

Oklahoma's NURSING TIMES

October 24, 2016

Information for the Oklahoma Nursing & Health Care Professional

Vol. 17 Issue 43

Published Weekly. Locally Owned and Operated by Metro Publishing L.L.C.

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OU Pediatric hospitalist program helping NRH grow



photo by Bobby Anderson

A new pediatric hospitalist partnership between Norman Regional Health System and OU Children's Hospital is providing expanded care for some of the metro's youngest patients. Left to right, Sarah Camardo, RN, charge nurse, Nurse Manager Mari Newcomer, RN and Director of Patient Care Services Susie Graves, RN.

by Bobby Anderson,
Staff Writer

With growing labor and delivery volumes at Norman Regional Health System, the hospital's pediatricians decided they needed some help.

That's why earlier this year they formed a unique partnership that has helped

patients, the pediatricians, nurses and virtually everyone involved in the continuum of pediatric care.

Pediatric hospitalists are pediatricians who work in hospitals providing care for children ages 0-18. Norman Regional has partnered with OU Children's Physicians to

add these specialized physicians to the health system.

These physicians excel in the care of children who are hospitalized and provide immediate and ongoing care 24 hours a day, seven days a week. The pediatric hospitalists will work with the children's regular pediatrician or primary care doctor and update them on a child's condition while in the hospital. Pediatric hospitalists will also see children who do not have a regular pediatrician or family doctor.

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Student nurses to convene

story and photo by Bobby Anderson, Staff Writer

The Oklahoma Nursing Student Association will gather Oct. 28 at the Marriott Conference Center and Hotel at the National Center for Employee Development in Norman.

Tara Goodman, ONSA president, says the convention will provide a number of educational, scholarship and career opportunities.

Some 30 vendors including several nursing schools as well as hospitals around the state have signed on to meet with attendees.

"You're going to have an opportunity sit in on OB nurses, ICU and Peds and ER - there's a ton of different speakers so you can talk to them and find if you're pursuing the right profession you're interested in it or learn about new professions that you haven't even thought about," Goodman said.

Students can sign up through the morning of the convention. If your school has 25 students or more then the cost is \$65.

ONSA members pay \$70 and non-members pay \$80 for convention admission.

Goodman has served as vice president and now president of the ONSA, a role she will relinquish at the convention.

In December she'll no longer be a student either, graduating from the University of Central Oklahoma.

"I have absolutely loved it," Goodman said of her time at UCO. "It's such a good school. I love it there."

See STUDENTS Page 2

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See OU Page 3



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f Oklahoma Nursing Student Association

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ONSA

Oklahoma Nursing Student Association

STUDENTS

Continued from Page 1

While she was a first semester nursing student Goodman took advantage of the UCO chapter of ONSA's offer to pay for 20 student registrations to the convention.

She jumped at the chance.

"I had only been in nursing school a couple months at this point and I was really overwhelmed when I went there but I met a couple people who would be graduating," said Goodman, who was encouraged to run for the office of vice president, which plans the entire convention.

During her time in the ONSA Goodman has had the opportunity to go to national conventions in Phoenix, Orlando and Atlanta.

"I've networked with student nurses around the country and now I have this really cool group of friends from all over the place," she said.

When she graduates Goodman will head to Kansas City and work at Children's Mercy Hospital - a job she credits her role in ONSA as helping to land.

"I really feel like it did," she said. "There's a ton of bachelor's prepared nurses right now and for me to be able to pretty much get to pick my job is a lot of knowing people. I feel like a lot of it was knowing someone. When someone recommends you they trust you more than someone they haven't heard of at all."

Hurst and Kaplan reviews will be two of the vendors at this year's convention which includes out-of-state schools such as Middle Tennessee School of Anesthesia, Vanderbilt University and the University of Colorado School of Nursing.

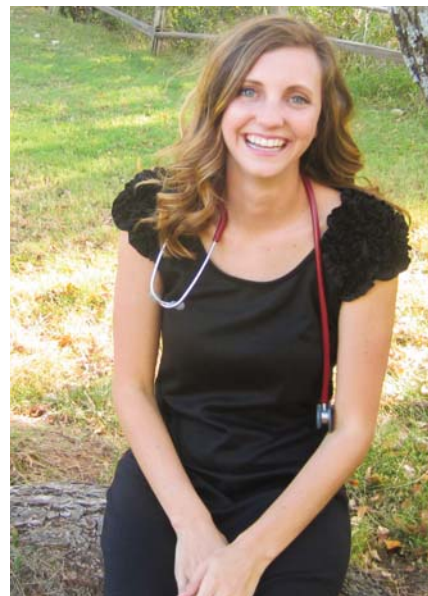
"We've really been working on trying to provide students with the biggest opportunity to reach out to everyone," Goodman said.

Some of the highlights of this year's convention include

• Bringing Battlefield Medicine to Our Streets- Bill Justice • Forensics in Nursing- Heather Ketchum • Frisbie Shades of Gray- Stacie Frisbie • Travel Nursing- Laura Speicher • Kaplan's Mini-NCLEX Review • Low Down on the Lub Dub of Dysrhythmias- Tonya Ballone-Walton • Medical ICU: Where things get INTENSE & Hero's Journey-

April Trenary • Everything You Ever Wanted to Know About Clinical Nurse Specialist- Melissa Craft • The PhD in Nursing: It's About Change- Barbara Holtzclaw • Nurse Entrepreneurs- Carol Robinson

• The Impact Equation: What It Takes to Truly Make a Difference- Kevin Morford • Shock Management: HURST Review's Step by Step Approach to NCLEX Success • Neurotrauma Critical



Tara Goodman, student nurse, is the president of the Oklahoma Nursing Student Association, which is holding its annual convention October 28 in Norman.

Care: Time is Brain- Crystal Yancy • Dancing With the Stars: Starting Your Professional Life Off on the Right Foot- Dean Prentice • Flight Nursing: Patient Care at 1,000 Feet- Adrian Theerham • Signs and Symptoms of Good (and bad) Communication- Kevin Morford • SCORE! From the Resume to Interview: Strategies to Help You Win- Brenda Nance

To become a member of ONSA, you must first join the National Student Nurses Association (NSNA). NSNA is the national pre-professional organization for nursing students. NSNA defines its membership as nursing students in Associate Degree, Diploma, Baccalaureate, generic Masters and generic Doctoral programs preparing students for Registered Nurse licensure, as well as RNs in BSN completion programs.

For more information about convention or the ONSA you can go online to www.oknsa.net. Information is also available on the Oklahoma Nursing Student Association Facebook page.

OU

Continued from Page 1

pediatric hospitalist will provide the appropriate physician an overview of the child's hospital stay and work together on a plan for any future care.

This partnership allows Norman Regional to treat even more complex childhood illnesses and injuries.

Pediatric hospitalists also see children hospitalized for a variety of issues including chronic illnesses, flu, infectious illnesses, respiratory illness, and recovery from injuries or surgeries.

The program, which began in discussion in July 2014, seemed like a natural fit since hospitalists are now the norm for adult patients nationwide.

"It's really nice because the hospitalists are able to come in four or five times during a shift," charge nurse Sarah Camardo, RN. "Which as accessible as our pediatricians were and they were wonderful, but because they were seeing patients in their office they were unable to come over and be here physically unless it was before or after office hours."

"The hospitalists can come and stay at the bedside for 30 or 45 minutes

to make sure the parents understand everything and answer questions."

The move works on multiple fronts. For starters, pediatric patients who admit from the emergency room are able to see a hospitalist immediately. Parents are happy to have actual time to sit down with a physician when they have some of their most important questions.

"And (Norman's pediatricians) don't have to balance that office practice with spending time at the hospital," said Director of Patient Care Services Susie Graves, R.N.

The hospitalists quickly initiated a call center so outlying offices, clinics and hospitals can call and connect with a hospitalist.

"It has incrementally grown our population allowing us to care for the children in our community instead of bypassing," Nurse Manager Mari Newcomer, RN, said. "Having OU (Children's Hospital) as our referral hospital it's nice because we are now implementing standardized orders with OU that are moving out to EMSTAT so their ability to triage in the field where this child needs to go is also an improvement in care. It's also an improvement in continuity of care if everybody is doing the same thing for our children."

"It's just been a huge asset. It's that ability to at a moment's notice get hold of them."

For Camardo and her nurses the partnership has been a blessing.

"It helps put us at the bedside more just because you're not making a phone call and sitting at the desk waiting for return calls," Camardo said. "We're able to get our question answered quickly and return to a parent and give a response quickly."

With larger patient volumes across the metro this year forcing Children's Hospital to often move to divert status, the relationship has also brought more patients south to Norman.

"We've seen an increase in the level of care they've allowed us to care for," said Newcomer. "It's been tremendously busy and when OU is on divert they triage to see what children we can take here. Now they've identified Norman as a hospital of choice for general pediatric admission."

"We have children from Lawton and up near Tulsa. I think our exposure as a hospital has grown, too."

With the partnership, Newcomer and Camardo have taken on the problem of pediatric asthma. Together, with the hospitalists a standardized pediatric asthma score was developed.

Driven by respiratory therapists, an order set has been developed for pediatric patients presenting at the ER to be immediately seen by RT.

That therapist is able to score the child and get care started immediately.

"It's like a rapid asthma response," Newcomer said.

With the help of the OU hospitalists, the scoring has been rolled out to EMSTAT as well as the pediatrician offices throughout the community.

"It's one of the gifts they've brought," Newcomer said

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CAREERS IN NURSING

MANY MOONS OF WORK - WARR ACRES DON CELEBRATES HISTORY

by James Coburn - Writer/Photographer

Terry Reynolds, RN, and Director of Nursing at Warr Acres Nursing Center became familiar with long-term care as a 9-year-old.

"I started mowing the yard at the nursing home my mother had," he said of his childhood in Purcell. "We had a place called Broadlawn Manor many, many moons ago."

His dad purchased the nursing home for his mother because his grandmother had dementia. At the time, dementia was known as organic brain syndrome, Reynolds said.

"Mother had her in one nursing home in which she was very unhappy," he said.

His mother complained every day to Reynold's father about her mother's nursing home care. One day she complained and his father told his mom, "Well, I went and bought you a nursing home, and you run it like you want it. Bring your mom up there and take care of her."

Reynolds said his mother was a proud woman. She went to the nursing home and fired everyone, he said. The year was 1976.

"You can't do that. There was nobody to cook, clean or take care of the people," Reynolds continued. "So myself, my sister, my cousins; we were all up there washing clothes and cooking food."

His sister was also a nurse and did the laundry. He said even the men's underwear came out starched and stood up. By this time, Reynolds' mom had also become a nurse.

Since those days Reynolds has seen changes in nursing home care regulations. When he first got into management for long-term care, Reynolds would spend two hours a day at most on paper work. The rest of his six hours was dedicated to care. Nowadays nursing home nurses have less time to spend with their patients, he said, due to regulations.

A lot of people blame the changes

on the Clinton administration, but Reynolds said it was President Richard Nixon's brainchild.

"The redundancy just causes so much time to be taken away from the patient," Reynolds said. "I hope at some point it will improve."

Some of the better aspects of today's world of long-term care is nutrition and skin care, he said.

"Those have improved," Reynolds explained. "But I don't give the kudos out to the paperwork system. I give the kudos out to the nurses. They have bound together and said, 'Hey, let's straighten this up.' So with nurses running things to make sure the quality of care is there, the height of our expectations, education and the abilities to render more appropriate care has been because of nurses."

He first graduated from nursing school as an LPN in 1980 at the Mid America Technology Center in Wayne. In 2000 he became a nursing home administrator before becoming

a registered nurse by attending Platt College in Oklahoma City beginning in 2004.

Nurses at Warr Acres Nursing Center have a lot of longevity, he said. Reynolds admire their ability to cope with change.

"We are called the graying nurses, meaning we're getting older," he said of the industry.

He recalled the days when skin wounds were treated with heat lamps. Now that method has been proven obsolete and not an appropriate intervention, Reynolds said.

Metal flip charts were used in the old days of nursing with colors to coordinate shifts. Now everything is inputted into computers, he continued.

"By the same token we have to be honest enough to say, 'Come help me. This computer does this and I don't understand why,'" he said. "So changing not only

Continued on next page


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Terry Reynolds, RN, and Director of Nursing at Warr Acres Nursing Center cherishes his career as a nurse. Love keeps him going, he says.

with the ever-changing health care system informatics alone can be overwhelming, but they take that with their stride."

Quality of care is expected, he said. He said love has kept him in his career.

"As I get older there are things in my career that I've done that new nurses will never get to do," he said. "I've taken care of World War I vets. I've taken care of Ziegfeld Follies Girls. I've taken care of Jason Robards family members, the famous movie star.

"I've taken care of body guards

for Elvis Presley. I've taken care of dignitaries, Miss Americas, and not only took care of them but touched history."

Jackie Kennedy's best friend was one of his clients. She allowed his nephew to take pictures for a school report. When history is gone, it's gone, he said.

"We who take care of people in long-term care understand that explicitly," Reynolds said. "And it's hard for everybody to understand that we're dealing with people that have so much to teach us."

A colorful advertisement for Johnnies Sweet Creations. It features a green background with a white border. The text includes: "Johnnies Sweet CREATIONS", "www.facebook.com/JohnniesSweetCreations", "Call today for info and to place your order!", "8419 S. Western Ave, OKC, OK 73139", "(405) 616-3255", "johnniesbakery@gmail.com", and "www.johnniesbakery.com". It also lists services: "-Birthday Cakes", "-Cookies", and "-Gift Baskets", and mentions "and more made to order!". There are images of various cakes and cookies.



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OMRF accepting 2017 Fleming Scholar applications



Oklahoma Medical Research Foundation's 2016 Fleming Scholars: Front row (left to right): Annelise Poss, Nicole Biddinger and Michael Harmon. Middle row (left to right): Caroline Say, Lindsey Purcell, Emily Wilkie, Joey Maher and Ariel Thorson. Back row (left to right): Evan McKinnis, Zane Dennis, Andrew Blattler, Dat Truong and Uday Kohli.

Do you know a high school senior or college student who would rather wear goggles in a lab than in a pool? Then a summer of science may be right up their alley.

The Oklahoma Medical Research Foundation is accepting applications for its 2017 Sir Alexander Fleming Scholar Program. The application deadline is Feb. 1. The annual summer program allows the top science students in the state to enhance their research skills by gaining hands-on experience in a lab setting alongside world-class scientists for eight weeks.

High school seniors, as well as college freshmen, sophomores and juniors, are eligible to apply. Students must be 16 or older to qualify. Students must be Oklahoma residents at the time of high school graduation to be eligible. Once selected, Fleming Scholars are paid and may be eligible for housing.

The application process is completed online at www.omrf.org/fleming and includes submission of a long-form essay, letters of recommendation and academic transcripts.

"This program is rare in the type of opportunity it presents students at this stage in their education," said OMRF Human Resources Specialist Heather Hebert, who coordinates the summer program. "This is a chance to experience research in way a classroom can't emulate. It's a unique experience that has served as a launching pad for many successful careers in biomedical research and healthcare."

The program is named for Nobel Prize-winning scientist Sir Alexander Fleming, who discovered penicillin and also dedicated OMRF's first building in 1949.

Since the inception of the program in 1956, more than 500 Oklahoma students have had the opportunity to work in state-of-the-art labs 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.

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

Scientist receives \$2.3 million grant to study how wounds heal

An Oklahoma Medical Research Foundation scientist has received a five-year, \$2.3 million grant to investigate the basic mechanics of wound healing.

The grant, which was awarded by the National Institute of Arthritis and Musculoskeletal and Skin Diseases, will allow OMRF researcher Lorin Olson, Ph.D., to study why people form scar tissue after sustaining an injury instead of regenerating damaged tissue like certain animals including salamanders, lizards and others, do.

Olson said scar tissue forms quickly to seal wounds, but it is not ideal and can lead to long-term problems through contraction or expansion of the scar. Excessive scar tissue, called fibrosis, occurs when repair processes are overactive.

Scar tissue in the skin is comprised primarily of collagen — an important structural protein found in skin, tendons, bones, cartilage and more. Olson said while collagen is an important part of the equation, normal, healthy skin has a lot more to it than just collagen, including hair follicles and fat cells called adipocytes.

"Skin doesn't regenerate and you could say that about most adult organs," said Olson. "We're not one of those lucky species that can grow back an eye or an arm. Instead, our bodies try to patch things up as quickly as possible so we can keep chugging on."

As it turns out, that rapid-fire healing may be partly to blame for why we don't regenerate organs, limbs or skin.

"A lot of people who study wound healing have asked the question, 'how quickly can we make this heal?'" said Olson. "If you look at animals that regenerate and compare them to animals that don't, the ones that regenerate actually heal much slower, but at the end they have successfully replaced and regenerated the tissue that was damaged or lost."

Olson said his lab has a strong grasp of how wound healing occurs and is regulated stemming from their



Oklahoma Medical Research Foundation scientist Lorin Olson, Ph.D.

study of a molecule called platelet-derived growth factor (PDGF), which stimulates the cells that form scar tissue. While PDGF aids in wound repair, too much promotes scar tissue. Therefore, our bodies must maintain a proper balance to achieve optimal tissue repair.

Olson came to OMRF from the Mt. Sinai School of Medicine in New York, New York, in 2010. He received his Ph.D. from the University of California, San Diego, and now is an assistant member in OMRF's Cardiovascular Biology Research Program. His research focuses on fibrosis, the creation of scar tissue in disease, which is a cause of organ failure in the heart, kidneys and liver.

This research, said Olson, could open a number of doors in the understanding of regeneration at a molecular level. "We are not looking for drugs or therapies right now, but if we understand these mechanics better and learn how to slow the healing process for better results, therapies could be a very real possibility," he said.

Olson's grant, 1R01 AR070235-01, is funded through the NIAMS, a part of the National Institutes of Health.

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. I am 28, divorced twice, a child from each marriage and I am dating again. I had a serious relationship after my second divorce that ended badly but that did not slow me down. I can't be without love from a man. I know this is bad but I can't stop. What can I do?

Haley

A. YOUR LIGHTS ARE ON, BUT YOU'RE NOT HOME
YOUR MIND IS NOT YOUR OWN
YOUR HEART SWEATS, YOUR BODY SHAKES
ANOTHER KISS IS WHAT IT TAKES.

"The men I married, as it turns out, were not good for me. Their love was a mixed bag of intense highs followed by terrible lows. I usually ended up feeling worse but when I felt loved - it was exhilarating. The list of reasons why I should leave was always longer than why I should stay. I stayed because I Loved him and he Loved me. He didn't mean to lie, have sex with other women and push me occasionally. He was tired and didn't mean it."

YOU CAN'T SLEEP, YOU CAN'T EAT
THERE'S NO DOUBT, YOU'RE IN DEEP
YOUR THROAT IS TIGHT, YOU CAN'T BREATHE
ANOTHER KISS IS ALL YOU NEED.

"My serious relationship after my second divorce had some big red flags and I prided myself on getting out before I invested too much of myself. My friends were relieved. BUT it didn't last - I went back; to those times of feeling loved and cared about, offset by his control and possessiveness. When I felt loved by him - it was perfect, I was perfect.

YOU LIKE TO THINK THAT YOU'RE IMMUNE
TO THE STUFF
IT'S CLOSER TO THE TRUTH TO SAY YOU CAN'T
GET ENOUGH
YOU KNOW YOU'RE GONNA HAVE TO FACE IT
YOU'RE ADDICTED TO LOVE

So Haley here are some good treatment suggestions:

1. RUN, don't walk to the nearest 12 step Codependents Anonymous (CODA) meeting.
2. Find a therapist and begin some intense individual therapy.
3. Play the "consequence movie" --- what will happen if I engage in this behavior.

"Addicted To Love" by Robert Palmer

Cancer Survivor Shares Journey of Breast Reconstruction

LifeShare Celebrates BRA Day

After surviving breast cancer and a mastectomy, one Oklahoma woman opted for a breast reconstruction in an effort to gain her life back. October 19 was national Breast Reconstruction Awareness Day (BRA Day) and LifeShare celebrated the gifts given by tissue donors and those who have received life enhancing gifts.

Carriann Bradway, of Oklahoma City, was carrying her first child while she watched her mother fight breast cancer at 42 years old. As Carriann neared the same age, she became more cautious of potential cancer and mentioned the family history to her physician. She was leery of his suggested mammogram, as her insurance had not paid for one in the past. Still unsure, Carriann decided she could not afford to ignore the suggestion and scheduled the screening.

After her mammogram, the physician called her in for an ultrasound and a few weeks later for a biopsy. On December 2, one day after the biopsy, the doctor called her during her shift at work and told her news she never thought she would hear -- she had cancer. Her thoughts began to blur and she tried to stay busy at work after hearing news that would change her life.

She went home that day and shared the news with her husband, Marc. The couple was distraught with the unknown of what would happen. Together, they decided to tell their children. A week after sharing the news, their oldest son was suspended from High School, and a few days later her youngest was suspended from grade school. The diagnosis of breast cancer began to take a negative toll on not only Carriann but also her entire family.

Just a week after being diagnosed with breast cancer, she was working in the Intensive Care Unit and heard a young boy, who was around her sons age, crying and grieving over the loss of his mother. Reality began to set in for Carriann and she knew her only option was to fight the cancer.

She gladly learned her tumor was only in the first stage and she would not have chemo or radiation, but she



Carriann Bradway

would have a bilateral mastectomy.

On December 28, Carriann was wheeled back into surgery feeling nervous for the procedure she was about to endure. The nurse and entire staff comforted her and calmed her down. As a nurse herself, this stuck out vividly to her as she began to understand the process of helping others through their own time of grief.

She learned to rely on her husband and children to help her as she recovered. She could not raise her hands to wash or fix her hair, so together they would all take turns helping out when she needed it.

Within a month, she was back at work and found the tolls of being an Intensive Care nurse physically, emotionally and mentally demanding after surviving breast cancer. Remembering those who comforted her during a scary time in her life, she decided to move positions within the hospital to work in the Operating Room and comfort those who are about to undergo surgeries and procedures.

Once Carriann had recovered from the surgery, she began thinking about reconstruction options. "I was only 41, and wanted to feel good about myself and feel like myself again," she said.

See BRA next page



NURSE + TALK

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

How do you like to have fun during your days off? HCR ManorCare Midwest City

"I have a 4-year-old so I'm running around chasing him. We go to the zoo."



Michelle Lambertus, RN

"I have my grandchildren and we ride our horses on our property."



Sheryl Enright, CNA

Each week we visit with health care professionals throughout the Metro



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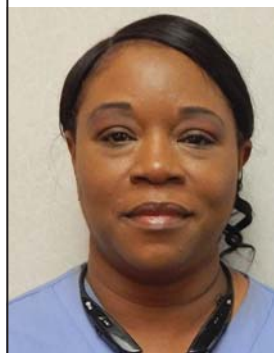
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"I spend time with my children. We go to the park and watch movies. I write poetry."



Jennifer Cunningham, LPN

"Ride a Harley and traveling. That's what I do."



Rose Brown, CNA

BRA

Continued from Page 10

In May 2016, she started the process of reconstruction. Carrieann first received Alloderm, which is derived from recovered donor skin. Alloderm essentially acts as a scaffold over time, and the patient's cells grow into it. She then received spacers which are filled week by week with saline to prepare the body for implants.

"There's several benefits of reconstruction. For me, it was feeling like myself again," Carrieann said. "Opting to reconstruct after a mastectomy helps many with self-esteem from the way your clothes fit to your overall balance."

Now that Carrieann feels like herself again, she desires to help others who have been diagnosed with breast cancer or those considering

reconstruction.

"I don't want this to be about me," Carrieann shared. "I want to help others get their life back who are considering reconstruction after a mastectomy."

LifeShare is participating in its third annual Breast Reconstruction Awareness Day (BRA Day) on October 19. This is an initiative designed to promote education, awareness and access regarding post-mastectomy breast reconstruction.

"In the donation process, we are able to recover skin and tissue which can aid plastic surgeons in breast reconstruction," said Jeffrey Orlowski, President and Chief Executive Office of LifeShare. "LifeShare is excited to celebrate BRA Day to show the community yet another example of donation saving and enhancing lives."

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