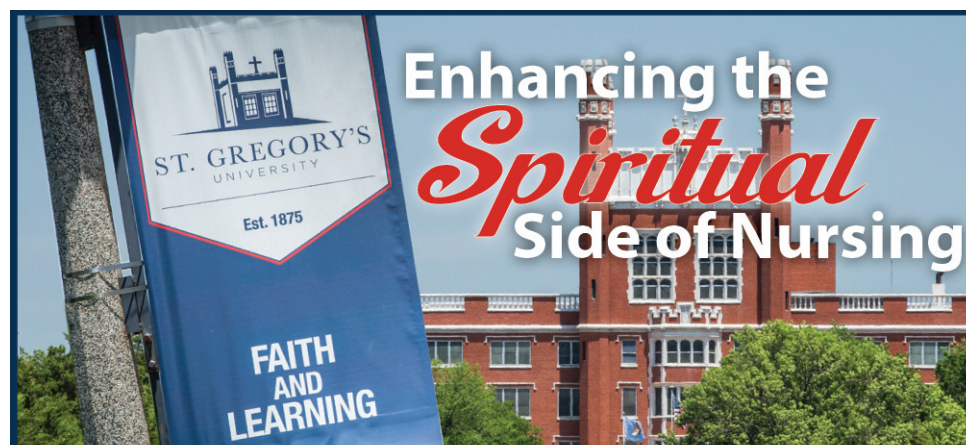
A referral from a physician, provider or case manager is required prior to admission at AMG Specialty Hospital Mercy. For more information, call 405-341-8150.

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