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Long-term care transforms patients into family, friends



Leila Reich enjoys the family atmosphere at Curahealth in Oklahoma City.

by Traci Chapman

For Leila Reich, long-term care means a closeness with her patients not afforded many other nurses; she wouldn't have it any other way.

"I love the nature of long-term acute care - you get to really know

your patients, everybody's got a story, you get close to people and you get to know their families, I love my patients and their families."

A love for her chosen vocation runs as deep as her affection for her patients, the longtime LPN said. After working 10 years at Shawnee High School, Reich decided to make a change and headed to LPN school. After graduation, she worked for Hillcrest Hospital in Oklahoma City for eight years but then found a slightly different calling - long-term care. Reich joined what was then Vencor Hospital, which was to become Kindred, for 22 years. In October the

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RN delivers for AllianceHealth



Linda Dixon, RN, BSN, MS-MHA grew up watching her mom take care of rural Kansas residents.

story and photo by Bobby Anderson, Staff Writer

Growing up in tiny Belle Plaine, Kansas (population less than 2,000), Linda Dixon learned a lot peering outside the window of her mom's van.


"You take care of your people," she said of the biggest lesson.

And it was her mom, one of the only registered nurses around, who taught that lesson on a daily basis.

Dixon, RN, BSN, MS-MHA, is now the director of nursing for the AllianceHealth Midwest Birthing Center. But her nursing education started as a little girl out on those Kansas plains.

FIRST RESPONDER

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REICH

Continued from Page 1

name – and the hospital's ownership – changed once again, when the facility became one of 12 long-term acute care facilities purchased by Dallas-based Curahealth.

While changes have brought with them challenges, one thing has always remained a constant – her patients and how deeply they have impacted her life.

"It is just such a special experience to really be able to practice the skills you have, do what you love but also be a friend, even a member of the family."

"My coworkers are always there, they make me feel good about myself, sometimes they believe in me more than I do in myself,"

Leila Reich, LPN

"We have people come back for a visit or who give us a call to let us know how they're doing, about maybe a milestone in a family member's life, even to check on us, and we can call and check on them," Reich said. "There's that closeness, it really goes both ways and extends to the family members a lot of the time too."

Family is what working at the facility is all about for Reich. Her husband, Willie, is also a Curahealth employee; with her longevity, Reich said she has forged lifelong bonds with a staff that inspires her to be her best every day.

"My coworkers are always there, they make me feel good about myself, sometimes they believe in me more than I do in myself," Reich said. "I can be having a bad day, just feel off, and without fail they change that."

Twelve-hour shifts also allow Reich to spend time at home. That means she has plenty of time for her three children and six grandchildren, one of the major benefits she has enjoyed in more than two decades working at the facility.

"It just makes such a difference to have that ability, where sometimes I hear from colleagues how they can't attend this or that with family members," Reich said. "Of course, I have that happen, but not very often."

Those shifts also carry with them an added benefit, Reich said – not just a greater level of interaction and affection with her patients, but also the ability to develop skills at the LPN level that might not be possible at

regular, short-term facilities.

"Keri (Chelf, Curahealth critical officer) treats LPNs like RNs, she respects our abilities and allows us to really demonstrate and improve our abilities," she said. "That is very motivating."

Reich said her biggest challenges – one old and one new – were her biggest. The nature of long-term care cases, things like wound care, respiratory and pulmonary ailments and the like, meant getting the patient up and around quickly was critical.

"Sometimes that can be difficult," she said. "Maybe they're afraid of that, they can be weak, emotionally drained even, but that step is just so

vital."

"It's something we work on all the time, and we look to the family to help us in reminding our patients how important that is, even when they don't feel like it," Reich said.

The new challenge, which came with the October change from Kindred to Curahealth, was an administrative one – paper charting. In recent years, handwritten patient records have become almost obsolete as computerized records have taken hold. Paper charting is a Curahealth procedure, however, so it's something both nursing and administrative staff are working together to acclimate to, Reich said.

"It's funny, before it was learning the programs and the computerized way of doing things and now it's kind of the opposite," she said. "You don't realize how much you've come to rely on doing it digitally."

For now, that's just a challenge that goes with the territory, and one Reich said is worth it for the opportunity to deal with patients on a level she has come to cherish every day.

"It means so much to be able to provide a better service because you get to know the patients so well, because you know their lives will be so much better because they have a true chance to heal in an environment like this," Reich said. "It's a blessing to them, but it's a blessing to me too – because they're my patients."

DIXON

Continued from Page 1

Dixon grew up watching her mother work in community health by default.

When the volunteer fire department was called out for a farm accident or roadside emergency and it was more than the emergency staff could handle, the Dixons' phone would ring.

"It took too long for the ambulance to come from the city so we had a little van and my mother could actually be there before the ambulance got there," Dixon said.

As she got older, Dixon and her siblings would make the emergency visits that stretched all four corners of rural Sumner County.

When the phone rang Dixon knew it could mean the family would be piling in the van and speeding off.

"Me, my brother and sister were watching," said Dixon, the middle child, of when her mom arrived on scene and the kids stayed in the van. "We'd be in the car praying. My mother was always taking care of somebody."

No wonder Dixon and her sister became nurses.

"(Mom) encouraged it and thought it was a wonderful way for women to make a living," Dixon said. "She worked back when women didn't work. It was very unusual. She really, really wanted us in medical and we both ended up there."

Her nursing license came in 1992 as did a job in labor and delivery for a major hospital system in the metro.

She thrived and soon became pregnant with identical triplets who would go on to wrestle for the University of Oklahoma.

"I have three girls but when I had the three boys I wanted to work a little closer to home," Dixon said of her career move. "It wasn't safe to leave the house."

"I had to be close to them because they could burn something down pretty fast," Dixon laughed.

A move to the Renaissance Hospital in Edmond followed where she delivered babies for years until the facility was purchased.

She mixed things up a little in her career and got in on the ground floor helping Oklahoma Blood Institute start a public cord blood bank focused on regenerative medicine.

"I guess I wanted to get back into the hospital setting even though I

collected stem cells at the hospital," Dixon said of her next venture.

With applications in at several area hospitals, Dixon felt her life come into focus when she sat down across from AllianceHealth Midwest Chief Nursing Officer Gloria Ceballos, PhD, RN.

"Something about the interview with her, I just wanted to work for her," Dixon said. "I felt like she was turning this place around and I believed her. She showed me the improvements they made and I thought 'I want to be part of that.'"

Dixon took the reigns at AllianceHealth Midwest Birthing Center.

Dixon says if you separated the birthing center from the main hospital it would be considered a five-star facility.

She embraces the one-room birthing concept.

"The (staff) believed in me and a year later we're there among the tops in the country," she said.

"I want to maintain it. It's one thing to get there. Anyone can lose weight but can you keep it off? That's the trick," Dixon said. "That's what we're doing now. We're there so our concentration is to stay there. We want to be one of the premier

birthing centers in the country and stay there.

"You're going to get better care."

Dixon credits her nurses with knocking it out of the park. Presenting them with all the information and understanding how productivity numbers relate to what takes place on the floor helped tremendously.

"We sit down and once we get a plan they buy in," Dixon said. "Once you get buy-in it's done. You can enforce rules on anybody but that doesn't mean they're going to do it when you turn your back. But if they believe it and they're bought in they'll do it."

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Our daughter, Ellie, was born in November 2008. When she was 3 months old, we found out she had a liver problem. We went to Children's Hospital in OKC, but were soon sent to a transplant center in Nebraska for evaluation. On March 18th, Ellie was put on the list for transplant. We came back home to wait. Ellie was treated at Children's twice a week, until she began to lose weight in May. We went back to Nebraska the day after Mother's Day, and she was admitted to the hospital. While there, I was evaluated as a living donor for Ellie, and we soon learned I could give her part of my liver. Ellie's transplant was on May 22, 2009. It was the hardest thing that I've ever done, but the

easiest decision of my life. We came home Father's Day weekend.

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Beneficial research for mankind

Mid America Stem Cell Institute plans presentation

by James Coburn - Writer/Photographer

Dr. John Nelson wants to alleviate any fears about stem cell research. He and his partners at the Mid America Stem Cell Institute plan a presentation on April 5th at the Summit Medical Center located at 1800 Renaissance Blvd. in Edmond.

The public is invited to become more educated about what stem cells are and how they can be used in treating a variety of degenerative conditions from back pain, to knee pain and chronic lung disease, diabetes, some neurological disorders, he said.

"Even though it's not FDA approved we think it's very safe because basically we are using the patients' own stem cells from their body fat," Nelson said.

The stem cells his clinic use have nothing to do with abortion embryonic stem cells, he said. His partner, Dr. Doug Beall, is currently involved in a three-year study of injecting stem cells into discs of

people with back pain. He is also involved in another study of injecting stem cells with a source from Miami.

Mid America Stem Cell Institute collaborates with other biomedical research groups across the county. The more data they can accumulate serves to benefit humanity. More than 500,000 stem cell procedures have occurred worldwide in the last 20-30 years.

"We think with good patient selection there are a lot of conditions that can benefit from this," Nelson said. "I myself was a patient."

It is personally enriching from Nelson to be able to share stem cell research to enlighten and engage people regarding health care opportunities. He said the potential of collaborative research is not completely known.

"The science is still evolving in terms of how do we select a sub population of stem cells that are going to be more specific to conditions,"

Nelson said. "For example, someone with a torn cartilage in their knee where it's bone on bone -- if you can regenerate some of their cartilage to avoid the need for surgery, that's an advantage."

It comes down to what kind of cartilage you are regenerating because there's different types, he said. Preferentially you would like to regenerate the type of cartilage that was already there.

Research is focusing on determining genetic and stem cell markers to use in certain conditions. Investigators are learning to separate them from all the stem cells they harvest. There is also interest investigating if the stem cells are doing what needs to be done or are they acting as a messenger to attract other cells and other stem cells to come the sites of injury or inflammation.

"As a patient myself who had a bad pulmonary problem," he said.

Nelson does not smoke and nobody could figure out what was wrong in spite of a lung biopsy.

"After five days when I received IV stem cells, the cough and symptoms completely resolved," he said. "And eight months later I repeated the CT-scan and all the nodules were gone. So I personally have seen the benefits of this in my own health."

Nelson had been on the verge of having to quit his practice. He literally was coughing every minute of the hour, day and night, for two years. He was physically exhausted and had given up on lecturing locally and overseas due to coughing.

"So it changed everything for me," he said. "And when I tore my meniscus in my knee last fall, I injected stem cells in my knee and eight weeks later, my pain was gone and I didn't have to have surgery."

Now the institute is working with a company that has stem cells

Continued on next page


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Dr. John Nelson reflects on how stem cells benefitted his own life at his clinic at the Mid America stem Cell Institute in Oklahoma City.

from healthy cord blood from healthy newborn babies, he said.

"It may have some specific advantages as well in terms of the potency of stem cells," Nelson explained. "So everything is evolving."

Nelson attended an annual meeting in February and said he is sure if he goes to the meeting next year there will be all kinds of new information.

"It's an exciting time to be involved in this," he said.

As a medical doctor, Nelson said his ability to help other people is a humbling experience. He and

Dr. Beall have seen some patients have almost miraculous responses to treatment.

"I can recall a patient with lupus who had 80 percent remission," Nelson said. "A patient with Parkinson's disease had a 60 percent improvement."

But the research remains on a learning curve. Collaborative research is serving the betterment of mankind. A world-wide community is engaged in this.

"Europeans and people outside the country probably are ahead of us because they haven't had all the FDA sanctions. But we think that is hopefully going to change, too."

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Special to the Nursing Times

"Smoker, Looking for a few Good Precept Nurses"

Francella Smoker has been a registered nurse for over 14 years with a background in peri-operative nursing and trauma. She completed her BSN at Armstrong Atlantic State University with a focus on research, leadership, and management. She received her Masters from Capella University with a focus in nursing education. She is currently completing her Doctor of Philosophy (Ph.D.) degree with Capella University with a focus in nursing education. She served 15 years in the military before making Oklahoma City home. She has professional memberships with the National Nursing Association and the Oklahoma Nursing Association. She recently participated in Nurses Day at the Capitol and spent a day at the Capitol advocating for nurses with the Oklahoma Nurses Association. Smoker said, "This was an invigorating

experience and I look forward to continuing being an advocate for nurses."

Francella is currently working on her dissertation and asking Oklahoma nurses for input with the research component of her dissertation. Smoker commented, "The primary focus of my dissertation study is to investigate how nurse preceptors describe factors that influence their role of precepting nursing students during clinical practice and training. I became fascinated with the preceptor issue while reflecting on my experiences as a nurse preceptor and a BSN student, reflecting on observations over the years working as a staff nurse in clinical settings, asking questions, and in leveraging the literature. Nurse preceptors are pivotal in the training of student nurses during clinical which is why



photo by Mai Huu Phuc


Francella Smoker, Msn, CNOR is currently working on her doctoral degree and asking Oklahoma nurses for input with the research component of her dissertation.

they were selected for this study. First, nurse preceptors have experience in precepting nursing students. Second, they are knowledgeable practitioners with years of clinical experience. Third, their input in training the next generation of nurses is critical to the nursing profession and clinical education. Finally, nurse preceptors serve as teachers and role models for student nurses."

The research question her study seeks to answer is; how do nurse preceptors describe factors that influence their role of precepting undergraduate student nurses in clinical training? "I will interview nurse preceptors either face-to-face or through Skype to collect the data in order to answer the research question. I believe that understanding the factors influencing the nurse preceptors' role when precepting undergraduate student nurses in their clinical training will enable nurse educators to understand what types of decisions they must make to support and facilitate nursing students; especially in developing more realistic curricular materials to guide the preceptor and student's

clinical development. I also believe understanding the factors that influence the role of the nurse preceptor, acquired through years of experience, and through trial and error can enhance the ability of nursing managers and educators to empower students and qualified nurses to pursue effective competency development pathways to provide a higher standard of patient care," Smoker stated.

If you would like to participate, Francella is currently looking for volunteers. You must be an RN working in the clinical setting with 3 or more years' experience precepting nursing students. You are currently precepting or have precepted nursing students within the last 2 years. You have an active unrestricted nursing license. Participants will remain anonymous in the research study. The information and data collected is secured. Please respond before June 3, 2017. For more information about this study, or to volunteer. Contact: Francella Smoker, Doctoral Learner/ Capella University at: 405-625-5867 or you can email Francella at fransmoker@gmail.com



HAPPY NURSES WEEK 2017

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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

Choice Home Health & Hospice:
405-879-3470

Comforting Hands Hospice: Bartlesville:
918-331-0003

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

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

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

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

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

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

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

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

Golden Age Hospice: 405-735-5121

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

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

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

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

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

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

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

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

Hospice of Green Country: Tulsa:
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918-224-7403

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Coordinator, 405-848-8884

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

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

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

Indian Territory Home Health & Hospice:
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Interim Healthcare Hospice: 405-848-3555

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

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

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

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

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

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Physician's Choice Hospice: Tim Clausing,
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Professional Home Hospice: Sallisaw:
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888-647-1378

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

Quality Life Hospice: 405 486-1357

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

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

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

Seasons Hospice: Carolyn Miller, Vol. /
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Sequoyah Memorial Hospice:
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New CareerCast Report Identifies Best Jobs for Veterans

Nurse, Financial Advisor and Info Security Analyst Among Best Careers for Veterans

In its new report, CareerCast has identified eight of the best civilian careers for veterans, including RN, Financial Advisor, Info Security Analyst and Operations Research Assistant.

"There are many benefits to hiring veterans, says Kyle Kensing, Online Content Editor, CareerCast. "The discipline, teamwork and leadership qualities emphasized in the military directly translate to the civilian workforce. Skills gained during military service are in high-demand."

Public and private sector efforts to recruit and employ veterans have paid major dividends in lowering the unemployment rate for veterans. The U.S. Bureau of Labor Statistics reported in 2016 that of the approximately 21.2 million men and women with military experience, an unemployment rate that hovered near 10 percent just seven years ago has been cut almost in half.

The Veterans Opportunity to Work Act was designed for the Department of Labor to match veterans with career paths based on their responsibilities while in service. Private-sector companies are also launching their own hiring initiatives to match veteran job seekers with open positions.

Growing emphasis on technological skills in the military translate well to a growing market for IT professionals. Information Security is an area of growing importance in both military and government matters. Veterans who work specifically in IT security during their service can effectively translate their skills into government positions of the same nature.

Another area of emphasis in military service is healthcare. Nursing positions are also in-demand for enlisted personnel, and many states allow veterans with experience as nurses in the military to apply that experience to civilian certification. For those veterans looking to use their civilian careers to make a positive impact for others in the military, careers in management and finance offer great opportunities. Businesses tailoring their outreach to the veteran community are increasingly turning to veterans for Management Consultant and Operations Research Analyst positions.

Financial Advisor is the No. 1 most in-demand field in the CareerCast Veteran Network job database. Veterans with a background in mathematics and finance can work directly with military families to help them protect their investments and savings. The improved employment landscape for veterans isn't merely a boon to one section of the workforce. Veterans bring skills that greatly benefit employers, making them prime candidates in a variety of fields.

Here are eight of the best jobs for veterans:

Profession	Annual Median Salary*	Growth Outlook*
Financial Advisor	\$89,160	30%
Information Security Analyst	\$90,120	18%
Management Constant	\$81,320	14%
Nurse Practitioner	\$104,740	31%
Operations Research Analyst	\$78,630	30%
Registered Nurse	\$67,490	16%
Sales Manager	\$113,860	5%
Software Engineer	\$100,690	17%

*Wages and projected growth outlooks through 2024 are from the Bureau of Labor Statistics. To read the full report, visit <http://veteran.careercast.com/jobs-rated/2017-great-jobs-veterans>

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

OMRF announces 2017 Fleming Scholar class

The Oklahoma Medical Research Foundation has selected 13 Oklahoma high school and college students as Sir Alexander Fleming Scholars for 2017.

The students for OMRF's 62nd class of Fleming Scholars were selected following a competitive statewide application and interview process. Those selected as scholars will spend eight weeks working side-by-side with OMRF scientists on specific research projects covering subjects such as autoimmune disease, cancer and cardiovascular disease. At the program's conclusion, the scholars will author scientific papers and deliver presentations to OMRF's scientific staff. "This unique program brings a sense of excitement to our labs every summer, reinvigorating our staff while also providing a once-in-a-lifetime opportunity for these bright students to get hands-on experience in a lab setting," said OMRF Fleming Scholar Program coordinator Heather Hebert. "The experience allows students to see if a career in science or medicine is in their future, while also providing them with invaluable skills they can use in any career path." Since it launched in 1956, the Fleming Scholar Program has provided nearly 600 Oklahoma students with a first-hand look at careers in research and medicine. The program is named in honor of famed British scientist Sir Alexander Fleming, who discovered penicillin and came to Oklahoma City in 1949 to dedicate OMRF's first building.

The 2017 Fleming Scholars, their hometowns, and current schools are: **Abigail Ballard**, Norman, Norman North High School, **Monica Davis**, Jones, Jones High School, **Madeline Gish**, Edmond, Hillsdale College, **Kari Hall**, Edmond, University of Oklahoma, **Keirah Jefferson**, Moore, University of Oklahoma, **Kristy Johnson**, Blanchard, Blanchard High School, **Jarett Lewis**, Edmond, Dartmouth College, **James Li**, Edmond, Washington University in St. Louis, **Han Li**, Oklahoma City, Westmoore High School, **Joshua Ross**, Pryor, Oklahoma State University, **William Towler**, Edmond, Oklahoma State University, **Henry Unterschuetz**, Tulsa, University of Oklahoma, **Kobby Wiafe**, Bethany, Baylor University



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 really didn't see it coming. My wife and I went to our first counseling session and when the therapist asked if we both wanted to remain in our marriage, I said, "Yes of course I do." My wife said, "I was afraid to say this at home but I want a divorce." WHAT???

A. Susan and I had been married for 13 years. We had the usual conflicts, just like all married couples. Susan would bring up things that annoyed her about me but I always thought it was just her mood and it would pass. I never had the insight (I have learned that word in therapy) to realize the damage that was being done by my aloof attitude.

So what went wrong?

Here is what Susan shared with the therapist:

I have asked Jim (that's me) countless times to use the laundry hamper for his dirty clothes. I wouldn't even call it a near miss; the clothes end up wherever they land. Each time I would see his clothes on the floor I would go from annoyed, to irritated, to angry, to apathetic. It was exhausting to tell Jim to pick up his clothes on a daily basis. He also never offered to help with other household chores, even though I work a full time job too.

I wanted Jim to be my partner and not put me in the role of "his mother." He is a grown man who is able to see the clothes hamper, lift the lid and put the clothes in it. I can do it, no one has to remind me.

I was being disrespected!!! How can something so simple and easy become such a deal breaker. The more I brought it up the more he seemed determined to continue doing it. It made no sense to me. He doesn't understand that I am not divorcing him because he did not use the laundry hamper or put his dirty dishes in the dishwasher.

Here is what Jim learned:

All of a sudden, I realized it's not about something as benign and meaningless as dirty laundry on the floor or dishes in the sink. I don't have to understand WHY she cares so much about having to pick up my dirty laundry, I just have to understand and respect that she DOES.

The words "I Love You" cannot carry a marriage. Actions will always speak louder than words. The man capable of behavior changes even when he does not understand or agree with her thought processes can have a great relationship.

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