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Magic of the season

Nurse spreads Christmas cheer



photo by Bobby Anderson

Norman Regional Health System's Sharon Smith-Davis, RN, is a 35-year nurse, professional barrel racer and now an accomplished children's author.

by Bobby Anderson,
Staff Writer

Growing up with four siblings, Christmas was always a very special time for Sharon

Smith-Davis, RN. Lots of fun, lots of games and lots of family always made the season one she would look forward to all year long.

Christmas in the Smith-Davis household meant attending Midnight Mass before coming home to eat and open presents.

It was a night filled with wonderment - and to Smith-Davis - one bursting with magic.

That's why decades later the Norman Regional Health System nurse decided she needed to capture that magic

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Saving lives OU Medical Center is ready for the challenge

story and photo by James Coburn

Most of the people don't ask to be sick or plan a hospital admission. But when there is a health crisis, they find help at OU Medical Center Oklahoma City.

Dedicated nurses serving in the cardiac program, or Cardiovascular Institute at OU Medical Center are part of a continuum of care navigating the hospitals with opportunities.

"Our nurses have the opportunity every day to work in CVT and still have mobility in different areas," said Scott Coppenbarger, hospital spokesman.

This continuum of care is a high priority for the patients' experience as nurses are specialized in certain areas.

Examples include the Cardiac Intensive Care Unit, step down, in house telemetry, cardiac floor, cardiac rehab, cardiac trauma, cardiac service line management, ability to impact STEMI times and outcomes, cath lab, adult congenital program, thoracic program, perioperative services, and the heart, lung and valve clinic.

Corinna Reed, RN, has been a nurse for 21 years. She works in the cath lab where diagnostic and interventional procedures are performed.

"For blockages in the heart, we stop heart attacks. We put pacemakers in and help eliminate blood clots," Reed said. "There's so many procedures we do. It's becoming more and more encompassing."

She said some procedures have been transferred from surgery to the cath lab setting where it is less evasive. Patients can be in and out of the cath lab in an afternoon versus surgery where they may stay overnight. So comprehensive care is becoming much easier for patients and families, Reed explained.

All of the cath lab nurses are critical care nurses. Reed has always circled back to focusing on the heart.

"I like to see people walk out of here," Reed said. "One of my biggest rewards when I recovered open hearts was getting to take the ventilator off, and then the next day walking them down the hall to the cardiac nursing floor."

A few days later, Reed would watch her patients wave goodbye as they were wheeled out of the hospital.

During Shawn Penington's nine years at OU Medical Center he has worked in intensive care and cardiac intensive care units.

See MAGIC Page 3

See OU Page 2

OU

Continued from Page 1

The RN currently serves patients in the cath lab. OU Medical Center has been good to him by providing vital experience.

Patients who have had open heart surgeries will sometimes come to the cath lab for stents. The RN is familiar with all the medications they take.

"Some of those people come in. They are not scared. Some of them have a lot of anxiety," he said. "So I like to identify with those kind of people."

Understanding their emotions by acknowledging they are scared helps to ease their mind.

"Usually I tell them I would be scared, too, 'if I was where you're at,'" Penington said. "Even though I know there's good outcomes of what we do and nothing's going to go wrong I would still be afraid myself. That's usually where I can meet them on level ground to help calm their fear."

Nurses are attracted to cardiovascular ICU care because of the complexity of the work, said Bertha Nunez, RN, nurse manager for cardiovascular intensive care. It's the hard work, she added.

"The critical thinking aspect, the busyness, because if your heart's not working right then other things won't work right either," Nunez said. "And you have to have the anatomy, physiology knowledge behind it. Know your medications and how it impacts one organ and the rest of the body as well."

Some nurses have been in different roles with OU Medical Center for more than 20 years, she said. There are also younger nurses the hospital works hard to keep on staff.

Nunez commends the nursing staff for their dedication, she said. They take the extra effort to help patients feel better, she said.

They also incorporate the family and feel gratified that



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for the 12 hours of work, they made a difference in a patient's condition.

"That's what attracted me to nursing was the ability to help somebody who may be anxious like Shawn said, or somebody that doesn't know what's going on and taking the time to explain," Nunez said.

Teamwork and support through all aspects of the organization makes OU Medical Center's stellar reputation thrive.

Ashley Milam, RN, works in the cardiothoracic ICU. She aids in heart recovery after open heart surgery and other dealings with the lungs and esophagus.

"We get them after surgery. They see us after the procedure is done and throughout their stay in the recovery process," Nunez said.

Patients going to the hospital are trusting their lives with someone else.

"I admire their fight and their drive," she continued. "And how they can be in an area that is very scary and they remain calm a lot of times. I

admire they put so much trust in us."

The staff remains updated with the flow of state-of-the-art technology be means of a computer system, said Chandra Ross, RN, manager of the cardiovascular progressive care floor unit.

"To update we use evidence based practice articles," Ross said. We have a couple nurses that do that often, pull that up for us and spread it through the units."

Information is shared during huddles and weekly updates.

"I was always drawn to the seriousness of different heart diseases," Ross said. "I've loved every aspect of it from the floor nurse, supervisor and now the manager," she said.

Nurses stick with cardiac nursing because of its energy and complexity of different procedures, Ross said.

"They get to see a whole variety of things because how the heart impacts stroke, vascularization and different things. They love new challenges," Ross said.

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MAGIC

Continued from Page 1

and pass it on by writing her first book, *The Legend of the Reindeer Shoes*.

"I tapped into something I had been thinking about," she said. "I just wanted to leave behind for future generations some good, old-fashioned Christmas magic."

The Legend of the Reindeer Shoes is a tribute to the tradition of that Christmas magic. This delightful story chronicles the preparation and journey of Santa and his reindeer on Christmas Eve and introduces Jingle, the North Pole's blacksmith.

According to the legend, the reindeer need shoes on their hooves before they can leave on their famous flight. During the trip their shoes are in frequent need of repair and replacing if lost.

Jingle is there to attend to their needs and assure that the reindeer have a full set of shoes on their hooves for the job ahead.

The story reveals that the reindeer shoe itself is a magical source and if you are lucky enough to find one and hang it from your Christmas tree, you too will experience a little bit of good old fashioned Christmas magic.

Smith-Davis wants everyone to make Christmas Eve a memorable family tradition but it took a devastating accident to settle her down long enough to put what was in her head and her heart down onto paper.

Smith-Davis had long written poetry just for herself but a professional barrel riding accident in 1997 on her sport's largest stage that unsaddled her from her best friend.

The five-time National Finals Rodeo competitor was separated briefly from riding due to a personal injury and found herself alone with her thoughts.

Looking to occupy her time, she turned her attention to writing a book. Her leg fracture was long healed by the time she completed her labor of love.

It took an entire year from start to finish to complete the book.

They say write what you know and Smith-Davis did.

The reindeer's eyes are drawn from one of her best quarterhorses.

The reindeer shoes were originally forged by a six-time world champion blacksmith and then sent onto a toy factory to create the molds.

When she's not working you can find Smith-Davis reading her book at local schools.

"I always ask my kids 'did my book make you smile,'" said Smith-Davis, who still competes locally. "When I see that smile it's all good."

"My big hope for it is to maybe one day be made into a traditional Christmas movie."

Labors of love can be expensive. She poured \$20,000 into the venture through illustration and publishing costs alone.

But it's all worth it to her.

It was years later Smith-Davis realized how much her mother, a registered nurse herself, put into the whole night before getting up early to work her shift on Christmas Day.

It was just one of the memories that came to her when her mother passed away last week.

That selfless love is part of the season to Smith-Davis, who already has her thoughts swirling around her next book, an Easter theme to go with her love of rabbits.

When she's not writing she's working at one of Norman Regional's campus as a flex nurse, drawing a new assignment, new unit and new campus each shift.

"I love nursing," Smith-Davis said. "I love the science part of it. I like maintaining healthcare standards and assuring that people get quality care."

From home health to supervisor of a medical surgical floor Smith-Davis has worked in every setting outside of women's and children's services during her nursing career.

After 35 years she can recover a heart or take pretty much any post-op patient that comes her way.

And she still loves it.

"I love my boss," Smith-Davis said. "I just like - as the work implies - the flexibility. You don't go to the same place every day. I learn something new every day and I'm amongst the most experienced people that are awesome to work with. And we're blessed to have the quality of doctors we have."

"I love it all."

You can buy the Legend of the Reindeer Shoes book and a magical pair of reindeer shoes online at www.reindeershoes.com. You can also contact her directly through the website.

And her greatest hope is that your family will make its own holiday tradition and the magic returns each and every year.



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CAREERS IN NURSING

A PLACE TO CALL HOME: HOME IS WHERE THE HEART IS

by James Coburn - Writer/Photographer

The residents living at Golden Age Nursing Center in Guthrie know they have a friend in Danielle Wolfington, RN, MDS coordinator. She also works on staffing there.

She earned her nursing degree at Northern Oklahoma College in Tonkawa has been a nurse since mid-2015.

Wolfington began her career working in surgical nursing at OU Medical Center in Oklahoma City. She said her experience there was challenging and rewarding but she wanted to return to geriatric nursing because she had at one time served as a CNA for 10 years in a nursing home. She chose to work at Golden Age.

"I had worked for their company in Perry. That's where I was for 10 years. And so when I got out of nursing school I didn't really plan on going to a nursing home, but I feel like home when I am here. That's kind of why I took this job."

Because she had worked as a CNA for so long, it took some time

getting used to that being an RN is a supervisory role among the nursing aides. So at first, she hesitated in asking the CNAs to perform a duty. She would do it herself, Wolfington said. Then she realized it is alright to help a CNA but let them do their job. That is how Wolfington learned by experience. And her experience as a CNA has helped her to be a better nurse today, she said. Being a CNA is a hard job, she said.

"I don't feel like they get as much respect," she said. "So I think me having been a CNA before has helped a lot."

She said it tripled her pay to graduate from nursing school. But nursing is a calling, she said. And no nurse should ever feel they are above getting a patient a drink or helping them to the restroom as a CNA does. Both her mother and sister work as a CNA.

All of the nursing staff has different traits that brings them together as a team with intelligence,

experience and a caring spirit, she said.

"It's just little things with all of them," she said.

Wolfington became a CNA when she was 16. She had always looked up to the nurses she worked with in Perry. Her charge nurses had always encouraged her to attend nursing school. They believed in her drive, her will and compassion. They told her a nursing career would fulfill her life with happiness by rising to her full potential of learning. And Wolfington was ready to make a new contribution to life.

Being a nurse placed her in a career that would enable her to care for her family.

"I think it is just in me to take care of people," Wolfington explained. "It's really sad but I only feel good about myself if I'm taking care of other people."

As a nurse Wolfington helps others, but she also helps herself. She thinks about the times her residents had been

crying and later told her that she made them feel so much better that day.

"It's pretty amazing. That even happened at OU. We had people that had been in prison and stuff and you've got to set that aside and take care of them. They were going back to prison, and they were like, 'You're the first person in a long time that's made me feel better about myself.'"

"It just makes you feel good. It really does."

As an MDS coordinator she is responsible for all of the Medicare and Medicaid assessments required by law. This monitoring approach lends itself to Golden Age by establishing care areas to develop, Wolfington said. She develops patients' care plans and updates them as needed.

"I do care plan meetings with the families every three months, which I do every week," she said. "It is a lot of work. I'll monitor their weights to see if they're losing weight. And then I'll

Continued on next page

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Being a nurse is more than a job full of duties for Danielle Wolfington, a registered nurse who spends her days at Golden Age Nursing Center, located in Guthrie.

contact the doctor to see if we need to get them some kind of supplements."

Her compassionate approach to nursing has spread to her children, she said. They think the elders are adorable when seeing them.

"I'm just that way, too. I think they're all just sweet as can be."

A nursing home may not be where a resident wants to live. So Wolfington believes that all nurses in a long-term setting should leave if they do not want to be there.

"Make it somewhere the residents want to be," she said. "I've always had a lot of respect for the elderly because

they have lived a hard life and nobody knows what they have endured."

They have worked 50 or 60 years, been in the military or may have been driving a car a week before they entered a nursing home.

"People think the nursing home is somewhere you come to die and I don't think it should be that way. I think it is where you should come to live."

Wolfington wants to enjoy life to its fullest. At home she cares for her four children, attends PTO meetings and supports her boys in football.

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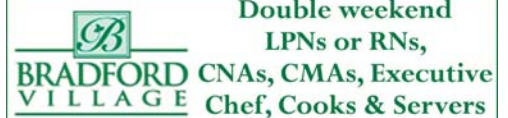
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Hospital Receives International Recognition as a Baby-Friendly Designated Birth Facility

St. Anthony Hospital was recently recognized with the prestigious international recognition as a designated Baby-Friendly Hospital, from Baby-Friendly USA, Inc.

Baby-Friendly USA, Inc. is the U.S. authority for the implementation of the Baby-Friendly Hospital Initiative, a global program sponsored by the World Health Organization (WHO) and the United Nations Children's Fund (UNICEF). The initiative encourages and recognizes hospitals and birthing centers that offer an optimal level of care for breastfeeding mothers and their babies. Based on the Ten Steps to Successful Breastfeeding, this prestigious international award recognizes birth facilities that offer breastfeeding mothers the information, confidence, and skills needed to successfully initiate and continue breastfeeding their babies.

"We want to be recognized as a facility that assists women in achieving their infant feeding goals, and recognizes their right to breastfeed if they choose. We are proud to support the efforts of the World Health Organization by achieving the Baby

Friendly Designation and joining other birthing facilities around the world," said Deborah McGowen, RN, Director of Joyful Beginnings at St. Anthony Hospital.

To be recognized as a designated Baby-Friendly Hospital, the facility must undergo a rigorous on-site survey. The results are then reviewed at UNICEF Headquarters to determine if the facility meets the global Baby-Friendly Hospital Initiative standards. Currently there are only 391 active Baby-Friendly Hospitals and birth centers in the United States.

"Our patients will have St. Anthony for support and as a resource, as they integrate their choice of infant feeding into their daily lives and workplace. In delivering this patient centered care, health outcomes for moms and babies will improve," said McGowen.



St. Anthony

New Providers Join Mercy in Kingfisher, Watonga

Bridget Keast, PA-C and Rachel Cameron, APRN-CNP, are now taking patients at Mercy Clinic Primary Care – Kingfisher. Keast and Cameron are familiar faces in the Kingfisher community – both previously worked at a local clinic. In addition to having more than 50 years of experience in the health care field, Keast worked previously in the emergency room at Kingfisher Regional Hospital (now Mercy) for more than a decade. She was named Citizen of the Year by the Kingfisher Chamber of Commerce in 2013. Cameron also has a long career in health care. Before coming to Mercy, she was a nurse at Kingfisher County Health Department and in Kingfisher Public Schools. She has also served as a family nurse practitioner and a nurse practitioner specializing in house calls.

Slimy, squirmy creatures: the unsung heroes of medical research



Oklahoma Medical Research Foundation scientist David Jones, Ph.D., uses zebrafish to help unlock the secrets of cancer.

While you'd expect to find them in your local pond, they're also some of the biggest contributors to modern medical research. And there's a reason these so-called "lower" organisms have been swimming, hopping and squirming their way into labs at the Oklahoma Medical Research Foundation: They're key players in the war against disease.

"Humans are incredibly complicated and it's difficult to do experiments with them, so we have to use animal models instead," said OMRF researcher David Jones, Ph.D.

Jones relies on zebrafish, which grow to a length of one to two inches and are named for the horizontal stripes that run along their bodies, to research colon cancer and other diseases. "If you really want to know how something works, you have to study the simplest models possible so you can study them in-depth," Jones said.

Jones is not alone in tapping these tiny creatures to learn about the human body. For decades, researchers have performed experiments with mice. But scientists are increasingly branching out to use other organisms—like fish, mice and frogs—to understand complex biological processes.

This trend has come about thanks to innovative technologies known as

"functional genomics," which enable scientists to study the biological functions of genes. "We can utilize powerful genetic tools and the animals' short life cycles to understand these processes more economically and more quickly than ever," said Jones.

The lessons scientists learn from other organisms can teach us a lot about ourselves, as we share a surprising amount of genetic material with some unlikely cousins. "All organisms are made up of cells, whether they're a person, a fish or fruit. In fact, our genomes are 40 percent identical to a banana," said Jones.

The zebrafish that Jones works with share 70 percent of humans' genetic code. Their utility in experiments is enhanced by the fact that they reproduce frequently, are fully developed in a matter of days, and are transparent, allowing scientists to easily observe their developing cells.

"In two years, I learned more from zebrafish than I had learned in 18 years studying human cell lines," said Jones.

In the lab next to Jones, his OMRF colleague David Forsthoefel, Ph.D., studies tissue regeneration in flatworms called planarians. "Because we have so many genes in common with planarians, we can essentially ask

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:
918-747-2273, Claremore: 918-342-1222, Sapulpa:
918-224-7403

**INTEGRIS Hospice, Inc. & the INTEGRIS
Hospice House:** Ruth Ann Frick, Vol.
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:
1-866-279-3975

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

Mission Hospice L.L.C.: 2525 NW Expressway,
Ste. 312 OKC, OK 73112 405-848-3779

Oklahoma Hospice Care: 405-418-2659
Jennifer Forrester, Community Relations Director

One Health Home Health in Tulsa:
918-412-7200

Palliative Hospice: Janet Lowder, Seminole, &
Sabrina Johnson, Durant, 800-648-1655

Physician's Choice Hospice: Tim Clausing,
Vol. Coordinator 405-936-9433

Professional Home Hospice: Sallisaw:
877-418-1815; Muskogee: 866-683-9400; Poteau:
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. /
Bereavement Coordinator, 918-745-0222

Sequoyah Memorial Hospice:
Vernon Stone, D. Min. Chaplin, Vol. Coordinator,
918-774-1171

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

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Continued from Page 8

how regeneration works and look for ways to use this data in humans."

Forsthoefel is hoping that clues he learns from the tiny worms, which have the ability to regenerate themselves and their organs completely, might lead to new help in treating conditions ranging from bowel disorders to paralysis. "It might be possible to improve our own regenerative abilities just by promoting or inhibiting the action of one or two genes," said Forsthoefel.

Susannah Rankin, Ph.D., another

OMRF researcher, uses frog eggs to study cell division. Her observations in amphibians could provide important information on how to prevent the development of tumors in humans.

"Now we can use these organisms to study thousands of genes and do it fast and at low cost," said Jones.

While scientists typically receive plaudits when they make a new discovery, Jones thinks that fish, worms and frogs also deserve some of the credit. "We've already learned things we never would have by looking at humans or mice," he said, "and these organisms have made it possible."

INTEGRIS First in United States to Implant the HeartMate 3 LVAS

St. Jude Medical Inc., a global medical device company, recently announced results of the MOMENTUM 3 U.S. IDE Clinical Study, comparing the HeartMate 3 LVAS (Left Ventricular Assist System) to the HeartMate II LVAS in treating advanced stage heart failure.

The Advanced Cardiac Care program at INTEGRIS Baptist Medical Center is a proud participant in the study. In fact, INTEGRIS was the very first facility in the United States to implant this new technology in 2015. Currently, INTEGRIS remains a leading implanter of the HeartMate 3 LVAS in the country.

The HeartMate 3 LVAS is a small, implantable mechanical circulatory support device for advanced heart failure patients who are awaiting transplantation or are not candidates for heart transplantation. The HeartMate 3 LVAS restores blood flow with full MagLev technology, which allows the device's rotor to be "suspended" by magnetic forces. This design aims to reduce trauma to blood passing through the pump, thereby minimizing complications and improving outcomes for patients.

"The early results of the MOMENTUM 3 are encouraging. This trial is the single most important study in the world of heart pumps at this time," said James Long, M.D., Ph.D., cardiovascular surgeon and director of the INTEGRIS Advanced Cardiac Care program. "It has been the fastest enrolling trial in this field, indicating the importance of this therapy and the ever-increasing need for new generation heart pumps to treat people with end-stage heart failure when there are no other options."



The MOMENTUM 3 U.S. IDE Clinical Study is the largest LVAD trial in the world following more than 1,000 patients for a period of up to two years. The data just released to the public shows the six-month results of the first 294 patients enrolled. The patients receiving the HeartMate 3 LVAS had an 86.2 percent survival rate with freedom from disabling stroke and reoperation to repair or replace the device.

"The Heartmate 3 LVAS represents the continued advancement in therapy options available for patients living with debilitating heart failure," said Doug Horstmannshof, M.D., heart failure cardiologist and co-director of the INTEGRIS Advanced Cardiac Care program. "INTEGRIS, working with a network of partners, is the only center in our state and surrounding regions with the ability to offer this exciting new option on an ongoing investigational basis."

INTEGRIS holds a leadership role in the MOMENTUM trial, with such centers as Columbia Presbyterian Hospital, the Duke Heart Center, the University of Michigan and Barnes Jewish Hospital. Drs. Long and Horstmannshof joined in the authorship of a current article on the study in The New England Journal of Medicine.

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



**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. Last weeks question: My husband and I have been married for 8 years and have discussed marriage counseling but I think we have so many resentments that divorce may be the only answer. Marriage is really hard; I think we are both really tired. How is it possible to have a healthy, happy marriage?

--Jodie

A. We discussed four principles created by Drs. John and Julie Gottman, clinical psychologists who created The Seven Principles That Prevent a Marriage From Breaking Up. This column will discuss the last 3 principles.

5. SOLVE YOUR SOLVABLE PROBLEMS

Complain but don't criticize. Make statement that start with "I" instead of "you." Describe what is happening, don't evaluate or judge. Ask for a break if you need to process what is being said; this provides time to soothe and distract yourself. Compromise - is it possible to agree to disagree?

6. OVERCOME GRIDLOCK

Many perpetual conflicts that are gridlocked have an existential base of unexpressed dreams behind each person's stubborn position. The bottom line in getting past gridlock is not necessarily to become a part of each other's dreams but to honor these dreams.

7. CREATE SHARED MEANING

The culture of shared meaning incorporates both of the individual dreams, and it is flexible enough to change as husband and wife grow and develop. When a marriage has this shared sense of meaning, conflict is less intense and perpetual problems are unlikely to lead to gridlock.

Another component of assessing marriage stability is to consider the Four Horsemen of the Apocalypse; the best predictors of divorce according to the Gottmans.

1. **CRITICISM** --- "What kind of person are you?" "Why do you always leave the toilet seat up?"

2. **DEFENSIVENESS** --- "Yeah? Well what about what you did?" "But that's not as bad as what you did."

3. **CONTEMPT** --- "I would never be so low to do something like that!" "You are never going to get it, what is wrong with you?"

4. **STONEWALLING** --- "Don't say anything.....how long can she go on?" "Just smile and nod your head.....maybe her phone will ring."

This will give you something to think about. Are you riding any of the above horses?

St. Anthony Achieves National Accreditation from M&B Surgery Accreditation and Q. I. Program

*St. Anthony Surgical Weight Loss meets all criteria as a
Low Acuity Center, according to national quality standards
established to deliver safe, high quality bariatric patient care*

Patients seeking surgical treatment for severe obesity and its related conditions have a high-quality choice for receiving treatment at a nationally accredited program that meets the highest standards for patient safety and quality of care in the greater Oklahoma City area.

St. Anthony Surgical Weight Loss has recently been accredited as a Low Acuity Center under the Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program (MBSAQIP®), a joint program of the American College of Surgeons (ACS) and the American Society for Metabolic and Bariatric Surgery (ASMBS).

The MBSAQIP Standards, outlined in the Resources for Optimal Care of the Metabolic and Bariatric Surgery Patient 2014, ensure that bariatric surgical patients receive a multidisciplinary program, not just a surgical procedure, which improves patient outcomes and long-term success. The accredited center offers preoperative and postoperative care designed specifically for their severely obese patients.

St. Anthony Surgical Weight Loss is committed to quality care, which begins with appropriately trained staff and leadership surgeons who participate in meetings throughout the year to review its outcomes. They seek continuous improvement to enhance the structure, process and outcomes of the center. "This accreditation will allow us to provide a much needed service to more people in Oklahoma and nearby states," said Timothy Eldridge, M.D., St. Anthony Surgical Weight Loss surgeon.

To earn the MBSAQIP designation, St. Anthony Surgical Weight Loss met essential criteria for staffing, training and facility infrastructure and protocols for care, ensuring its ability to support patients with severe

obesity. The center also participates in a national data registry that yields semiannual reports on the quality of its processes and outcomes, identifying opportunities for continuous quality improvement. The standards are specified in the MBSAQIP Resources for Optimal Care of the Metabolic and Bariatric Surgery Patient 2014, published by the ACS and ASMBS.

"St. Anthony Surgical Weight Loss is committed to serving patients the highest level of care. This national accreditation is the result of the safe and exceptional care that's delivered by our physicians and staff every day," said Tammy Powell, president of St. Anthony Hospital.

After submitting an application, centers seeking MBSAQIP Accreditation undergo an extensive site visit by an experienced bariatric surgeon, who reviews the center's structure, process, and clinical outcomes data. Centers are awarded a specific designation depending on how many patients it serves annually, the type of procedures it provides, and whether it provides care for patients under the age of 18.

In the United States, around 15.5 million people suffer from severe obesity, according to the National Institutes of Health, and the numbers continue to increase. Obesity increases the risks of morbidity and mortality because of the diseases and conditions that are commonly associated with it, such as type II diabetes, hypertension, and cardiovascular disease, among other health risks. Metabolic and bariatric surgical procedures have proven to be effective in the reduction of comorbid conditions related to severe obesity. Working with ASMBS, the ACS expanded this quality program for bariatric surgery centers so that it can assist bariatric patients in identifying those centers that provide optimal surgical care.



NURSE + TALK

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

What do you hope to find under the Christmas Tree? Oklahoma Heart Hospital South

How about a Boxer puppy?



Andrea Rushing, RN

I just want to see my daughter happy opening her gifts. It's her first Christmas.



Victoria Sellers,
RN-CCRN

Each week we visit with health care professionals throughout the Metro



Please Let us know Your Thoughts

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Mustang, Ok. 73064

I still really have no idea what I want.



Britt Dyer, RN

My first grandbaby is coming so a healthy daughter, her husband, my grandbaby and my son.



Mike Rushing, RN

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