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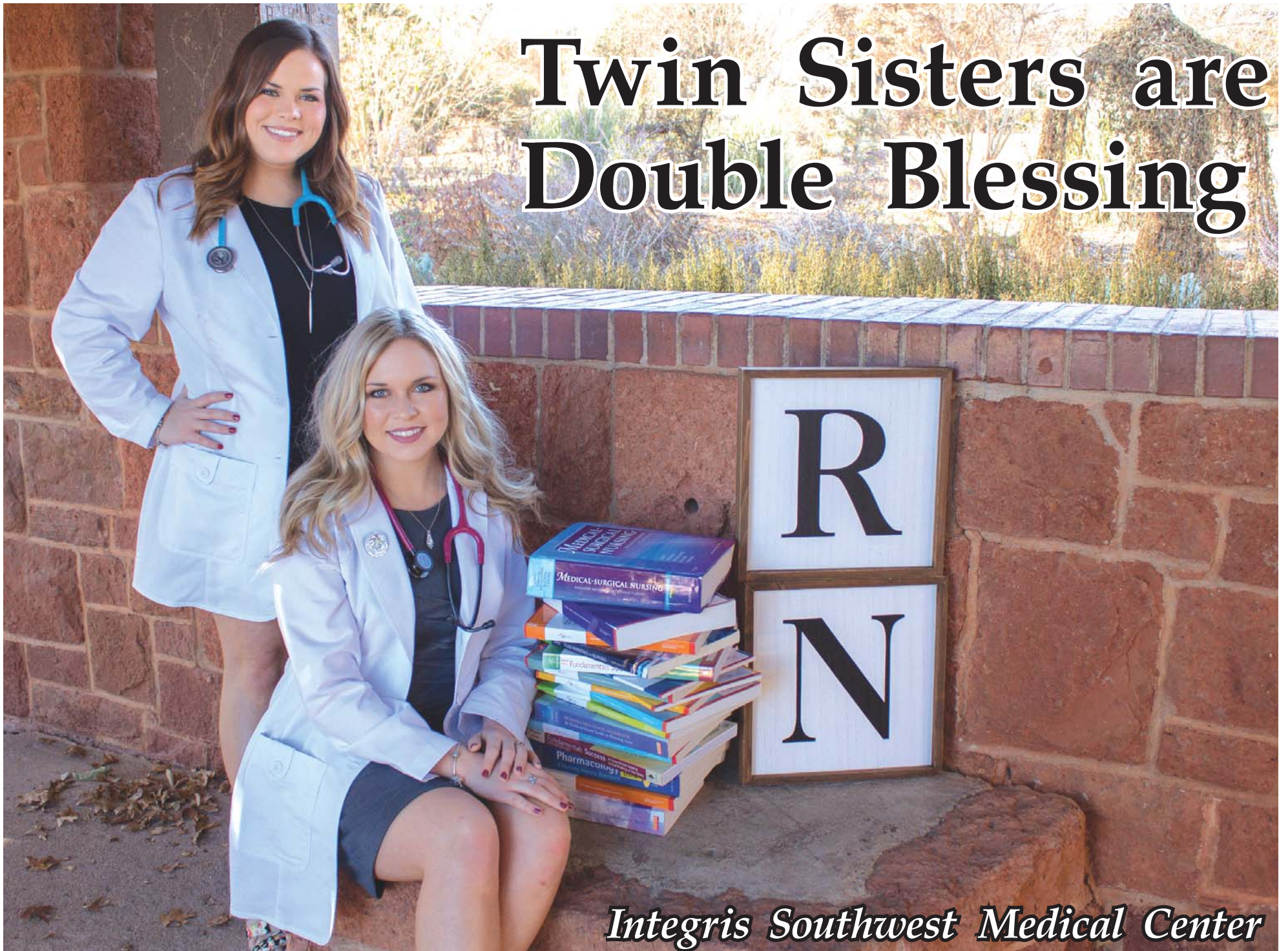
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Twin Sisters are Double Blessing



Integrus Southwest Medical Center

You will find twin sisters, Lauren (sitting) and Lacie (standing) Brown, both RN's, working in ICU at Integrus Southwest Medical Center. Along with others, they continue to work on the frontline during the pandemic.

by Vickie Jenkins, Staff Writer

If you grew up in Oklahoma City, OK, you are probably aware that on the south side of town you will find, INTEGRIS Southwest Medical Center. It has changed a lot over the last fifty years, yet, never losing sight of their mission: to serve South Oklahoma City for the good of the community.-Integrus Southwest

Medical Center-

Healthcare professionals continue to put their lives on the line every day in the COVID-19 pandemic. Here at Integrus Southwest, working in ICU, you will find two very special nurses; Lauren and Lacie Brown. At first, you might think you are seeing double until you take another look and realize they are twins.

Lauren and Lacie have had a close friendship their entire life. "From the time we were little, we have done everything together. Same likes, dislikes, sports, and we even had the same friends growing up and we still do. We do everything together and we enjoy being twins," Lauren said with a smile.

See TWINS Page 2

TWINS

Continued from Page 1

Growing up in Oklahoma, they graduated from Westmoore High School in 2017 with college credits. Now, at twenty-one years old, they are still sticking close to each other. "We continued college at Oklahoma City Community College, where we got our associates in nursing. We're now working towards getting our BSN," Lauren commented. "We graduated nursing school in December 2019 and started working here."

Lauren and Lacie grew up with family members in the medical field. "Our mom is a home health nurse, along with our older brother. When we were little, we both knew we wanted to be nurses because we had a great mom to look up to. Lacie and I were encouraged by our mom and our brother while we were going to nursing school. They kept us going."

"Nursing is a job that requires a lot of compassion, patience and hard work. Working in the ICU

has shown us how important the work is and how important it is to never let our guard down when caring for another person's life. I think we can both agree that the biggest reward that we receive is when a patient gets well enough to leave the unit and eventually go home. There are some tough times too though," said Lauren. That is when the patient can't fight anymore and the family has to say their goodbyes. That is pretty hard to handle."

When asked what advice Lauren and Lacie would give to someone going into the medical field, Lacie said, "Being a nurse can be such a fearful thought in knowing that we are responsible for a person's health. Many of the nurses that we work with have given us the advice that a healthy amount of fear is good to have when caring for patients. I think it makes us more aware of what we are doing each time we take care of patients."

"It was very helpful for Lacie and me to have family members in the medical field. We could

relate to what each of us were going through; encouraging each other along the way and staying strong for each other."

"When we graduated, it was actually before COVID-19 started. We were just starting our nursing career and it has changed in so many ways. Right after graduating, we went into quarantine and then, straight into the national pandemic. It added extra obstacles for us to overcome in being prepared to be a nurse," Lauren said. "Like everyone else, the pandemic took us by surprise. Neither one of us knew what to expect. We were blessed with an amazing director who guides us and makes sure we have the correct PPE to wear when taking care of the patients. We work with wonderful nurses and that is very encouraging to both of

us," Lacie added.

"At the very beginning of the pandemic, the family members were not allowed to see their loved ones, so we made arrangements for them to Facetime. Tears would run down the patient's cheeks when their family member would speak, and the patient's hand would grip mine a little harder, hanging on to their every word. They were allowing family members to visit the end-of-life patients, but that was limited. This pandemic has been rough on everyone," Lacie said.

Lauren and Lacie Brown were recently featured on KFOR, as two of the frontline workers.

They are indeed a double blessing as they continue to work in the ICU at Integris Southwest Medical Center.

ANA Membership adopts resolution on racial justice

Racial Justice for Communities of Color – June 2020

The American Nurses Association (ANA) 2020 Membership Assembly condemns the brutal death of George Floyd and the many other Black, Indigenous, and People of Color who have been unjustly killed by individuals within law enforcement.? Such cruelty and abject racism must not go unchallenged.

Racism is a public health crisis that impacts the mental, spiritual, and physical health of all people. The Code of Ethics for Nurses with Interpretive Statements obligates nurses to be allies and to advocate and speak up against racism, discrimination, and injustice.? Consistent with this obligation, ANA has taken positions against racism, discrimination and health care disparities and advocating for human rights.

ANA, along with nurses everywhere, are again called to action.? Collectively, we must emerge from silence and speak with one strong voice as leaders and role models of compassion and empathy for our patients, families, communities and most importantly, towards one another. Our voice is our commitment to making a difference in all that we do for those we serve.

ANA, along with the Constituent/State Nurses Associations and the ANA Individual Member Division, pledges to:

- Oppose and address all forms of racism and discrimination.
- Condemn brutality by law enforcement and all acts of violence.
- Champion the Code of Ethics for Nurses which calls on us to recognize human dignity regardless of race, culture, creed, sexual orientation, ethnicity, gender, age, experience, or any aspect of identity.?
- In partnership with nurses everywhere educate, advocate, and collaborate to end systemic racism, particularly within nursing.
- Advance institutional and legislative policies that promote diversity, equity, inclusion, and social justice for all.
- Advocate for the ending of health inequities within communities and health care systems that stem from systematic racism.
- Promote deliberate and respectful dialogue, effective listening and commitment to change as a means to improve the health of all individuals and the communities where they live and work.

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CAREERS IN NURSING

A TRUE DESIRE TO BE A NURSE: THE GRAND

by Vickie Jenkins - Writer/Photographer

Grace Living Center, The Grand is located in Bethany, OK. The staff and nurses are very welcoming to all that enter. One particular nurse that shows genuine love and compassion to the residents here is Danyelle Miller, LPN.

Growing up in Oklahoma City and the Midwest City area, Danyelle had a desire to care for others. She attended Platt College and was determined to get a degree and become a nurse. "I started out as a CNA, and shortly became a CMA, and was promoted to medical records and central supply. It was then that I knew I was headed in the right direction and wanted to get a degree in nursing. Since I had a baby at that time, it was very challenging," she said. "Having my son just added to the reasons that becoming a nurse was the

right thing to do," she said.

Danyelle tells about her first job in the medical field. "My first job had been at Grace Living Center and this is where I gained a tremendous amount of knowledge. I was able to attend training classes and mentorship programs that included documentation classes, IV classes and later, MDS classes. I was promoted in office administration nursing and became an MDS coordinator for long term care. I completed one full year in MDS before I decided that I missed the resident care and the one-on-one care. I was so thankful to have the opportunity. I became a floor nurse once again and worked at a skilled nursing facility with sub acute patients and administered IV antibiotics and medication with advanced training. It was rewarding to work side by side with a nurse

practitioner, hospital nurses, and the other medical staff. I have been a nurse for a total of nine years and can't imagine doing anything else. I truly believe being a nurse was a true calling for me."

According to Danyelle, her biggest reward of being a nurse is knowing that she is making a difference in the elderly residents. "I have always gotten a great peaceful feeling when I care for people, especially the elderly and it seems second nature when I am working, making a difference in someone's life. I will continue to learn and be thankful for this job. It really is my dream come true." Danyelle considers herself a true leader and wants to learn as much as she can in the medical field.

When it comes to mentors, Danyelle mentioned her cousins; Carla and Alvin. "They were

always there for me with lots of encouraging words. Plus, they helped me by caring for my son when I needed a baby-sitter. My son is thirteen years old now," Danyelle said. "My nursing mentor was Sylvian D. Jackson; an LPN of twenty years. She has been an inspiration to me and I look forward to continuing my education to receive my Bachelor in Nursing and becoming an RN."

"With COVID-19, being a nurse has been bitter sweet for me. I am sad when I think about all of the people who have lost their lives and I feel sorry for their loved ones not being able to see them on a personal basis. It has been rough for everyone and I don't think a lot of the residents fully understand what is going on. Just having someone come

See MILLER Page 5

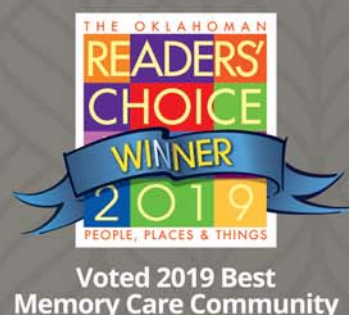


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Working at Grace Living Center, The Grand, is Danyelle Miller, LPN. Danyelle’s genuine love for the residents shines through with her caring ways.

MILLER
Continued from Page 4

visit them, giving them a hug and letting them know that someone is thinking of them is so important. The residents need that touch and that company,” Danyelle explained.

When I asked Danyelle if she had any family members in the medical field, she replied, “My mom was a CMA and my sisters and my niece are CNAs. I guess it all kind of runs in the family.”

Danyelle has been recognized as Employee of the Month and

Employee of the Year from Grace Living Center. “My biggest reward comes from the residents when they give me a simple thank you,” she said. “All of the residents are nice to everyone around here. We love all of the residents here and they think we are kind of special too,”she said with a smile.

Spending time with her two children, Ellis, her thirteen years old son and Nori, her three year old daughter, is Danyelle’s favorite thing to do. Describing her life overall, Danyelle says her life is complex but blessed beyond expectations.

SITUATION
UPDATE: COVID-19

- As of this advisory, there are 9,706 confirmed positive cases of COVID-19 in Oklahoma.
- There are three additional deaths; one occurred in the past 24 hours.
 - *One in Tulsa County, a male in the 65 and older age group.
 - * One in Comanche County, a female in the 65 and older age group.
 - * One in Muskogee County, a male in the 65 and older age group.
- There are 367 total deaths in the state.

COVID-19 testing sites are open in multiple cities in Oklahoma as a result of a cross-county, city and state health system partnership. Visit this page for updated dates and locations. For more information, visit coronavirus.health.ok.gov.

COVID-19 Oklahoma Test Results	
Confirmed Positive Cases	9,706
*Total Cumulative Negative Specimens to Date	264,872
*Total Cumulative Number of Specimens to Date	276,316
**Currently Hospitalized	211
Total Cumulative Hospitalizations	1,209
Deaths in the Past 24 hours	1
Total Cumulative Deaths	367

*The total includes laboratory information provided to OSDH at the time of the report. Total counts may not reflect unique individuals.

**This number is a combination of hospitalized positive cases and hospitalized persons under investigation, as reported by hospitals at the time of the report. The data reflect a change in calculation and should not be compared to prior data.

***The purpose of publishing aggregated statistical COVID-19 data through the OSDH Dashboard, the Executive Order Report, and the Weekly Epidemiology and Surveillance Report is to support the needs of the general public in receiving important and necessary information regarding the state of the health and safety of the citizens of Oklahoma. These resources may be used only for statistical purposes and may not be used in any way that would determine the identity of any reported cases.

Data Source: Acute Disease Service, Oklahoma State Department of Health.

*As of 2020-06-19 at 7:00 a.m.



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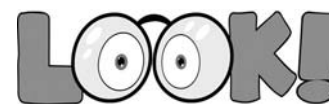
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A battle that never ends

For most people, sunshine and warming temperatures serve as welcome heralds of summer. But for Renita Lewis, they can trigger life-threatening disease flares.

"People say, 'You look too good to be sick,'" said Lewis, 51, of Midwest City. But Lewis, a nurse, suffers from lupus, an autoimmune illness that strikes African Americans like her at disproportionate rates.

Lupus occurs when the immune system becomes unbalanced, leading to the development of antibodies and chronic inflammation that damage the body's organs and tissues. Sufferers experience periodic disease flares, affecting organs that can include the kidneys, lungs, skin and joints, as well as the cardiovascular system.

According to the Lupus Foundation of America, more than 1.5 million Americans suffer from the disease. Studies have found that it strikes African Americans at roughly five times the rate it affects European Americans.

"We still have a great deal to learn about why African-American women are at greater risk of lupus and at greater risk for major organ damage and early death from lupus than other races," said Oklahoma Medical Research Foundation Vice President of Research Judith James, M.D., Ph.D.

"We have investigators who are working on genetic and genomic factors, as well as our work which has focused on differences in the body's major defense

system—the immune system. In all likelihood, it's probably a complicated combination of these factors, and we will keep working until we figure this out."

Lewis' first symptoms appeared when she was in her 20s: aching muscles, swollen fingers, skin rashes. But she wasn't diagnosed until a decade later, by which time she also suffered from shortness of breath, fatigue, asthma, stomach issues and inflammation around her heart. "I don't have kidney problems, but pretty much every other one of my organs is affected," she said.

She began daily doses of prednisone, hydroxychloroquine, aspirin and anti-inflammatory medications to control her symptom. Still, over time, lupus has exacted an increasing toll on her body. In March, after a bout of pericarditis—swelling of the membrane surrounding her heart—hospitalized her, she was forced to take short-term disability until she's well enough to return to work.

For more than a decade, physicians and clinical staff at OMRF, which has been named 1 of only 10 of the nation's Autoimmunity Centers of Excellence by the National Institutes of Health, have helped Lewis manage her condition. "They're on the cutting edge of research, especially on autoimmune disease, and they really care about me and want me to have as normal a life as possible," Lewis said.

As a lupus patient and a



Oklahoma Medical Research Foundation lupus patient Renita Lewis, left, with her daughter Taraya, 19.

healthcare professional, Lewis is happy to participate in research studies on the disease at OMRF. "By donating blood and taking part in studies, I hope I can help researchers develop new treatments," she said. If scientists are able to understand why it exacts such a heavy toll on African Americans, she said, "That would be a total game-changer."

In a study published in May in the *Journal of Allergy and Clinical Immunology*, an OMRF research team led by James moved closer to answering this question.

The scientists found that African Americans with certain risk factors for lupus had elevated activation levels in T cells, which are known to be important in lupus. Meanwhile, European Americans with similar risk factors did not. That may be a reason at-risk African Americans are more likely to develop the disease, said OMRF's Samantha Slight-Webb, Ph.D., lead author on the study. And the findings could prove key to helping allay the suffering of patients like Lewis.

"Identifying this protective T-cell response could be pivotal in identifying therapeutic targets and potential drugs that may

prevent people from transitioning into the disease," said Slight-Webb. "It would also help us look at drugs—and dosages—differently based on ethnicity to improve outcomes for African-American patients, who are at highest risk for severe disease."

Lewis would welcome any findings that could help improve her quality of life. Still, she's more interested in developments that could benefit her daughter, Taraya, 19.

Lewis' only child, Taraya previously tested positive for antinuclear antibodies, or ANA, an indicator of lupus activity. Taraya also has several relatives on her father's side with the disease. "So, when she says she doesn't feel good, I worry," said Lewis.

Like all mothers, Lewis wants more than anything to protect her child. "If researchers could find a way to prevent lupus from starting, that would be a dream," she said. "I never want my daughter to go through this."

For information on treatment or participating in one of OMRF's studies or trials, please call (405) 271-7745 or email clinic@omrf.org.

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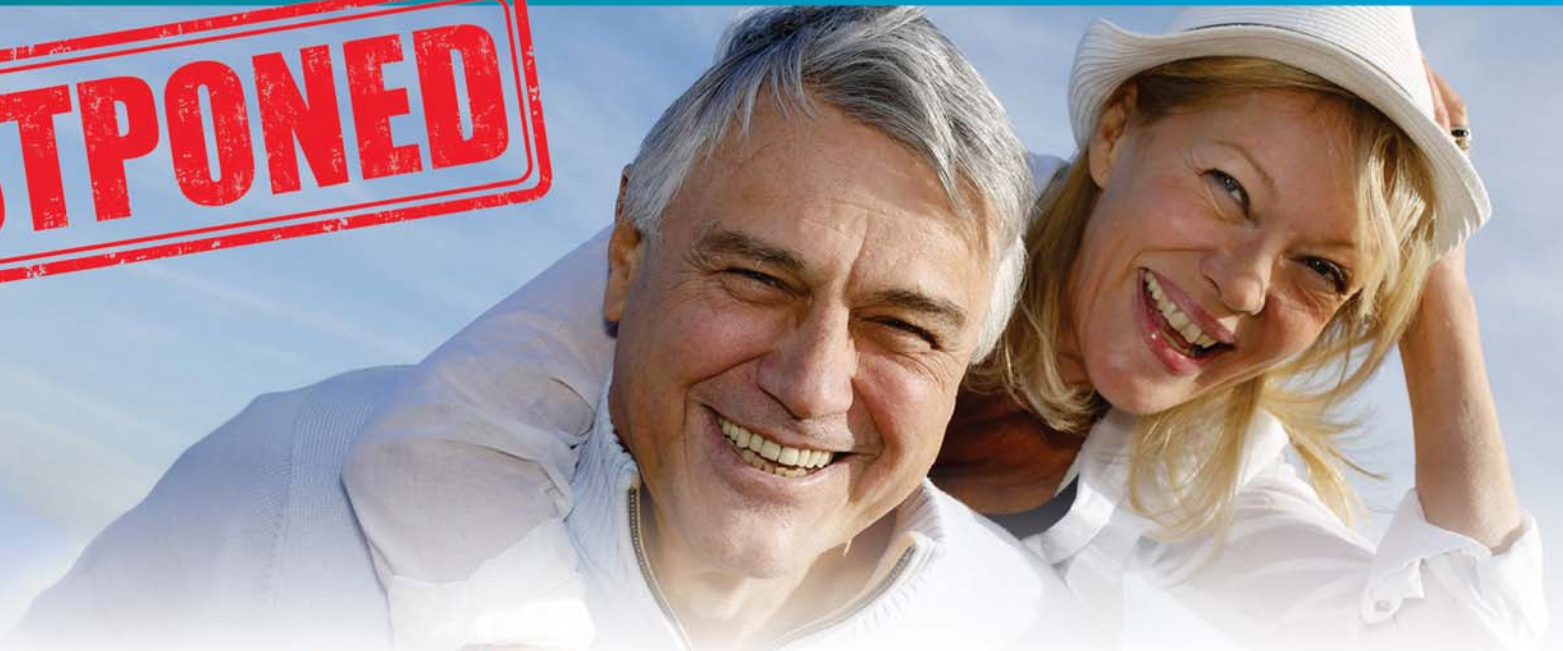
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OMRF receives \$1.75 million to study Covid-19 in Oklahomans

The Oklahoma Medical Research Foundation has received a \$1.75 million federal grant to study the impact of the coronavirus on Oklahomans.

Funded by the National Institute of Allergy and Infectious Diseases, the two-year project will seek to understand the immune system's response to the virus and how that immune response varies in different ethnic groups. Additionally, the study aims to understand if the immune response is protective against future infections -- or if it might worsen them.

"OMRF has a strong history and wonderful partnerships throughout the state," said Linda Thompson, Ph.D., who will help lead the project. "That should enable us to quickly obtain blood samples from those who have been exposed to or infected by the coronavirus."

The researchers will analyze blood donated by volunteers to understand individuals' differing immune responses to the virus. The OMRF scientists will be looking for biological clues that might identify those individuals most likely to experience a severe response to coronavirus infection.

As a group, Oklahomans are at a somewhat higher risk for life-threatening complications from Covid-19, as they tend to have higher rates of other conditions associated with greater mortality from coronavirus infection: obesity, diabetes, heart disease and high blood pressure.

OMRF is actively recruiting individuals for Covid-19 antibody testing, especially people with these high-risk conditions, those with Native American heritage, and those who know or suspect they have recovered from the virus. If you're interested in participating, please

call 405-271-7221 or email Jackie-Keyser@omrf.org.

OMRF researchers will also be studying the roles and reactions of antibodies that form in the immune response to infection to the virus known technically as SARS-CoV-2.

"Specifically, we need to know if antibodies help fight the virus," said Mark Coggeshall, Ph.D., who will also help lead the research. Work will focus on a phenomenon called antibody-dependent enhancement, where instead of protecting people from future infections, antibodies could actually make future infections worse.

"We have to understand all aspects of the body's immune response and which ones correlate to good health outcomes, and we also need to understand how these vary in different ethnicities," said Thompson. "This knowledge gap needs to be filled quickly to inform vaccine trials, some of which are

already underway."

The new funding comes as a supplement to a grant awarded to OMRF to study the immune system's response to anthrax bacteria as part of the NIAID's Cooperative Centers for Human Immunology.

"Our existing research on anthrax has a developed infrastructure to study immune response to a serious viral infection," Thompson said. "So, we are set up to start this project without having to develop new methodology. The work can, and will, begin immediately."

Coggeshall, for one, is eager to start the new project. "Our anthrax work is promising and important, but all research efforts right now should be on SARS-CoV-2 and Covid-19," he said. "There is no more urgent issue to study in the world, and we will do everything we can to help."



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