



Comfort of home



Bradford Village offers patient centered care

As director of nursing at Bradford Village in Edmond, Melissa Wilson is where she wants to be in her nursing career.

by James Coburn, Staff Writer

Nurses represent the very best of the American workforce. But it takes somebody like Melissa Wilson to lead the best while serving as director of nursing at Bradford Village. She leads a staff of nurses willing to go the extra mile for the safety of residents.

"I've learned in this business, it's not really about the building. It's about your team," she said. "If you have a great leadership team, it

says everything."

Wilson was a real trooper staying overnight at the Edmond home during a recent storm that brought 14 inches of snowfall and record low temperatures to the community of senior residents.

"We are definitely dedicated," Wilson said

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Norman Regional Receives the 2021 Women's Choice Award®



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Norman Regional has been named one of America's Best Hospitals for Emergency Care by the Women's Choice Award®, America's trusted referral source for the best in healthcare. The award signifies that Norman Regional is in the top 5% of 4,542 U.S. hospitals offering emergency care services.

The methodology for America's Best Hospitals for Emergency Care award is unique in that it combines Hospital Consumer Assessment of Healthcare Providers and Systems (HCAHPS) survey results with primary research about women's healthcare preferences. The award recognizes excellence in emergency care based on several process of care measures focused on time patients spent in the emergency department, including:

Total Time Spent in the Emergency Department

Time from Admission to a Room

Percent of Emergency Patients Who Left Without Being Seen

Criteria for selecting Norman Regional as one of America's Best also included the percentage of patients who came to the emergency department with stroke symptoms who received brain scan results within 45 minutes of arrival. Also included this year were

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BRADFORD

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during the rare arctic blizzard. "In fact, myself, I stayed over last night and will probably stay over tonight just to make sure we have adequate care on the floor."

Wilson has been with Bradford for about six months of her 16-year career. She earned her Bachelor of Science in Nursing degree from Oklahoma Baptist University and went on to receive her MSHM.

It makes a big difference to have nurses who work well together in harmony serving patients' daily needs. They all have challenges but adhere to best practices they implement together for patient care. The bottom line is that the nursing staff stands for patient care.

Patients may have a high acuity of needs or even need something simple like a phone charger to help their days go better, especially when separated from their loved ones during a pandemic.

"That kind of symbolizes what we're all about. Whatever it is, somebody somewhere is going to make our patient happy," Wilson said.

Nurses care for one another as well. During the snowstorm nurses responded by picking each other up for work when needed. Some of the nurses living close to Bradford Village offered their homes to staff members for a safe haven.

"Just so we can all work together and help each other at the facility," Wilson said.

The nurses at Bradford Village's building where Wilson work offer skilled nursing and long-term care. There are currently 32 skilled patients and 48 long-term care residents. Some of the skilled unit patients ultimately transfer to long-term care if their acuity of care does not allow family to care for them at home.

"Some of them wish to just stay here," she said.

Five registered nurses are employed at Bradford with the majority of the floor staff being LPNs.

Nurses have been known to volunteer to pick-up a resident's favorite cheeseburger for lunch or dinner whenever asked.

"You can just see the outward appearance of the nursing staff's care when walking down the hall,"

she said. "It's very rewarding to see that out of my staff."

A lot of the patients in the rehabilitation unit are recovering from a hip fracture. One of the female patients was downtrodden because she suffered a second fracture of her hip and needed assistance to get from the bed to a chair.

Wilson took charge of the woman's care during the snowstorm. Additional time was needed to help the woman.

"At the end of it she just hugged my neck and said, 'Thank you. You were here for a purpose. God put you here for me,'" Wilson said. "And it just warmed my heart because that's why we do this. I don't do a lot of direct patient care, but just the acknowledgement that it meant something to her. That's why we do what we do."

Wilson's main focus to pursue nursing occurred when her mother was losing a battle with non-Hodgkin's lymphoma. She saw her mother go through multiple treatments and wanted to provide and assist her mother with her health care in ways of just being her daughter.

"I wanted to know," Wilson said. "And so, she pushed me. I wanted to know more during the last few years of her life. She pushed me to go to nursing school and that's why I became a nurse."

In fact, many of her family members are nurses, including her husband, mother-in-law, and sister have chosen the profession.

Nursing offers a wide array of choices for one's career. Wilson has worked in hospitals and clinics, but geriatric care is where she found her calling, she said.

"You get to be part of a journey," she said.

Hospital nurses give their patients as much healing care as possible during their time with patients, Wilson said.

"When a long-term patient comes to us, it's a journey. It's a journey for them to live here as best as their last days allow," Wilson said. "It's a privilege to be part of that."



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AWARD

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hospitals that performed well in responding to patients showing symptoms of severe sepsis, a very dangerous condition. The awarded hospitals represent those with emergency departments with average measure times in the highest 25th to 50th percentile in the country. Hospitals received additional credit if they have an accredited trauma center.

The award is especially significant given that long waits and high crowding can negatively impact patient outcomes, including patients leaving without receiving medical treatment, longer overall length of hospital stay and an increase in mortality rates.

"We have found that recommendations are an important consideration used by women in selecting a hospital for themselves and their family. By helping women know which hospitals in their area provide the best critical care, we are able to help them make better decisions, especially

when it comes to emergency situations," said Delia Passi, CEO and Founder of the Women's Choice Award. "Women make over 80% of healthcare decisions and have demanding lifestyles and we help simplify her life by making it easy for her to find the best care in those stressful emergency situations."

Norman Regional is one of 477 award recipients representing the hospitals that have met the highest standards for emergency care in the U.S. by the Women's Choice Award.

"At Norman Regional we are constantly striving to improve our patient experience in the emergency departments, as we know visiting the emergency room is never an easy time for our patients. We do our best to alleviate patients' stress by getting them in and out quickly while offering them convenient, expert care. To be rewarded for our efforts means a lot, as it exemplifies our dedication to our patients," said Jan Emmons, director of Norman Regional's emergency services.



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A Sweet Experience

RN pleases metro palates

by Bobby Anderson - Staff Writer

Hema Patel, RN, still remembers when her passion began.

A trip to California with her husband led to a stop at a local gelato shop.

The tastes, the smells, the experience burned a hole in Patel's soul.

"I fell in love," she said.

Shortly after leaving, she turned to husband and spoke her dreams into the universe.

She told her husband, local optometrist Dr. Pritesh Patel, they should consider bringing something like this to Oklahoma.

"I always wanted to do something for our community because we don't have anything like this on the south side of town," the Integris registered nurse said.

A year-and-a-half later in February 2019, Dolci Paradiso was born.

This past September a second location was opened at 17th 5th St. in Edmond.

The Six East Ortho-Neuro nurse found her passion in desserts as she traveled through America tasting some of America's best gelato and pastry shops.

Her passion of making people smile has carried over from her nursing career to her first gelato and pastry shop as she introduces desserts to the community founded by the idea of creating recipes and flavors that are second to none.

Made fresh daily her goal is to use classic French and Italian styles but incorporate her traditional Indian background by adding spices and flavors that are different from anything people would normally try.

Her passion for cooking makes her comfortable in the kitchen as she has spent many months perfecting recipes and taking classes with world-



Integris Baptist nurse Hema Patel, RN, brings sweet creations to the metro through Dolci Paradiso. *Photos provided*

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PATEL

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renowned pastry chefs like Dominique Ansel, Bruno Albouze, Dinara Kasko, Ksenia Penkina, Peter Yuen, and gelato master Maria Coassin. She hopes to create an extraordinary sensorial experience for every individual who enjoys beautiful desserts whether it be gelato, pastries, or crepes.

Her husband grew up in the Moore community, attending Westmoore High School before going on to the University of Oklahoma and then optometry school in San Antonio.

To say he's involved would be an understatement. He handles all of the company's social media and found the original space at 10740 S. May Ave Ste 101.

It didn't take a lot of looking because it's the space adjacent to his practice at the Eye Experience.

"In the beginning, yes, it was tough but I had my whole family that supported us including my in-laws and my husband," Hema Patel said. "Eventually, I knew it would get better. It's so much better than it used to be."

Patel's deep roots paid off and

the locals came by to see what Dolci Paradiso was all about.

The tastes are what keep them coming back.

Patel doesn't work a shift on Mondays and the shop is closed that day, too. Normally, the store is fully staffed but Patel deals with the headaches of employees just like any other business.

Some days she has to come in and man the counter.

On days she's fully staffed and her home unit isn't she'll come in and pick up a shift.

"I love all my coworkers," Patel said.

She enjoys feedback from customers on what they like and what they don't. And if for some reason they don't enjoy their experience she wants to know in order to make it better the next time.

Patel and her husband created all the recipes. They do employ a pastry chef charged with making cannoli, brownies, cookies, and other treats.

It might be why daughter, Tulsi, comes to work so often.

"She loves coming to the gelato shop," Patel said. "I always ask 'Do you want to go to the clinic or come with me.' She always wants to



come to the gelato shop. She gets really excited to serve customers. She wants to scoop."

Like most businesses, Patel has been forced to deal with the fallout from Covid. More people are beginning to come back but it's definitely affected business.

"It's been good," Patel said. "Our gelato sales have been lower because not a lot of people coming in to shop. The dining used to be full with kids and family before Covid hit, but I guess people are afraid to

bring their kids. I don't even take my daughter outside."

Patel has been an Integris Baptist nurse since 2015. Her coworkers and patients are the glue that keeps her in nursing.

She's thankful her work has allowed her to make her schedule.

"I love my coworkers. We work as a team," she said. "You don't feel alone. It doesn't matter how behind you get because you know your coworkers are going to come help. It's a comfort zone for everybody."

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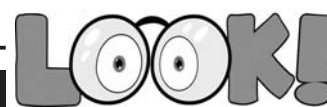
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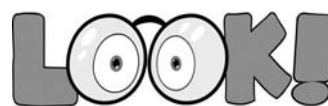
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Family Nurse Practitioner service-learning project brings care into the community

At The University of Tulsa, students in the Family Nurse Practitioner (FNP) program receive individual attention and the tools necessary to help them elevate nursing core values to the advanced practice, primary care level. These students are challenged to pay forward their advanced practice knowledge and skills in assessment, diagnosis and prescribing through ongoing opportunities to make their communities a better place for all. One recent example of FNP service learning involved students providing sports physicals free of charge to students at Will Rogers College High School, a Title 1 institution.



Family nurse practitioner students Alejandra Paredes and Vicky Cha demonstrate skill and compassion during a pediatric exam.

This initiative began two years ago, when the FNP program's director, Sheryl Stansifer, learned that many students at Will Rogers were returning to school in August without a completed sports physical. The lack of such a physical, which typically costs \$20 or more, means a young person cannot participate in school sports.

The first year Stansifer and her FNP students went to Will Rogers, they completed 160 physicals. The next year, that figure climbed to 200. The school's athletic director, Krystel Markwardt, enthused about the impact of "this wonderful program," noting that "our students come from diverse economic backgrounds, and their families couldn't afford to pay for physicals. The FNP students work quickly and efficiently, and their efforts mean our athletes are able to compete in the summer and be prepared for early fall sports." As Stansifer pointed out, the issue is "bigger than playing basketball or joining the swim team. For many kids, getting involved in sports means they will stay in school and graduate."

The benefits of this service-learning project are tangible for both the young athletes and the FNP students. Sports physicals are a common component of primary care, and all of TU's FNP students must complete pediatric assessments and be checked off on sports physicals. Providing sports physicals to the Will Rogers students enables the future FNP's to satisfy that requirement. In addition, Stansifer commented, delivering these physicals "enables faculty members to assess FNP students' interactions with the patients/athletes and their ability to complete the forms accurately. Because so many health care teams comprise a variety of professionals, having an opportunity to collaborate with the school's athletic trainer adds a critical interdisciplinary component to their development."

Two of the FNP students who participated in service

learning are Alejandra Paredes and Vicky Cha. Originally from Peru (she moved to the United States when she was 13), Paredes has been a registered nurse (RN) since 2014. Cha is a first-generation Hmong-American who grew up in California. She has been an RN since 2015.

"I always knew my career end-goal was to become a nurse practitioner (NP)," Paredes said. "But I wanted to gain experience as an RN so I could become a better NP. I am looking forward to having more autonomy in the care that I deliver to my patients, and it's important to me to be able to help them focus on health maintenance and disease prevention, while being mindful of individuals' emotional, physical and spiritual health." Cha has her gaze set on working as an FNP in urgent care. "Seeing NPs' selflessness, commitment and integral role in patient care both inspired me and solidified my determination to pursue an advanced practice degree."

For Paredes, one of the benefits of TU's FNP program is the "huge relief" of not having to find a preceptor. She also cited the diverse network of clinical sites, which "serve as a great way for students to learn and implement their knowledge." Paredes recently spent a semester at a clinic caring for a largely underserved population where most of the patients spoke Spanish, which is her native language. Cha has a similar interest in bringing health care to people who are often on the margins. "I admire the TU School of Nursing's mission to not only cultivate students to become leaders in health care, but also to give back to their communities."

This is something Cha experienced first hand with the Will Rogers service-learning initiative, and which resonated on a personal level. "My parents were Hmong refugees and I grew up with minimal resources. One of the biggest struggles was not being able to take part in sports because my parents couldn't afford the fees and transportation. Providing free sports physicals for Will Rogers students, many of whom have a background similar to mine, exemplifies one of the most rewarding aspects of nursing: making a positive impact on another person's life." Reflecting on her experience providing physicals for these youth, Paredes arrived at a similar conclusion: "I believe that caring for others, regardless of social, racial or economic background, is a core value of nursing."

Mercy and Humana Team Up to Expand Access to Virtual Health Services and Coordinated Care

Particularly Important During the COVID-19 Pandemic

Missouri-based Mercy and leading health and well-being company Humana Inc. (NYSE: HUM) have signed an agreement to expand patient access to virtual health resources as part of a broader, joint effort to provide more holistic care to Humana Medicare Advantage members. These goals are especially vital given the challenges presented by the COVID-19 pandemic.

The new initiative offers convenient care options for Humana Medicare Advantage members who are patients of Mercy's more than 4,000 integrated primary and specialty care clinicians in Arkansas, Kansas, Missouri and Oklahoma. Now in effect, the value-based agreement expands upon Mercy and Humana's existing network contract, which continues to provide in-network access at all Mercy hospitals, outpatient facilities, and physician

practices.

Key features of the collaboration include:

- **Mercy Virtual:** Humana Medicare Advantage members now have in-network access to this comprehensive virtual resource, often called a "hospital without beds." Staffed with more than 300 clinicians, it offers 24/7 care, such as virtual primary care in the home. Mercy Virtual's services are an innovative, patient-centric model that provides care to patients when and where they require it.

- **Value-Based Care:** Mercy and Humana have entered into a contract to provide care that addresses the health of the whole patient. Payment to Mercy physicians by Humana is linked to providing quality care in order to improve the patient experience and health outcomes. This differs from

traditional "fee-for-service" models, by which payment is based on the quantity of services clinicians provide.

"Mercy is committed to working with our communities to improve health care while also reducing the total cost of care," said Shannon Sock, Mercy executive vice president, chief strategist and chief financial officer. "Strong payor relationships, like this one with Humana, will help in our long-term journey to provide more seamless care for our patients. Together we can make a real difference for patients, which is especially critical during this pandemic."

"This agreement unites two organizations striving to offer care that is more accessible, personalized and coordinated – a commitment that is more important than ever right now," said Jeremy Gaskill, Humana regional Medicare president. "We're

pleased to broaden our efforts to improve the health and well-being of people in the communities we serve by teaming up with Mercy, an organization that shares our dedication to innovation in health care."

Humana has an extensive and growing value-based care presence. As of Dec. 31, 2020, Humana has more than 2.7 million individual Medicare Advantage and commercial members who are cared for by more than 67,000 primary care physicians in more than 1,000 value-based relationships across 43 states and Puerto Rico. As of January 2021, Humana's total Medicare Advantage membership is more than 4.8 million members, which includes members affiliated with providers in value-based and standard Medicare Advantage settings. For more information, visit www.humana.com/valuebasedcare.

HPRC Researcher Offers Monetary Incentives to Oklahomans for Quitting Smoking

Better Lives Through Better Health.



A TSET Health Promotion Research Center researcher is looking at the longer-term effectiveness of incentive-based smoking cessation for socioeconomically disadvantaged smokers.

Dr. Darla Kendzor, Co-Director of the TSET Health Promotion Research Center, has characterized the influences of socioeconomic disadvantage and race/ethnicity on smoking cessation, including financial stress, neighborhood factors, and racial/ethnic discrimination. Her current research focuses on identifying practical and effective smoking cessation interventions for Oklahomans who are uninsured or accessing Medicaid benefits.

Although the prevalence of smoking has decreased to 14% among U.S. adults, the smoking rates are as high as 25% among those who have Medicaid health insurance coverage or are uninsured. While socioeconomically disadvantaged adults are just as likely to try to quit smoking as individuals of higher socioeconomic status, they are less likely to succeed.

The primary aim of Kendzor's five-year study, funded by the National Cancer Institute, is to evaluate the longer-term impact of a low-cost

incentives-based intervention on quitting smoking among socioeconomically disadvantaged adults participating in a smoking cessation treatment program. In addition, treatment factors and personal characteristics that influence the likelihood of quitting, such treatment adherence, motivation to quit, and self-efficacy, will be identified via smartphone-based assessments.

According to Kendzor, "Offering monetary incentives for quitting may be an appealing and effective way to help people quit smoking and increase health equity among individuals with fewer resources."

Socioeconomically disadvantaged individuals initiating smoking cessation treatment, are randomly assigned to either standard smoking cessation treatment or standard treatment plus financial incentives for quitting. Those assigned to the incentives intervention may earn small gift cards for verified abstinence over 12 weeks (up to \$250 total), and they will be followed for 26 weeks to determine whether they are able to stay quit. Smartphones are provided to participants in order to assess their experiences while quitting and to provide intervention support.

Findings will provide information about the effectiveness of a practical and inexpensive smoking cessation intervention for the socioeconomically disadvantaged smokers that may be applied in real-world settings. To find more information about the study, call (405) 271-QUIT or visit 271quit.com

This research was primarily supported by National Cancer Institute (NCI) grant R01CA197314 (to D.E. Kendzor). Additional support was provided by Oklahoma Tobacco Settlement Endowment Trust Grant R21-02, and the Mobile Health Technology Shared Resource, which is a component of the NCI Cancer Center Support Grant P30CA225520 awarded to the Stephenson Cancer Center.

NURSE TALK

"At CSL Plasma I enjoy my employees and co-workers. It feels more like a family than a lot of places that I've worked at in the past."



Taylor George,
paramedic

"I really enjoy working with the donors and other staff here. Knowing that we're making medications and products that save people's lives."



Nicole Spielmann,
LPN

*What do
you enjoy
most about
your job?*

CSL Plasma

CSL Plasma



"I love what I do. I got into nursing to help people, and I actually have a daughter and plasma donors saved her life. So for me this is really personal."



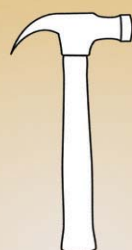
Alena Ellsworth, LPN

"Nowadays with people sick with COVID, it means a lot and makes me feel really good that I'm actually trying to help other people."



Martieas Johnson,
LPN

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SITUATION UPDATE: COVID-19

Cases	424,888
*Total Cumulative Negative Specimens to Date (As of 02/26/21)	3,084,829
*Total Cumulative Number of Specimens to Date (As of 02/26/21)	3,483,450
Acute Care OSDH Licensed Facility Hospitalizations (As of 02/26/21)	484
Other Types of Facilities Hospitalizations (As of 02/26/21)	44
Total Cumulative Hospitalizations	23,995
Total Cumulative Deaths	4,478

- As of this advisory, there are 424,888 cases of COVID-19 in Oklahoma.
- 719 is today's 7-day rolling average for the number of new cases reported.
- There are 50 additional deaths identified to report.
- * 2 of the newly reported deaths occurred in February.
- * 47 of the newly reported deaths occurred in January.
- There are 4,478 total deaths in the state.
- Additional hospitalization data can be found in the Hospital Tiers report, published evenings Monday through Friday.

- Register online to receive a notification when you're eligible to schedule a COVID-19 vaccine appointment at vaccinate.oklahoma.gov.
- For more information, visit <https://oklahoma.gov/covid19.html>.

*The total includes laboratory information provided to OSDH at the time of the report. As a result, counts are subject to change. 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 2021-03-01 at 7:00 a.m.

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A Father of Three Suffers Complete Mitral Valve Failure



Cliff Allison discovered he had suffered acute severe mitral valve failure, likely due to a congenital heart defect, after developing a severe cough and being sent straight to the emergency room.

In June 2020, Cliff Allison of Tulsa suddenly developed a severe cough and shortness of breath. He sought urgent care, but was sent straight to the emergency room because his oxygenation was dangerously low.

"We thought he had COVID-19," admits Cliff's wife Crystal. "That was the fear on everyone's mind, but all the tests came back negative."

At age 53 with no prior health issues, Allison was admitted to the hospital in Tulsa with presumed pneumonia, but doctors were baffled because there was no obvious cause. His condition deteriorated quickly and he was moved to the intensive care unit, where they ultimately discovered the problem was with his heart. Allison had suffered acute severe mitral valve failure, likely due to a congenital heart defect.

"Because the valve was not closing, blood was backing up into his lungs with each squeeze of his heart. He was basically drowning from the inside," explains Crystal.

"He was placed on a ventilator as doctors attempted to clear his lungs enough to perform open-heart surgery. Despite all interventions, Cliff was stuck in a vicious cycle. His lungs continued to fill with fluid while his heart was too weak to clear his lungs."

Doctors in Tulsa had exhausted all options. Allison was clinging to life when he was air-lifted to INTEGRIS Baptist Medical Center in Oklahoma City. His last hope was an advanced life-saving treatment called ECMO, or extracorporeal membrane oxygenation. ECMO does the work of the heart and lungs. It is not a cure, but it buys a patient time to heal.

ECMO is often called the 'last hope' for critical heart patients. For Allison, this was most definitely the case. As the helicopter landed at INTEGRIS Baptist, Cliff's condition suddenly decompensated. Without a moment to spare, Michael Harper, M.D., a critical care intensivist, performed emergency ECMO cannulation and saved Cliff's life.

"Mr. Allison arrived to our facility in dire straits," confirms Harper. "His lungs were so full of fluid that they could not absorb much oxygen, and his heart was failing to the point that his blood pressure was critically low. He was dying before our eyes. He wouldn't have survived another hour without ECMO. Our team moved rapidly to get him on support and stabilized, but this was only the beginning of his long road to recovery."

Once on ECMO and stabilized, Marshall Bell, M.D., a cardiovascular surgeon with the INTEGRIS Heart Hospital, was finally able to perform the life-saving open heart surgery Allison needed to replace his mitral valve.

"I received a call from Dr. Michael Harper about a patient with a ruptured mitral valve. He was young, in renal failure, had shock liver and severe pulmonary edema. He was very unstable and would likely not survive the night. We both agreed to move ahead aggressively," says Bell. "While the surgery went smoothly, we still had a long way to go before Cliff could be considered healed."

Although the surgery was a

success, it took weeks to wean Allison off of ECMO. He suffered several setbacks and was hospitalized for a total of 47 days, mostly in intensive care.

"Life is so fragile," states Crystal. "In an instant we went from being a normal healthy family to one facing a sudden medical crisis. I found myself in frightening and unfamiliar territory, but I never felt alone. The staff at INTEGRIS showed such compassion, not just for Cliff, but for me. I will forever be grateful for second chances."

Against the odds, Cliff miraculously pulled through. "So many prayers were answered. It is only by the grace of God and the dedication and skill of my care team that I am alive today," claims Allison. "Because of them, I am still here to enjoy life with my wife of 28 years and my three children. I'm very grateful to still be here for my family."

Cliff got to go home from the hospital in late July. Through extensive rehab and physical therapy, he has made a full recovery. He continues to live his life with no restrictions, only newfound gratitude.

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These notes of appreciation will inspire donors to continue giving and encourage others to become lifesaving plasma donors, providing health and healing for COVID-19 patients like Mitch...

Dear life-saving donor,

As I look back at my recovery, one of the things that I am certain of is that without your selfless, servant-hearted decision to donate plasma, I would not be here today. Because of you, my wife is not a widow, my children still have a dad and I get to live each day here forward as a gift from God. Thank you, thank you, thank you for giving of yourself to allow me to be here today.

Mitch



Thank the Donor®



To send an appreciation, visit Covid.ThankTheDonor.org or share this website with your patients and their families.