

Empower to Encourage Outside the Box Ideas



Carter Healthcare

Lori Martin RN, CPOC is the Director of Nursing at Carter Healthcare.

by Vickie Jenkins, Staff Writer

Carter Healthcare is a leading healthcare provider focused on delivering outcomes-based results and the highest quality of Home-Health, Hospice, At-Home Medical Equipment, and Pharmacy Services to thousands of clients in the comfort of their homes. -Carter Healthcare-

Meet Lori Martin, RN, CPOC Director

of Nursing at Carter Healthcare at the Corporate office, located in NW Oklahoma City, OK. Lori stays busy as she oversees Home Health and Hospice with many locations. "My typical day starts with phone calls to my team. Since we are not all in

See MARTIN Page 2

Norman ICU Nurse Commissioned Into Army Corp of



Lt. Wilkinson taking her oath.

An Intensive Care Unit (ICU) nurse fighting on the frontlines of the pandemic will be commissioned into the Army Corps of Nurses. Ashley Wilkinson will receive her commission at 1 p.m. Friday, Dec. 18 outside Norman Regional Hospital's Education Center, 901 N. Porter Ave. Her coworkers in the ICU at Norman Regional Hospital will be looking down from the windows as Wilkinson receives this honor.

Wilkinson joined the U.S. Army in 2004 when she was 17 years old. Her first duty station was at Guantanamo Bay, Cuba. She also served in Germany, was deployed to Afghanistan, and became an Active Duty Drill Sergeant. Wilkson then enrolled in nursing school to further pursue her passion for helping others.

"I loved working with people and helping them get better, even in the simplest of ways," she said.

She became a nurse in May 2018 and in December 2019 joined the team in Norman Regional's ICU. It wasn't long after finishing up her orientation that the hospital and Wilkinson began to see patients with COVID-19. "These patients were sick, and I as a new ICU nurse has to summon every bit of training I had accumulated in nursing and the military to manage these difficult patients. Unfortunately, my

See COMMISSION Page 3

MARTIN

Continued from Page 1

the same office, I try to connect with some of my regional directors individually, weekly by phone and then do a group call as well. People can usually deal with issues when they know what is happening at corporate and for me to stay informed of local office issues allows me to provide support when needed. I tend to have numerous meetings and respond to emails, monitor reports and provide guidance and assistance at a global level with regulatory and clinical issues," Lori said.

"I was originally an accounting major out of high school but soon realized that wasn't my fit. I transitioned to pre-nursing at OU. After staying home for an extended period of time, I wanted to return to the work force. My first job as a nurse was at OU Medical Center Cardiac ICU, then MICU and later Flex pool to all ICUs and ER."

As a young child, there were several friends and family members

that had passed away. I grew up with older grandparents and also lived next door to my grandmother. "I saw how my parents cared for them in such a loving way. This is when I decided to go to nursing school. With the tremendous love that was shown to their aging parents became the basis for my nursing and has allowed me to be accepting of others as they love and care for their families within their own belief system. It has also empowered me to encourage ideas outside the box," Lori commented.

Lori graduated from the University of Oklahoma with a BBA in Finance in 1988 and returned to nursing school after being a stay-at-home mom for ten years, graduating from Oklahoma City Community College in 2004. Lori started at Carter Healthcare in January 2008. She left in 2014 and they asked her to return in 2019. It was an easy decision for her. Lori grew up in a small, rural town of Jacktown, OK in an area called Rossville. "I attended White Rock School for elementary

and there were about one hundred kids from kindergarten to eighth grade and I attended with most of my cousins. I remember when my cousin and I would play nurse or teacher. She dropped out of nursing school when she had to practice NG tubes. Nursing was not her thing but teaching was. My cousin became a Science teacher. I became a nurse. We both got our wish," she said with a smile. "My family moved to town my eighth grade year and I graduated high school from Harrah, OK."

Lori believes that all nurses should have the following qualities to be a good nurse; Passion for patients and patient care and professionalism, holding yourself to the professional standards of a nurse and knowledgeable nursing skills.

When I asking Lori to describe herself, she said, "I am strong, a survivor and an overcomer. I consider myself definitely a leader. Stopping is not an option. I believe in ambition, work balance and supporting my family. I am a


hard worker, always willing to listen and I emphasize and try to put myself in another person's situation without judgement. I try to strike a balance between patient need, clinician support along with the business needs. I feel as though my background and experiences have developed me into the person I am today."


Asking Lori what her biggest reward as a nurse was, she replied, "My. biggest reward as a nurse is knowing that I am making a difference in people's lives. Being able to help people in a difficult season in life, plus showing love and kindness in the midst of work," Lori said.

Congratulations to Lori Martin for recently earning the title of Certified Professional Compliance Officer. Summing up Lori's life in four words, she said, "fun, and always changing."



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Lt. Wilkinson and her family.

COMMISSION

Continued from Page 1

team and myself are still in this fight. However, we are a team and there is no other place I'd rather be," Wilkinson said.

The United States Army Nurse Corps (ANC) was formally established by the U.S. Congress in 1901. It is one

of the six medical special branches (or "corps") of officers which – along with medical enlisted soldiers – comprise the Army Medical Department (AMEDD).

The ANC is the nursing service for the U.S. Army and provides nursing staff in support of the Department of Defense medical plans. The ANC is composed entirely of registered nurses.

Mercy Hospital Oklahoma City Earns A Grade

Safety is always a top priority in health care, though never more so than in 2020. Despite unprecedented challenges, Mercy Hospital Oklahoma City earned an A grade from The Leapfrog Group – its seventh consecutive A grade since 2017 – demonstrating a continued commitment to patient safety.

Leapfrog's Safety Grade assesses hospitals nationwide based on the outcomes of their efforts to prevent medical errors, infections and other patient harm, and gives traditional letter grades that reflect their ability to keep their patients safe. Mercy Hospital Oklahoma City was among only approximately one-third of the 2,600 hospitals graded to receive an A.

"This award is a direct reflection of our incredible co-workers and their dedication to providing exceptional, high quality care for our patients," Jim Gebhart, community president at Mercy Hospital Oklahoma City. "Our co-workers have faced hardships of truly historic proportions this year but their resiliency and resolve to continue to do what's best for their patients is inspiring"

Mercy Hospital Ada in Oklahoma also received an A grade along with Mercy hospitals in the following communities in other states: Fort Smith and Northwest Arkansas; Joplin, St. Louis and Washington in Missouri.

Developed under the guidance of a national expert panel, the Leapfrog assessment uses 28 measures of publicly available hospital safety data to assign grades to more than 2,600 U.S. hospitals twice per year. The methodology is peer-reviewed and fully transparent, and the results are free to the public.

To see Mercy's full grade details, and to access patient tips for staying safe in the hospital, visit www.hospitalafetygrade.org and follow The Leapfrog Group on Twitter and Facebook.

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CAREERS IN NURSING

WOUND OSTOMY CARE: HEALING WAS HUGE MILESTON

Vickie Jenkins, Staff Writer

The Oklahoma Surgical Hospital commits its premier medical expertise and technological resources to the provision of superior personalized health care. We embrace the highest standards in patient care and clinical outcomes, and endeavor to ensure that the overall patient experience will exceed expectations. -Oklahoma Surgical Hospital, Tulsa, OK-

It's a known fact that nurses affect many lives. This is the case for Conni Wilkinson Dobson, RN, Wound-Ostomy Care Nurse at Oklahoma Surgical Hospital in Tulsa, OK.

Conni grew up in Okemah, Oklahoma. When she was a little girl, she wanted to grow up and be an airline stewardess or a nurse. "I guess my childhood

dream came true when I became a nurse," Conni said with a smile. "I attended Gordon Cooper Vocational Tech School for my License Practical Nurse, Tulsa Community College for my Associates Degree in Nursing, OSU-Tulsa Langston for my Bachelor's Degree in Nursing and Texas University at MD Anderson for my WOCN program. I have been a nurse for thirty years but I have been practicing WOC for approximately fifteen years," Conni said.

Asking Conni why she became a nurse, she replied, "I chose WOC nursing because I make a difference in someone's life each and every day, from the smallest to the biggest issues. I work inpatient and see outpatients as well. The majority of my time with the patient is during their

stay at the hospital. I enjoy working with each patient and I come up with an individualized plan of care based on their needs and overall medical situations."

"I value the significance of the support of leadership within my facility and the overall impact of great teamwork for positive outcomes. The day we send a patient home from the hospital independent with ostomy care, or able to manage their wound at home, is a great day," Conni added.

Conni's biggest reward as a nurse is giving her patients quality of life, happiness and an ability to enjoy and take part of their lives. "It is an amazing feeling! Seeing a wound that has been present for a long period of time, HEALING is a huge milestone," Conni said. "No

one wants to have an ostomy but it means quality of life; meaning they can do the things I want them to do. That can be life changing and will bring them good health back, living a good life."

Conni has all of the qualities of an exceptional nurse; caring for the patients, listening to them and meeting their needs. She considers herself a leader in her professional career. "Perhaps, I am a follower in some aspects of my personal life simply because of lack of experience," she said.

Beginning her day in her office, Conni reviews the list of patients referred for wound and or ostomy care, along with follow up appointments for consultation to evaluate and treat. "I see an

See MILESTONE Page 5

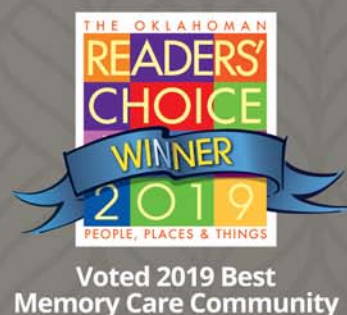


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MILESTONE

Continued from Page 4

average of eighty percent ostomy patients and twenty percent wound," she said. "When I see a patient, I perform a detailed assessment of the patient, keeping in mind that I am not just treating a condition, but a person. Additionally, I must keep in mind the patient's living situation, resources, insurance and support systems, when making recommendations for treatment. Everyone is unique, and what may work for one patient might not work for another. Each day, I work with the patients and collaborate with other team members, such as registered dietitians, staff nurse, physicians, surgeons, social workers and family members. I provide the best care and outcome for patients.

I have never worked with a more caring and compassionate group of staff members and surgeons. I work closely with Surgical Associates here at OSH and they are most impressive and professional group of surgeons that I have ever known." "In addition to seeing patients, I provide education to hospital staff in pressure ulcer prevention and wound care, provide assessment and teaching for patients in an outpatient ostomy setting, investigate and try new products and revise policies and procedures when needed," Conni added.

When asking Conni to



Conni Wilkinson Dobson, RN, CWON works at Oklahoma Surgical Center in Tulsa, OK. Conni chose a career in nursing to make a difference in others lives in big ways.

describe herself, she replied, "I am responsible and hard working. I enjoy my time at work, seeing my patients on a daily basis. My friend tells me that I am a reliable person and always willing to help out. I thrive on a challenge and set my standards high."

Summing up Conni's life in three words? "It would be happy, blessed and grateful," Conni said.



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OMRF discovery ignites search for patients with rare skeletal disorder

For Broken Arrow's Madison Cain, Santa only needs to leave one thing under the tree in 2020: A new Bitty Baby.

Madison's love of the popular line of dolls is fitting: Born full term at 5 lbs., 9 oz., she was a bitty baby, too. When she seemed to stop growing after her first birthday, doctors chalked up her short stature to simply being small for her age.

But by the time Madison was in kindergarten, she had endured broken bones, impaired mobility, cataracts and crippling digestive issues. At 6, to help her gain weight, she got her first feeding tube. Through it all, no one could tell Melissa and Clifton Cain why. Their daughter was a mystery.

After years of dead ends, the Cains turned to specialized genetic testing. That Hail Mary gave them an answer: Their daughter had a mutation in a gene known as MBTPS1.

A geneticist analyzed the results and told the Cains there was just one published study in the world on the mutation. It involved a single patient, "But," the doctor said, "It's not what Madison has." Unsatisfied, Melissa Cain — a nurse practitioner — found the research paper. "It wasn't a perfect match, but I knew there was something to it, some connection," she said.

When she looked up the contact information for the author, Cain couldn't believe what she saw. He was 100 miles away, just down the Turner Turnpike at the Oklahoma Medical Research Foundation.

At OMRF, Lijun Xia, M.D., Ph.D., Patrick Gaffney, M.D., and two other scientists had started to unravel this genetic mystery two years earlier. They were the first to identify the condition, a skeletal disorder now known as spondyloepiphyseal



Madison Cain surrounded by her toys in her Broken Arrow bedroom. A rare genetic bone disease that has caused Cain to have growth and digestive issues was identified by scientists at the Oklahoma Medical Research Foundation.

dysplasia, Kondo-Fu type (SEDKF), in a single patient from Yukon, Sydney Rutz.

Until Cain emailed Xia, the researchers thought Rutz was one of a kind. After meeting Madison and confirming she had the same condition, they expanded their search for SEDKF patients to learn more about the rare disease and find therapies to help.

"You work in a lab with mice and test tubes, and sometimes you become desensitized to the real problem," said Xia. "But once you see the patient, it makes you think how your research can help solve a real problem. It gives you more motivation."

Xia's team has now identified eight more patients around the world. He wants to test an existing medication that he believes — based on work he's done in his lab at OMRF — could help children with SEDKF. But that requires a clinical trial with dozens more patients to assess its efficacy and safety in a rigorous, controlled way.

Xia has launched a website for doctors to use as a resource. A group of researchers now reviews case information as it arrives, all working together to someday help patients with SEDKF.

With genetic diseases, Xia said,

the need for therapies is especially profound. "These patients will live with their conditions for life."

Still pint-sized at 3 feet, 6 inches tall, Madison, now 8 and a second grader at Anderson Elementary in the Tulsa Union district, gets an infusion every six months to help with her bone density and has reduced her tube feedings. She's stronger, thanks to physical therapy, and has more energy.

Although it was different not to see their extended family for Thanksgiving because of the pandemic, Madison said there was a bright side: She got to decorate the whole house for Christmas. Now she just needs to sort out the logistics of leaving milk and cookies for Santa (and Chex Mix for the reindeer — their favorite, she says) in a world with Covid-19.

"There's no way we can leave them on the roof!" Madison laughed. "But maybe we can leave them outside. Santa could just drop the presents down the chimney."

And if Santa comes through on a new baby doll for Madison after all? It will have a wardrobe ready, her mother said. The Bitty Baby that already gets tucked into bed with Madison each night is the perfect size for Madison's preemie clothes.

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(AS PUBLISHED IN THE 2020 EDUCATION GUIDE TO NURSING)

AGS Student Excelling at Local Hospital

Jennifer Butler has always been committed to making a difference in people's lives through kindness, compassion, and quality care.

She's currently working on completing her BSN degree through Oklahoma Wesleyan's Adult and Graduate Studies program. At the same time, Butler is working at Jane Phillip's Medical Center, in Bartlesville, Oklahoma, and is looking forward to a management position with the nursing staff after her graduation this December. It's one of many achievements in Butler's nursing career, which she says began when she was very young.

Her family, ironically, was not made up of healthcare providers, save for one grandmother who worked as a nursing assistant. Most of Butler's family were bankers, but that profession never held much appeal for Jennifer. For her, it was always nursing.

"I knew that I wanted to do something in ministry and something helping people," she said. "Something just always drew me to nursing."

There was also an aspect of home-town pride in Butler's decision, as she grew up in Bartlesville and felt a strong calling to minister to its people. "I love our community, so I want to make a difference in the people who need healthcare in [it]."

Butler got her CNA certification at 16, and she's never looked back, eventually taking classes at Roger's State University to earn her RN. After some work at St. John's in Tulsa to get some experience at a bigger facility—and spending some time with an agency as a travel nurse—Butler felt it was time to come home, taking a position with Jane



Phillips.

When she was offered a chance to take on a supervisory role, Butler felt a calling in a slightly different direction: administration. She currently works as a clinical supervisor, helping to organize the nursing staff and to provide assistance as needed through the hospital. Butler knew that this was a fit for her skill-set and giftedness, and she wanted to advance further. Not only that, but her bosses had her tapped for a management position. She would need to continue her education.

One Step at a Time

Enter OKWU and its extensive AGS program. Butler received information about the program from Kelli Croucher, AGS Enrollment Services Manager, and enrolled in courses. Between the scholarships she was able to receive from OKWU and the education stipends Butler received from her work, she will graduate this December completely debt-free.

"We came out free and clear. Bachelor's degree for free," Butler said. "It really opened that door for me to climb up the ladder."

And this is well-deserved.

"Everything Jennifer puts her hand to is done with excellence," Croucher said. "Jennifer has never wavered in her commitment to her family, her career or her education, bringing several fellow nurses along with her to complete their BSN as well."

As already mentioned, the best part of nursing for Butler is her ability to make an impact on someone's hospital experience for the better.

"Smiles are contagious. Being kind is contagious. The best thing about being a nurse is spreading kindness and showing compassion."

"The more compassion you



show, the more that others show."

Long term, she plans to continue her education, preferably at OKWU. But for now, she plans to continue in that singular mission: to show simple kindness, even as she continues climbing the ladder in administration. "I will always find a way to be on the floor," she said.

Butler doesn't worry about the future, and that's her advice to other students—especially those students in the AGS program who are juggling their career and their education. "Just take it one step at a time," she said. "One step at a time."

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NURSE TALK

"I feel like nurses are one of the strongest professions around. I really admire people putting themselves at risk."



Jennifer Williams,
RN

"We take care of people regardless of what's going on out there. It's a pandemic and it has to do with health care."



Tara Asari, RN, DON
for home health

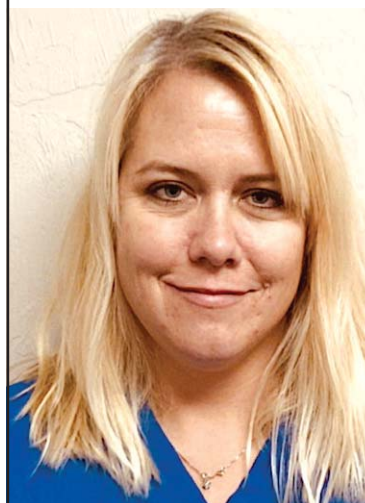
*What do you
admire about
nurses who
care for
COVID
patients?*

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"As a nurse you're called. You have to do what you have to do. Who you work with is a big part about being happy at your workplace."



Betsy Williams, RN

"They have really stepped up. I was a little concerned in the beginning because obviously they're concerned with taking care of their own families."



Tina Gille, RN, DON
for hospice

INTEGRIS Bass Baptist Health Center Receives COVID-19 Vaccine

The first doses of the Pfizer COVID-19 vaccine arrived in Oklahoma City on Monday and were escorted by the Oklahoma Highway Patrol to INTEGRIS Bass Baptist Health Center on Tuesday. INTEGRIS Bass will store the vaccine for the entire NW region of Oklahoma. This morning, the Oklahoma Health Department administered the first vaccines in the region to INTEGRIS Bass Baptist Health Center caregivers.

Cheryl Ransom, a health unit coordinator in the Intermediate Care Unit, was the first to receive the vaccine at the hospital. She has been working on the frontlines taking care of Oklahomans since the beginning of the pandemic. She gladly volunteered to be among the first to get the shot.

Also in the group was Chaplain Perry Walker. With limited family visiting options for COVID patients, Walker has been regularly at the bedside ministering to those during this difficult time.

"This has been a long time coming," says Ransom. "We finally have something to feel good about in the fight against this devastating disease. We're hopeful this signifies that we are turning the corner and can one day soon reclaim the life we once knew."

Finny Mathew is the Chief Hospital Executive of INTEGRIS Bass. He says this is a monumental moment for his caregivers and really the community at large. "We are in a battle and this is the weapon we have been waiting for. Once enough of the population is protected in this way, we will finally be able to claim victory."

But health officials warn we're not there yet. It will take several more

months and majority compliance to see the true impact of the vaccine. In the meantime, we need to continue to wear masks, wash our hands and watch our distance from others.



Cheryl Ransom, a health unit coordinator in the Intermediate Care Unit.

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SITUATION UPDATE: COVID-19

COVID-19 Oklahoma Test Results	
Cases	251,760
*Total Cumulative Negative Specimens to Date	2,192,087
*Total Cumulative Number of Specimens to Date	2,447,260
Acute Care OSDH Licensed Facility Hospitalizations	1,594
Other Types of Facilities Hospitalizations	139
Total Cumulative Hospitalizations	14,970
Total Cumulative Deaths	2,161

- This week, 77 Oklahoma counties are in the “orange” risk level for the COVID-19 Risk Level System. OSDH continues to monitor closely the statewide hospitalization trends for COVID-19.
- The COVID-19 Risk Level System will be updated every Friday in the Situation Update at 11:00 a.m. This week’s map can be seen in this update below the test results chart.
- As OSDH continues to meet with stakeholders across the state, the COVID-19 Risk Level System is subject to further revisions as science and public health guidance advances with the ongoing pandemic.
- As of this advisory, there are 251,760 cases of COVID-19 in Oklahoma.
- 3,201 is today’s 7-day rolling average for the number of new cases reported.
- There are 17 additional deaths identified to report.
 - * One in Caddo County, one male in the 65 or older age group.
 - * One in Canadian County, one female in the 50-64 age group.
 - * One in Craig County, one female in the 65 or older age group.
 - * One in McCurtain County, one male in the 65 or older age group.
 - * One in Muskogee County, one male in the 50-64 age group.
 - * One in Nowata County, one male in the 65 or older age group.
 - * Three in Oklahoma County, one female in the 36-49 age group, one female in the 65 or older age group, one male in the 50-64 age group.
 - * One in Rogers County, one male in the 65 or older age group.
 - * Seven in Tulsa County, three females in the 65 or older age group, one male in the 50-64 age group, three males in the 65 or older age group.
- There are 2,161 total deaths in the state.
- For more information, visit <https://oklahoma.gov/covid19.html>.

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

***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 2020-12-18 at 7:00 a.m.

OU Health Sciences Center Receives Grant for Opioid Management in Older Adults

Chronic pain can be quite common among older adults as they face conditions such as arthritis and neuropathy. Treating pain in older adults requires special considerations, however, especially when it comes to opioids.

The University of Oklahoma Health Sciences Center recently received a \$2.5 million federal grant to tailor methods of treating chronic pain to the older adult population – with an emphasis on decreasing the use of opioids – and to disseminate those best practices to primary care clinics across Oklahoma. The grant is from the Agency for Healthcare Research and Quality, the lead federal agency charged with improving the safety and quality of America's healthcare system.

In recent years, the OU Health Sciences Center has made significant contributions to the medical profession's understanding of the risks and benefits of using opioids to treat chronic pain. However, much of that work has focused on the general population, rather than older adults specifically. This grant will allow physicians and researchers to concentrate solely on older adults, and to establish standards of pain management that prioritize non-opioid medications and treatments.

"The older population has a much different relationship with opioids than the younger population does," said one of the grant's three principal investigators, Zsolt Nagykalai, Ph.D., Director of Research for the Department of Family and Preventive Medicine in the OU College of Medicine. "In the younger population, the No. 1 problem is typically misuse, while in the older population, the bigger problems are interactions between opioids and other medications and other health conditions, as well as a higher risk of falls."

There are numerous reasons for limiting or avoiding opioid prescriptions in older adults, said co-principal investigator Steven Crawford, M.D., Senior Associate Dean for the OU College of Medicine. Metabolism slows as people age, which can increase



the effects of opioids. Conditions like emphysema and sleep apnea complicate the use of opioids, Crawford said, and other medications may interact poorly with opioids. Opioids also cause constipation, which can affect the body's systems and eventually lead to serious issues.

However, there are many alternatives to opioids. Non-opioid medications may be an option, although care must be exercised with anti-inflammatory drugs like ibuprofen, which can damage the kidneys and increase the risk of internal bleeding, among other complications, Crawford said. There are many non-pharmacologic possibilities, such as physical therapy, topical agents, acupuncture, massage, meditation and exercise. Those are also important options if patients are decreasing their opioid use slowly over time.

"Regular physical activity is very important for managing chronic pain because pain gets worse if people sit for a long time," said geriatrician and co-principal investigator Lee Jennings, M.D., Chief of the Section of Geriatrics in the Department of Medicine, OU College of Medicine. Jennings is also director of the Oklahoma Healthy Aging Initiative (OHAI), which provides gentle exercise opportunities and falls prevention classes (including via Zoom) across Oklahoma. OHAI's free programming will be emphasized as part of the overall program.

"It's not easy to treat older adults with chronic pain, so this grant will allow us to help patients and their physicians to understand and have access to alternatives to opioids," Jennings said. "It's very important to have safe opioid prescribing practices and to make sure that patients understand the risks, but we have to think through other ways to manage pain. It's not always possible to make

someone totally pain-free, but we also don't want to put someone at risk for a fall because they're taking a medication that has a sedating effect. We want them to continue doing the activities that enrich their lives. We don't want people to stop doing the things they enjoy because that can lead to social isolation and loneliness, which ultimately leads to poorer health."

Because primary care clinics provide most of the care for older adults with chronic pain, the OU Health Sciences Center will be working with up to 50 clinics across Oklahoma. Community panels, comprised of both patients and clinicians, will provide insight into

the needs specific to each area. The OU Health Sciences Center has an extensive network of relationships with rural clinics across the state to share best practices and provide hands-on assistance; this grant will enable further outreach on a topic that's important to many Oklahomans.

"New medical guidelines, if they follow the natural course of things, can take years to become wedded into the practices of clinics," Crawford said. "This type of program allows us to accelerate that process by working with clinics to improve the quality of life for their patients."



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