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Search goes on

Photo by Kevin King

Consistent fitness regimen, healthy diet are the closest you are going to get to 'Fountain of Youth'

By Kevin King

American author Mark Twain once said, "life would be infinitely happier if we could only be born at the age of 80 and gradually approach 18." Unfortunately, Spanish conquistador Ponce de León failed in his discovery of the "Fountain of Youth," and there is no magic formula in maintaining a healthy lifestyle and living a long life.

While you will read stories in this magazine of potential medical breakthroughs that help prolong the lives of stroke patients and those suffering with hypertension and how to stave off substance abuse, which can be a fast track to the grave, the truth of the matter is the root of good health and the closest we can get to Ponce's fountain is maintaining a healthy diet and fitness regimen.

Dr. Kimberly Pitts of Christus Family Medicine – Port Neches confirms that healthy diet and exercise offer a wealth of benefits for all of us.

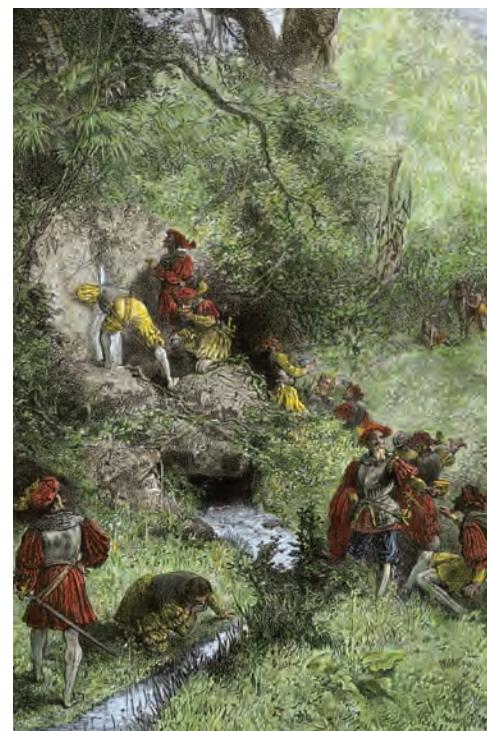
"Our regular American workweek is

too long and chock-full of stress," Dr. Pitts said. "Exercise serves as the only means that we have to alleviate our stress and deal with anxiety and challenges. We often assume we are too tired to exercise and that we need to rest prior to exercise. This is the exact opposite of what our bodies are telling us. We are mentally stressed and that translates to a sense of physical exhaustion. However, we really need to burn off our frustrations and stress through exercise."

And for those of us that think our regular strenuous daily activities associated with our jobs and just getting around are good enough, Pitts disagrees.

"All of us think the walking, climbing pulling, pushing, welding and all the other daily activities is good enough exercise. It is not! Our bodies are used to that stress and activity and therefore, it is not a source of exercise. The less we do, the sicker we become; the sicker we become, the less we do. This is a vicious cycle, and to break this, exercise is the best option."

Exercise does not have to be grueling or



19th-century German artist's impression of Juan Ponce de León and his explorers drinking from a spring in Florida while supposedly seeking the Fountain of Youth. Because there is no actual 'Fountain of Youth,' it's important to maintain a consistent fitness regimen and healthy diet.

Wikimedia Commons

exhausting; it just needs to be regular, Pitts said. Studies suggest 60 minutes three days a week is adequate to deal with health and wellness and an emotional outlet.

“Make the exercise fit your schedule,” Pitts said. “Don’t create unreal timeframes that you cannot sustain.”

With that said, there are several exceptional options in Beaumont when it comes to choosing a place to workout. In fact, the city arguably has some of the best gyms in Southeast Texas — Exygon Health and Fitness Club, the Christus Wilton P. Hebert Health and Wellness Center, World Gym, Planet Fitness and the newest edition to the group, Downtown Fitness, which is conveniently located, as its name suggests, right down the street from many businesses, the courthouse, the police station and iconic Jefferson Theatre.

These are some of the most popular workouts you may want to try. They are available at pretty much every gym we’ve listed above:



There are many great gyms to workout at in Beaumont. The newest edition to the group, Downtown Fitness, is conveniently located right down the street from iconic historical buildings such as the Jefferson Theatre, Hotel Beaumont and the San Jacinto Building, providing great scenery for your workout from the second floor of the gym. Downtown Fitness, which held its grand opening Monday, July 2, is at 515 Fannin in the old Dallas-Williams Furniture Co. building, across from Century Tower.

Photo by David Black



Photo by Kyle Swearingen

Hack Squats

Hack squats target the quadriceps muscles, or quads, on the front of your thigh. Hack squats also work the gluteus maximus, the largest muscle of your derriere.

Before using the hack squat machine, warm up your hips and legs with dynamic movements, such as body weight squats and lunges. To build strength, choose a weight that allows you to perform two to four sets of eight to 12 repetitions with good form.

Rest two to three minutes between sets and wait at least 48 hours between strength training workouts. To stretch your quadriceps, stand and pull your right heel toward your right buttock with your right hand. Place your left hand on a wall or other support to maintain your balance. To increase the stretch, draw your knee back. Hold for 10 to 30 seconds, and repeat with your left leg.

Source: *Livestrong.com*

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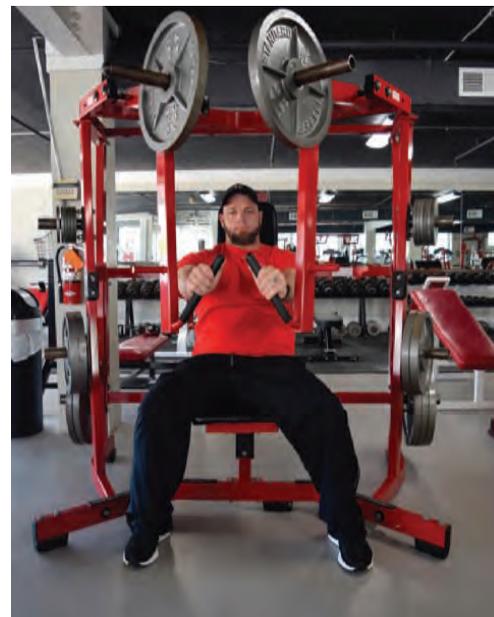


Stair Stepping

Photo by David Block

Because of vertical trajectory, climbing stairs requires more effort than walking on a treadmill, and sets you up to burn more calories. Stair steppers make the glutes, hip abductors and upper legs feel an additional burn — a definite bonus for many people, since firming up that backside is usually at the top of the list when it comes to fitness goals. To lose a pound of weight, you must burn 3,500 calories more than you ingest. The health-status.com calories burned calculator shows that a 140-pound woman working out on a stair step machine can burn calories at a rate of 420 per hour, or 7 calories a minute. With those numbers, she'd lose just under a pound a week if she did that daily, which adds up to significant weight loss over time.

Source: *livestrong.com*



Chest Press

Photos by Kyle Swearingen

If you are comfortable with the incline chest press, or even the dumbbell bench press, you shouldn't have a problem with the Hammer Strength chest press.

1. Start with your feet flat on the ground and your back flat against the inclined seat.
2. Take a wide grip on the handles to focus on the outer chest, or a closer grip to work the inner chest more.
3. Keep your elbows tucked (not flared) and raise the weight above your head until your elbows are just slightly bent, then return to the starting position and repeat.

Paired with a few other workouts on chest day, six sets of 10 reps on the Hammer Strength machine should make for a good upper body workout.

According to LiveStrong.com, since you're performing the same basic motion as a lever incline chest press, you're targeting the pecs with a Hammer Strength chest press. You're also engaging the triceps, anterior deltoids and biceps.

And best of all, unlike performing the inclined chest press with free weights, with the Hammer Strength Machine, you don't need a spotter!

Source: *livestrong.com*



Photo by Kyle Swearingen

Row Machine

Rowing is a full body exercise. Not only does it help tone your muscles, but it is also a great cardio workout as well. It's great for those of us over 40 who may suffer from joint pain because it has low-impact on our joints. Rowing burns calories fast. A vigorous 30-minute workout on a rowing machine can burn 255 calories for a person weighing 125 pounds, 316 calories for someone 155 pounds and 377 for an individual who weighs 185. Rowing also increases heart rate and oxygen consumption and if performed consistently over a long period of time can lead to improved cardiovascular function and can reduce the risk of heart disease and stroke.

Source: *livestrong.com*

Scenic workout

While cycling can be performed in the comfort of an air-conditioned gym on a stationary bike, for those of us who are more adventurous and just want to get outside, Cattail Marsh at Tyrrell Park is a great option for exercise. The 900 acres of wetlands offers eight miles of gravel levee roads for biking and is a wildlife refuge for a variety of aquatic mammals and more than 250 species of birds, offering great scenery while you ride. If you're ready to take a break after your workout, there's also a 520-foot boardwalk that offers great photo ops of alligators and a wide variety of birds. Make sure you stay hydrated!

Source: *Beaumont CVB*



Photo by Kevin King

FUEL FOR FITNESS

In addition to a regular regimen of exercise, a healthy diet can be just as important, according to Dr. Pitts.

“As for diet, I believe whole foods — real foods — are the way to go,” she said. “Fresh foods limit preserved foods. Meal plan and meal prep. It is not more expensive to eat well. A well-known fact is that the foods that are not as good for you seem to always have a coupon and be on sale. Thus you believe that eating well is more expensive.

“Buy in bulk. Cook and meal plan in bulk and you will save money.”

Eating enough to sustain your workday, play day and exercise is key, Pitts said.

“Eating less is not an answer,” she said.

“Our bodies are prehistoric, yet we live in a modern age. If you eat less, your body thinks you are starving and holds on to your calories in the form of fat. To avoid this, you need to make sure that your planned calorie limit is a net, not a gross amount.”

In other words, if you want to only take in 1,500 calories to lose weight and you are exercising, your net calories need to add up to 1,500, Pitts advised.

So if you exercise and burn 500 calories and you have only eaten 1,000 calories prior to exercise, you have 1,000 calories to make up for the day, to get to your net of 1,500 calories.

“This keeps your body burning calories because it knows no matter what, it will keep getting fuel. Water is key to keep the metabolism going. The weakest reflex in the body is our need for water often mistaken for hunger.

“So, at least 32 to 64 ounces of water daily, filtered, and if you are really savvy, alkalized (to help absorption). Keep these things in mind. Your body will do what it takes to keep you going until it is too toxic to continue. Why wait for that? Stay moving, eat right and drink enough water. ... Then, you can get away with doing a little of the excessive things: adult beverages, sweets, and the processed junk foods we need from time to time. Stay healthy — it doesn't have to be so difficult keep it simple.”

On page 8 are a few recipes we suggest for eating healthy.



‘Our regular American workweek is too long and chock-full of stress. Exercise serves as the only means that we have to alleviate our stress and deal with anxiety and challenges.’

— Dr. Kimberly Pitts, Christus Family Medicine – Port Neches

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FUEL FOR FITNESS

Mediterranean kabobs

broiled beef and chicken cubes flavored with lemon and parsley

Makes: 4 Servings

Prep time: 15 Minutes

Cook time: 10 Minutes

For marinade:

2 Tbsp olive oil

1 Tbsp garlic, minced (about 2–3 cloves)

2 Tbsp lemon juice

1 Tbsp fresh parsley, rinsed, dried, and chopped (or 1 tsp dried)

½ tsp salt

For kabobs:

6 oz top sirloin or other beef steak cubes (12 cubes)

6 oz boneless, skinless chicken breast, cut into ¾-inch cubes (12 cubes)

1 large white onion, cut into ¾-inch squares (12 pieces)

12 cherry tomatoes, rinsed

1 (4 oz) red bell pepper, rinsed and cut into ¾-inch squares (12 squares)

12 wooden or metal skewers, each 6 inches long (if wood, soak them in warm water

for 5–10 minutes to prevent burning)

1. Preheat grill pan or oven broiler (with the rack 3 inches from heat source) on high temperature.

2. Combine ingredients for marinade, and divide between two bowls (one bowl to marinate the raw meat and one bowl for cooking and serving).

3. Mix the beef, chicken, onion, tomatoes, and red pepper cubes in one bowl of the marinade and let sit. After 5 minutes, discard

remaining marinade.

4. Place one piece of beef, chicken, tomato, onion, and red pepper on each of the 12 skewers.

5. Grill or broil on each of the four sides for 2–3 minutes or until completely cooked (to a minimum internal temperature of 145° F for beef and 165° F for chicken). Spoon most of the second half of the marinade over the kebabs while cooking.

6. Serve three skewers per serving. Drizzle the remaining marinade on top of each kebab before serving (use only the marinade that did not touch the raw meat or chicken).

Nutritional facts per serving:

calories 202, total fat 11 g, saturated fat 2 g, cholesterol 40 mg, sodium 333 mg, total fiber 2 g, protein 18 g, carbohydrates 9 g, potassium 431 mg



Grilled romaine lettuce

with Caesar dressing

Makes: 4 Servings

Prep time: 20 Minutes

Cook time: 5 Minutes



1 slice whole-wheat bread

2 heads rinsed romaine and halved lengthwise

4 tsp olive oil

4 tsp light Caesar dressing

4 Tbsp shredded parmesan cheese

1 bag wonton strips

1. Preheat grill pan on high temperature.

2. Cube the bread. Spread in single layer on foil covered tray for a toaster oven or conventional oven. Toast to a medium-brown color and crunchy texture. Remove. Allow to cool.

3. Brush cut side of each half of romaine with 1 tsp olive oil.

4. Place cut side down on grill pan on stovetop. Cook until grill marks appear and romaine is heated (about 2–5 mins.)

5. Place each romaine half on large salad plate. Top each with one-fourth of bread cubes. Drizzle each with 1 teaspoon of light Caesar dressing. Sprinkle each with 1 tablespoon shredded parmesan cheese. Garnish with wonton strips.

Nutritional facts per serving:

calories 162, total fat 8 g, saturated fat 2 g, cholesterol 6 mg, sodium 241 mg, total fiber 8 g, protein 8 g, carbs 17 g, potassium 931 mg

New clinical trial for high blood pressure patients

By Ginger Broomes

A new clinical trial is underway that may help those with high blood pressure that's resistant to other forms of treatment. Dr. Rodolfo Sotolongo is not only a board-certified cardiologist at Southeast Texas Cardiology Associates in Beaumont, but over the last 20 years, his Southeast Texas Clinical Research Center (SET-CRC) has been a principal investigator in more than 100 clinical trials.

Clinical trials are vital to research new medical treatments and devices that may improve heart health.

"These are really important trials that have had either a yes or no answer to some of the major clinical questions in cardiovascular medicine," Sotolongo said. "This is, in my opinion, the most significant trial we have ever been invited to participate in, and we feel extremely honored and humbled to have been selected to be a principal investigator in this trial."

The trial is called the Calm-2 Study, which stands for Controlling and Lowering Blood Pressure with MobiusHD. Its ultimate goal is to make available to patients an implanted device that will amplify the body's natural blood pressure response in patients whose medication has not been effective.

"There is an extremely large percentage of patients whose blood pressure is not controlled with three medications. This trial is aimed at patients that are not at goal."

For patients whose blood pressure systolic is between 145 and 200, they are generally on three medicines – a thiazide diuretic, ace inhibitor and a calcium channel blocker. For patients to be considered for the trial, they must be on these three medications, but not more than five.

"Every 1 millimeter reduction of your systolic blood pressure reduces your risk of heart attack or stroke 2 or 3 percent," Dr. Sotolongo said. "When you see a trial that



Dr. Rodolfo Sotolongo pulls up an illustration on his computer explaining the theory of how the MobiusHD may help lower blood pressure in certain patients.

Photo by Kevin King

reduces your systolic blood pressure by 20 points, it reduces your risk of heart attack or stroke significantly, possibly by as much as 40 percent."

The Calm-2 trial centers around a minimally-invasive device, called the MobiusHD, designed to affect the baroreceptors, or pressure receptors (cells), in the carotid artery – to amplify those receptors which would then signal to the cardiovascular control center – blood vessels, heart and kidneys – to reduce blood pressure. This in theory would decrease strain on

the vessels, lowering heart rate, increasing kidney function, and would be a treatment in addition to the medicines patients are already on.

After extensive evaluation, Dr. Sotolongo's team at SETCRC was approved to be principal investigators, making them one out of only 30 centers in the United States and Europe found to have the qualifica-

tions to conduct such a trial.

During the clinical trial, some patients will get the implant and some won't, but both groups will assume that they have the implant. Every patient will get ultrasounds and scans prior to the implantation procedure regardless of whether or not they are getting the implant. The outpatient procedure would take place at St. Elizabeth's in Beaumont.

The trouble is finding patients who meet the stringent criteria set by the trial. As of press time, only one patient worldwide has met the criteria to be in the trial.

"It's like finding the Golden Ticket," said Giselle Mazzola, executive director of the Cardiovascular Foundation of Southeast Texas (CFST). "We are now in the patient recruitment phase."

Potential patients must be on three medications but no more than five, and must have clean, plaque-free carotid arteries. The selection process is designed to ensure the validity of the trial – that there are no "hiccups" that could affect the outcome needed for potential future FDA-approval.

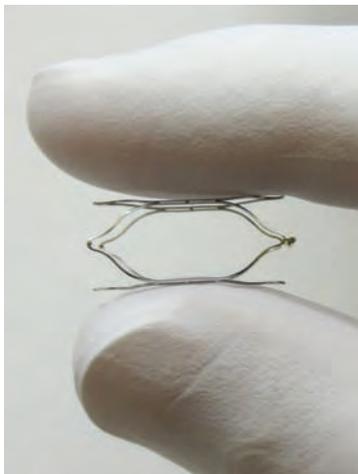


Photo courtesy of Business Wire

MobiusHD Implant

Junior League helps create playroom at Reaud Guest House

By Kevin King

Ladies from the Junior League of Beaumont spent their Saturday morning, July 21, creating a playroom for families with children who stay at the Reaud Guest House.

According to Maite Broussard, chair of the Provisional Class of the Junior League of Beaumont, the group was looking for a quick summer project to introduce new members to the group's mission of helping the community.

"Our focus at the Junior League is women and children in the community and helping that demographic. The Reaud Guest House, we know, really fills a need in the community in terms of helping families stay close to their loved ones when they're hospitalized," Broussard said.

Medical emergencies can disrupt a child's everyday life.

"Anything we can do to help children feel comfortable ... when something like this happens is something that we're interested in helping out with," she said.

The Reaud Guest House had a space with toys and books for children, but Reaud Guest House Executive Director Brooke Morrow said she wanted something that would bring even more comfort and happiness to the children who stay there.

"Families who stay with us often need a place for children to unwind after a long day in the hospital," she said. "The Junior League



Reaud Guest House Executive Director Brooke Morrow (far left, standing) and members of the Junior League of Beaumont pose for a photo in the Reaud Guest House's new playroom. Courtesy photo

shared in this vision and made it a reality. I could not be more grateful to the women who showed up that morning. They are extraordinary volunteers, and their efforts will comfort the many children who stay in our medical hospitality house."

The Junior League put together bookshelves, built a dollhouse, and arranged teddy bears and other toys donated to the facility to

create the playroom.

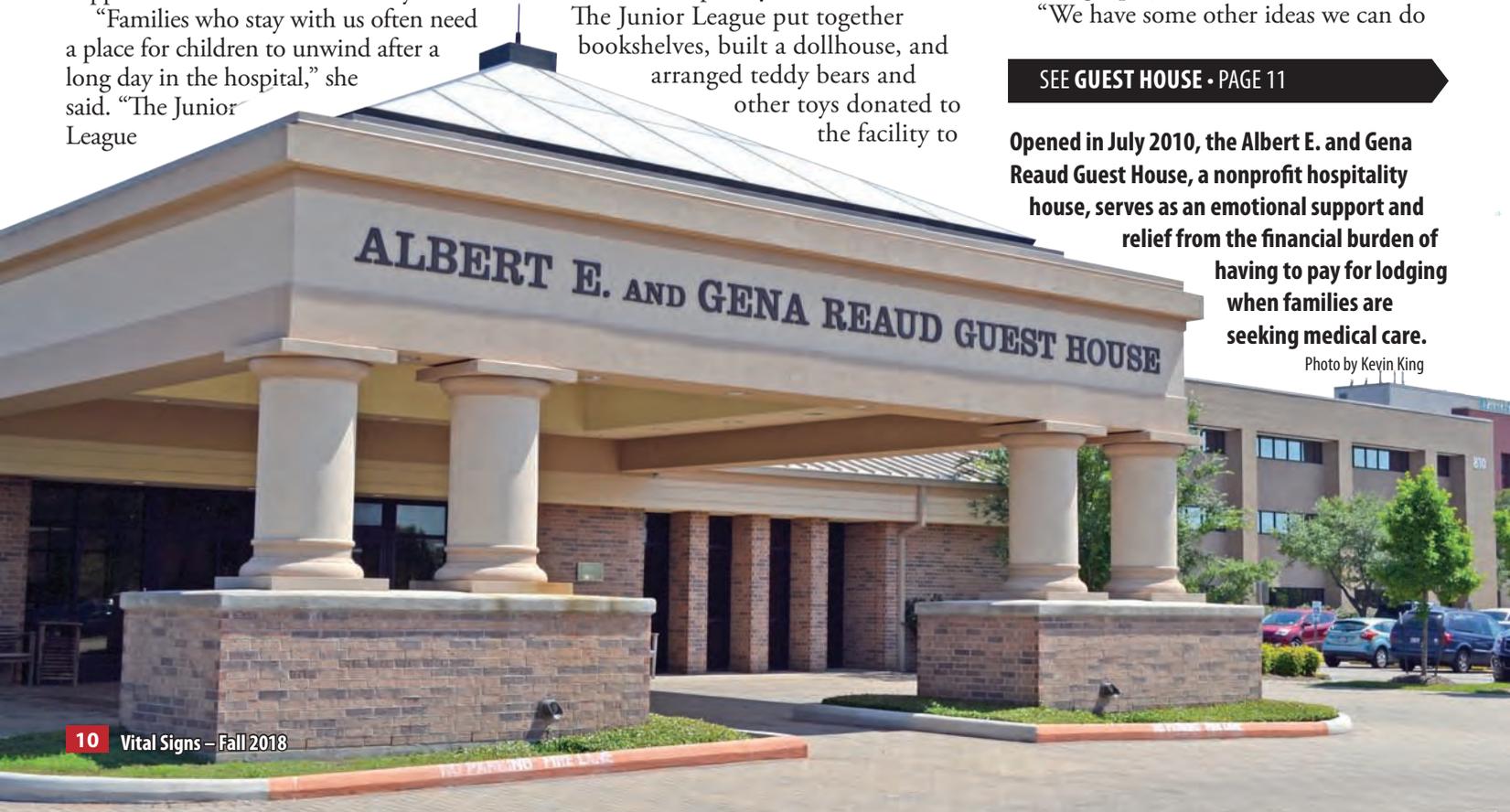
Broussard said the Junior League looks to return to the Reaud Guest House within the year to add some color to the room by decorating the walls and also building a playhouse for the kids.

"We have some other ideas we can do

SEE GUEST HOUSE • PAGE 11

Opened in July 2010, the Albert E. and Gena Reaud Guest House, a nonprofit hospitality house, serves as an emotional support and relief from the financial burden of having to pay for lodging when families are seeking medical care.

Photo by Kevin King



“The most difficult part in any clinical trial is finding candidates,” said Dr. Sotolongo, who estimates it could take three years to screen and approve all the candidates, and another year after “implantation” to perform follow-ups to see how the device has helped patients.

To qualify, patients must be between the ages of 18-80, be on three to five medications for blood pressure, have clear (plaque-free) carotid arteries, have a systolic blood pressure above 145, and be able to attend regular follow ups with Dr. Sotolongo. Patients will receive study-related care at no cost and may be reimbursed for travel and expenses.

To see if you qualify for this trial, contact Mazzola at (409) 363-3288 or gmazzola@setxcardiology.com.



The playroom provides teddy bears and other toys for children to play with during their stay — a way of keeping them distracted from the trauma of having a loved one in the hospital.

GUEST HOUSE • FROM PAGE 10

to the playroom to really make it welcoming for kids so that they have a place to play and create, even through a trauma or an emergency in their family,” Broussard said.

Morrow said the Reaud Guest House relies on groups like the Junior League of Beaumont for supplies and commodities that guests need during their stay. Those interested in donating can reach Morrow at (409) 212-6500.

The following items are needed at the facility: single serving breakfast items, snacks, water and juice; paper plates, cups and bowls; paper towels; toilet paper; laundry detergent and dryer sheets; dish soap; travel/hotel size shampoo, conditioner, soap, lotion, toothbrushes, toothpaste and mouthwash; office supplies, copy paper and stamps for guests; and other in-kind donations.

“Our wish list was developed to provide caring members of the community with a list of what our house needs,” Morrow said. “We want to make sure that guests who may come to us unprepared for an overnight stay have everything they need to be comfortable for as long as they are with us.”

Opened in July 2010, the Albert E. and Gena Guest House Shelter offers reduced rates for families from outside of the area who have loved ones in the hospital, as well as for cancer patients, so they don’t have to drive long distances to receive treatment. The Reaud Guest House is at 3120 College St. adjacent to Baptist Beaumont Hospital.

For more information, visit reaudguesthouse.org.

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Area hospital names new president

The Medical Center of Southeast Texas announced Monday, July 9, that Carl “Bo” Beaudry is its new president.

As president, Beaudry will oversee both the Port Arthur and Beaumont campuses of The Medical Center of Southeast Texas.

“I am honored to accept the position as president of The Medical Center of Southeast Texas. I look forward to expanding service lines, cultivating strong relationships in the community and building on the nationally recognized quality and safety standards of both Hospitals. As a Golden Triangle native, I am grateful for the opportunity to return home and serve our community with pride and compassion,” said Beaudry.

Beaudry was born and raised in the Beaumont/Port Arthur community. He graduated from Texas A&M University with a Bachelor of Science Degree and earned his MBA at Lamar University in Beaumont. Beaudry began his career at The Medical Center of Southeast Texas as an assistant accountant and moved on to managing a physician practice before becoming the associate administrator at



Southwest General Hospital in San Antonio. For the five years, he has served as chief operating officer, and most recently interim president at St. Joseph Medical Center in Houston.

Richard Gonzalez, past president of The Medical Center of Southeast Texas, will be taking on a regional role for Steward Health Care assisting the West Division president, Josh Putter. Gonzalez has been with the company for over 15 years, serving as president of The Medical Center of Southeast Texas since 2014. He oversaw the hospital’s expansion into the Beaumont market with the acquisition of Victory Healthcare, helped the hospital remain open during Hurricane Harvey and oversaw the implementation of an all-encompassing electronic health records system across all platforms of patient care.

“It has been a privilege to serve The



Carl “Bo” Beaudry

Medical Center of Southeast Texas and the Southeast Texas community,” said Gonzalez. “While I prepare for the next chapter in my career, I am confident that The Medical Center of Southeast Texas has a promising future with Bo at the helm.”



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TAN Healthcare offers mobile medical day clinics

TAN Healthcare, a growing Southeast Texas not-for-profit primary and preventive health center, is offering monthly mobile health clinics in August. Appointments are available for the entire family’s health needs including well checks, preventive care, sick care, chronic disease management, and screenings.

• Tuesday, Aug. 21, 8 a.m. – 2:30 p.m. at

Trout Creek Baptist Church, 1509 FM 1004, Trout Creek

• Tuesday, Aug. 28, 8 a.m. – 2:30 p.m. at Sacred Heart Catholic Church, 3730 FM 160, Raywood

At the Medical & More Mobile Health clinics, TAN Healthcare provides affordable, quality medical services and accepts private insurance, Medicare, and Medicaid. A sliding scale is available for those who are uninsured.



The mobile clinic team, led by Family Nurse Practitioner Anita Drake, FNP, can help with problems such as hypertension, diabetes, hepatitis C, HIV or other STDs, behavioral health and substance abuse counseling.

TAN Healthcare provides primary medical and behavioral health services Monday-Friday at its two health center locations in Beaumont at 1495 N. Seventh St. and Orange at 3737 N. 16th St. The centers also offer behavioral health counseling, patient navigation, and an onsite pharmacy, PharmBlue Texas, which offers easy packaging and home delivery. TAN continues its specialized care for individuals with chronic conditions such as HIV, Hepatitis C, diabetes, high blood pressure and obesity.

To make an appointment at one of the upcoming Medical & More Mobile Health Clinics, call (409) 550-1067. For more information, visit www.tan-healthcare.org.



Alone in this fight

Detox, residential facilities desperately needed in Southeast Texas amidst growing addiction problem

Photo illustration

By Kevin King

As addiction in the U.S. continues to grow — with the frequent introduction of never-before-seen synthetics and new cocktails of existing drugs hitting the streets compounding an already serious alcohol abuse problem — the need for chemical dependency treatment grows with it, yet treatment centers remain full. Nearly 64,000 Americans died from a

drug overdose in 2016 alone — more than three times the age-adjusted rate of drug overdose deaths in 1999, according to the Centers for Disease Control and Prevention. In 2016, an estimated 20.1 million Americans, or about 1 in 13 people aged 12 or older, had a substance use disorder. These staggering numbers forced even the president himself to take notice.

President Donald Trump issued a memorandum in October 2017 for the heads of executive departments and agencies to use all lawful means to combat the drug demand and opioid epidemic and declared a public health emergency.

While alcohol abuse disorder, also

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Donald Trump signs a memorandum in October 2017 for the heads of executive departments and agencies to use all lawful means to combat the drug demand and opioid epidemic, declaring a public health emergency. Photo courtesy of The White House

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known as alcoholism, is often looked at less harshly than hard drug abuse and wasn't officially declared a "disease" until 1991 by the American Medical Association (AMA), this problem persists.

According to a September 2017 study published by JAMA Psychiatry, when comparing the 12-month prevalences of alcohol use, high-risk drinking, and DSM-IV alcohol use disorder between 2001-2002 and 2012-2013, the number of adults who binge drink at least once a week could be as high as 30 million, greater than the population of every state save California.

Locally, a needs assessment by Region 5 reports there were 745 drug and alcohol-induced deaths between 1999-2015 in Jef-

erson County, 425 in Orange County and 177 in Hardin County.

The assessment states that in 2016, there were a total of 132 solid pounds, 33 liquid ounces and 203 dose units of opiates seized by law enforcement in Orange County and 69 solid pounds, 409 liquid ounces and 110 dose units seized by law enforcement in Jefferson County.

According to Vidor Police Chief Rod Carroll, there were 32 arrests for narcotics since January in the town of fewer than 11,000 residents. There were also 28 mental commitments, of which a substantial percentage were drug-related, Carroll said.

In 2014, EMS in Region 5 reported 787 drug and alcohol overdoses, and while this number was down from 2013, which had 794, it has drastically risen since the 256 reported in 2010.

According to Alcohol & Drug Abuse Council of Deep East Texas (ADAC) Clinical Director Amanda Selemon, while it's virtually impossible to help someone who doesn't want to quit abusing drugs or alcohol, even when a person finally does commit to getting help, the struggle to gain sobriety truly begins for Southeast Texans.

Selemon says Southeast Texas currently has no detox program for non-veterans — a service greatly needed in the area. While there is some help available, Southeast Texas residential facilities, unlike some in Houston, do not include medical personnel or detox, and, in fact, won't accept someone into their facility who needs detox until they've received it.

At ADAC, an outreach, screening, assessment and referral center (OSAR), regardless of ability to pay, Texas residents who are seeking substance use disorder services and information may qualify for services based on need.

OSARs like ADAC are the starting point for those seeking substance abuse treatment services.

The Unity Center in Beaumont is the largest residential center available in the area, offering 40 beds for the chemically dependent, but doesn't offer medical detoxification and only accepts males over the age of 18.

Photo by Kevin King



TABLE 57: REGION 5 DRUG AND ALCOHOL-INDUCED DEATHS (1999-2015) BY COUNTY

County	Alcohol Induced Deaths	Population	Crude Rate per 100,000	Age-Adjusted Rate per 100,000
Angelina	174	1,431,751	12.2	12.5
Hardin	177	887,601	19.9	20.1
Houston	58	396,364	14.6	13.3
Jasper	93	604,034	15.4	15.9
Jefferson	745	4,266,434	17.5	17.1
Nacogdoches	163	1,061,666	15.4	17.4
Newton	61	247,090	24.7	23.5
Orange	425	1,414,494	30	30.2
Polk	181	762,421	23.7	23.4
Sabine	33	178,812	18.5	17
San Augustine	28	151,404	18.5	20.4
San Jacinto	83	428,621	19.4	19.4
Shelby	77	432,027	17.8	17.6
Trinity	60	242,282	24.8	23.5
Tyler	67	360,664	18.6	18.4

The Texas Department of State Health Services (DSHS) Mental Health and Substance Abuse Division funds providers of mental health and substance abuse services who then assist those in need of such services.

“Everyone we screen, we do a financial eligibility on,” Selemon said. “That determines whether or not they are under the income level, which 9.5 out of 10 people we screen are under that income level, so the state pays for their treatment.”

In the last year, ADAC’s Beaumont office diagnosed 137 people with alcohol-use disorder, 71 with opiate addiction, and 32 people addicted to benzodiazepines such as Xanax.

These are the three addictions that require detox due to the danger presented by withdrawals from these substances.

Withdrawing from alcohol is especially dangerous and can lead to everything from psychological symptoms like anxiety and irritability to depression, tremors, seizures, severe confusion and even death. Most deaths from alcohol withdrawal are due to delirium tremens, an extreme form of alcohol withdrawal.

According to the article “Recognition and Management of Withdrawal Delirium,” published in the New England Journal of Medicine, “about 50 percent of persons with alcohol-use disorders have symptoms of alcohol withdrawal when they reduce or discontinue their alcohol consumption.”

This is why it is so important for them to go to a detox facility first, Selemon said.

Baptist Hospital in Beaumont shuttered its medical detox program in September 2017 after losing federal funding, forcing Region 5 patients seeking medical detox facilities to seek help in Region 6. The hospital launched a program for veterans and their dependents, however, on July 13.

The Texas Veterans Commission awarded a Fund for Veterans Assistance 2018-2019 Mental Health Grant to Baptist Hospitals of Southeast Texas in the amount of \$500,000. The project will serve adult veterans, surviving spouses and their dependents that are in need of voluntary medical detoxification from opioids, benzodiazepines and alcohol. While it’s helpful to those that qualify, it still does not help those who are outside of the veteran population.

“There really is a need for detox because we don’t have anything here,” Selemon said. “Basically the closest thing we have is Cenikor in Houston. That’s co-ed. You have Santa Maria in Houston for women. Now, there’s Gulf Coast Center in Houston,” but they are very limited on beds, she explained.

“Of course, there’s detox further out in Fort Worth, but we have a hard enough time getting people even to Houston to



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Woodlands Recovery Centers (WRC) Clinical Director Kim Arrington, Beaumont Mayor Becky Ames and WRC CEO Rick Matthews cut the ribbon Friday, June 29, on a new outpatient treatment center for the chemically dependent. Arrington's long-term goal is for Woodlands Recovery Centers to offer a full continuum of care, which includes detox, residential, outpatient and sober living.

Photos by Kevin King

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detox,” Selemon said. “Here, they can go to the emergency room, but they aren’t going to detox them. They’ll only stabilize them.”

Since the Baptist Hospital detox closed, a program has been established at Cypress Lakes Lodge, a residential facility in Woodville, but it only accepts private insurance and private pay. A majority of the cases that Selemon sees, however, are clients that do not have insurance.

And even the clients who do get screened and referred for detox outside the area by ADAC are put on waiting lists to get into those facilities, she said.

“It doesn’t matter where we send them. They are waiting weeks for detox. They could die in those weeks,” Selemon said.

Most local residential facilities ask chemically dependent people seeking help to first visit ADAC’s office at 755 S. 11th St. to determine whether they need detox and if they need financial assistance to get treatment, Selemon said.

Once they receive detox, unless the center offers residential services, they can return to Beaumont and seek treatment



ADAC Clinical Director Amanda Selemon, and Licensed Chemical Dependency Counselors Arthur Newman and Valenica Flores. ADAC is the starting point for those seeking substance abuse treatment services.

at a place like the Unity Center, where they will receive individual counseling, group counseling and education on how to maintain an alcohol/drug free lifestyle after discharge.

What’s the difference between detox, residential and outpatient?

“If you have three boxes, a big one, a middle one and a small one. Your big one is going to be a medical hospital with doctors and nurses and a psychiatrist. They can take care of a person who is

in immediate critical danger from drug withdrawal,” said Unity Treatment Center Residential Program Director Mary Ann Johnston. “We’re the next one down. We are counseling only in a residential setting. We don’t provide medical detox.”

Johnston said many people that show up to her residential treatment center don’t realize there are no detox services.

“My license says they have to be off of it for four days to be eligible to be admitted here, so they have to be medically

and psychiatrically stable to come to this residential program,” she said.

The cost for the 30-day intensive treatment program is \$3,355 a person, Johnston said.

The center offers programs ranging from 30-90 days. There is financial assistance available through the United Way and the DSHS.

The Unity Treatment Center only treats males 18 and older, however.

“There is nothing for women in this town,” said Kim Arrington, clinical director of Woodlands Recovery Centers (WRC), a new outpatient facility in Beaumont.

This is a problem because nationally, hospitalizations involving opioid pain relievers and heroin has increased 75 percent for women between 2005 and 2014, a jump that significantly outpaced the 55 percent increase among men, according to a new statistical brief from the Agency for Healthcare Research and Quality’s Healthcare Cost and Utilization Project.

Outpatient treatment is the most available service for the chemically dependent in Southeast Texas. The WRC outpatient program currently focuses on substance abuse treatment, outpatient morning and evening groups five days a week, mental health outpatient counseling, addiction assessment services and family counseling.

“The last little box would be your outpatient treatment program, where a person would continue to live at home and work and continue their job and attend counseling services at night,” Johnston explained.

There are several of these programs available in the area, including Spindletop Center’s Substance Abuse Treatment program, which provides outpatient individual, group and family counseling along with aftercare, relapse prevention, education and support groups. Unity offers outpatient programs for both men and women in Beaumont, Port Arthur and Orange.

Land Manor, primarily funded by the DSHS, Texas Department of Criminal Justice (TDCJ) and Texas Department of Assistive and Rehabilitative Services, is also enrolled as a Medicaid provider. They offer residential services but have very

Franklin House North on Concord Road in Beaumont is a residential facility for specialized females, which means women suffering from chemical dependency and with children under the age of 18.



The How Center, an SLH, has been open in Beaumont for almost 30 years, but is for men only.

limited space, especially for women.

Under the Land Manor umbrella of services, Franklin House South is predominately TDCJ, is for men only and has 8 beds, according to Selemon.

Franklin House North is for specialized females, which means women with children under the age of 18. The Melton Center is strictly TDCJ female clients that go through probation and parole.



Oxford House on Pecos is a Sober Living House for women with children, but has only eight beds.

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TABLE 52: EMS FOR OVERDOSE (DRUGS OR ALCOHOL), BY REGION¹⁰⁶

Region	2014	2013	2012	2011	2010
1	847	907	848	1,003	1,285
2	288	374	703	586	662
3	2,441	2,783	2,720	3,533	3,180
4	441	887	713	725	859
5	787	794	631	420	256
6	3,121	3,229	3,500	2,569	2,653
7	3,192	5,785	4,425	4,065	4,404
8	1,344	1,445	4,521	2,155	1,362
9	320	373	298	167	198
10	1,395	874	715	815	640
11	610	871	678	856	835
Texas	14,786	18,322	19,752	16,894	16,334



Are you struggling to control your blood pressure?

See if the CALM-2 Study is right for you



Are you, like millions of others, having difficulty lowering your blood pressure with medications? As you probably know, when high blood pressure can't be controlled, it increases your risk of serious health problems such as heart disease, stroke, and kidney failure.

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ARE YOU ELIGIBLE?

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What is the MobiusHD® device?

The MobiusHD is an investigational implant designed to lower blood pressure through a minimally-invasive procedure. A single, small incision is made in the upper thigh. A small flexible catheter is inserted, and then advanced to the carotid artery in the neck. The catheter is used to deliver a small implant that is similar to a stent (the MobiusHD® device) in the carotid artery, and the catheter is removed. Once placed, the MobiusHD implant is designed to increase signals from our body's "baroreceptors," specialized nerves that trigger the body's natural process to reduce blood pressure.



What is the CALM-2 Clinical Study?

Right now, doctors at select medical centers in the US and Europe are conducting a new research study to evaluate the MobiusHD implant and its ability to lower blood pressure (the CALM-2 Clinical Study). If you've been unable to lower your blood pressure and are already on medications, the CALM-2 Study may be right for you.

ARE YOU ELIGIBLE?

Frequently Asked Questions

1. What is the purpose of a clinical study?

Clinical studies (also called clinical trials) are used to learn about the safety and effectiveness of new medications, medical devices, and medical procedures. Although there are many types of clinical trials, all must conform to strict rules set by local regulatory authorities. These rules help protect the rights and safety of those who volunteer to take part in clinical trials.

2. Are there any costs involved in the CALM-2 Clinical Study?

If you choose to join the study, you will receive all study-related care at no cost. This includes the MobiusHD implant and procedure, as well as any follow-up visits to your study doctor's office required for the study. You may also be reimbursed for your travel and expenses to attend study visits.

3. How long does the study last?

If you join the CALM-2 Clinical Study, your participation will last at least 5 years. Following your procedure, you will return to your study doctor's office for 5 follow-up visits over the first year, and will then return for 2 visits per year over the next four years. These visits are an important part of the study, as they allow your study doctor to closely monitor your individual results and experiences.

4. What if I join the study and decide I do not want to participate anymore?

As with all clinical studies, your participation is completely voluntary, and you may choose to leave the study at any time.

5. Who is sponsoring the study?

The study is being sponsored by Vascular Dynamics, Inc. (www.vascular-dynamics.com), a medical device company headquartered in Mountain View, CA.

6. I am interested in learning more. What's the next step?

To see if you might be eligible for the CALM-2 Clinical Study, and to be referred to a study center in your area, the next step is taking the pre-screening questionnaire. Please [click here](#) to get started.

ARE YOU ELIGIBLE?

See If You Are Eligible

To see if you might be eligible for the CALM-2 Clinical Study, and to get connected with your local study center to learn more, please take the questionnaire below. If you prefer to take the questionnaire over the phone, please call 1-855-578-8390.



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"If you are a single woman without kids under 18, there's nothing in Region 5, period, except outpatient," Selemon said.

After detox and residential, many clients transition to Sober Living Houses or SLHs, which are places for chemically dependent individuals to go after they've received detox and residential treatment and have nowhere else to go.

The How Center, an SLH, has been open in Beaumont for almost 30 years, but is for men only.

"We don't advertise because we stay full," said Daniel Jean, director of the How Center. "Our capacity is about 30 people. We've always stayed full because we furnish room and board. Everything except tobacco." The charge to stay at the center is \$130 a week.

Because it is located in a residential neighborhood, if you're a sex offender or have a violent criminal history, you cannot stay at the How Center, Jean said.

"You have to pass a background check as well as an application and screening process," he said. "It's mandatory that they have a 12-step program, a sponsor and find employment, so they can get back on their feet and back into society."

Again, this is for men only. Just as there is a lack of residential treatment centers available for women in the area, there are limited SLHs for women as well.

Oxford House is a national 501(c) 3 that offers democratically run, self-supporting and drug free homes. There are two in Beaumont (one for women and one for women with children). Oxford House on Zavalla Drive has six beds, and Pecos Street, which is for women with children, has eight.

"Oxford House opened up in April. They were full in two weeks," Arrington said. "They have now opened a second house for women and children and they're full and it opened less than a month ago. Every time someone opens up sober living for women it fills up quickly."

Arrington's long-term goal is for Woodlands Recovery Centers to offer a full continuum of care for the chemically dependent, which includes detox, residential, outpatient and sober living. It's a dream she's had since she was 14, and it's something Southeast Texas desperately needs.



Detox and residential facilities are desperately needed in Southeast Texas, particularly for women.

Photo illustration



Photos by Ginger Broomes

Therapy for the tiniest of patients

By *Ginger Broomes*

There is a special kind of therapy taking place at Baptist Hospital in Beaumont.

Occupational therapy helps injured patients recover lost abilities to perform activities of daily living after an injury or impairment such as an on-the-job accident or a slip and fall. But there is a different kind of therapy that can save the lives of a hospital's youngest patients.

In the Baptist NICU, premature babies receive therapy to help them catch up on the development they should have received in the womb. Infants born at 34 weeks or earlier face many risks from premature birth, ranging from cognitive disorders to physical abnormalities.

"We are proud to be able to provide occupational therapy to our smallest patients," said David Parmer, CEO,



Kara Michaels feeds Madison Harmon.

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Elizabeth Banana with her baby, Jesus, Dr. Snehal Doshi, Sage Nicholson with her baby Deacon, and Kara Michaels

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Baptist Hospital of Southeast Texas. “It is an amazing process to watch these infants learn how to do the activities we all do on a daily basis: sleeping, eating, interacting with caregivers and exploring with their hands and eyes. By working with these infants during their developmental stages, we are making every effort to guarantee them the simple things we all take for granted: playing, learning and socializing.”

Kara Michaels, a neonatal Occupational Therapist at Baptist, is one of the few, if not the only, occupational therapist in Southeast Texas who is dedicated strictly to NICU.

“Baptist decided because it’s such a specialty, instead of having a therapist float up from another department, they wanted one (the NICU) department,” Michaels said.

Under the supervision of Dr. Snehal Doshi, neonatologist and director of the NICU, Michaels works with from five to seven premature babies daily.

“When you are born premature, you

don’t have all the reflexes you need to eat well or safely,” Michaels said. Pre-term babies often have the lungs as the last organs to develop, rendering them unable to coordinate how to feed and breathe at the same time. Michaels “teaches” the newborns how to feed, and to work the correct muscles at the right time. “Another big component is positioning. If a baby is staying flat on their back, it’s very stressful because they should still be in the uterus, curled up. We try to recreate the feeling of the womb to calm them.”

The NICU uses a special mattress to create a 360-degree surround for the baby, preventing positional deformities.

A big psychosocial aspect also provided by the therapy is skin to skin contact, as touch is vital to the newborn’s development, reducing their stress and allowing them to gain the much-needed weight lacking from premature birth.

“The babies are separated from their mothers,” said Michaels. “That’s extremely stressful to them and to the moms, as well, because we’re not biologically made to be separated at birth. Their brains are so plas-

tic – that neuroplasticity – so the way you touch them has such an impact on the rest of their life.”

The difference that this occupational therapy makes for premature newborns is staggering, yet there is a lifelong difference made in the lives of the parents as well.

Elizabeth Banana’s son, Jesus, born two months early, was in the NICU for three weeks.

“I would come here three or four times a day, because for me, it was like, it’s not fair, why is my baby in the NICU?” she recalled. “At the same time, I felt my baby was safe with the nurses and Kara. The stress was not as high as I thought it would be.”

Jesus was 4 pounds, 8 ounces at birth, but is now a healthy one-month old.

“No one wants to have a premature baby,” said Dr. Doshi. “When that need arises, that’s why we’re here. The resources in this area are fairly limited, so we try to do as much as we can early on, so we’ve

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Spindletop Special Olympics

Members of the Lamar University men's basketball team celebrated a Special Olympics State Basketball title with the Spindletop Center Raiders on June 15 at the Spindletop Center in Beaumont. It marks the second consecutive season the Raiders have locked up the title, and the second year the Cardinals have been invited to celebrate with them.

"We were excited to hear about Spindletop winning the state title again, and very honored that we were invited back to celebrate with them. It meant a lot to our kids last year to be a part of this, and our guys were excited to come back," said Lamar men's coach Tic Price.

The Raiders are slowly putting together a dynasty at the state level. They competed against more than 2,000 athletes that comprised nearly 150 teams to bring home the title.

— Chad Cooper

Photo courtesy of Lamar University

PREMIERES • FROM PAGE 20

got them going in the right direction."

Saige Nicholson's son, Deacon, was 8 weeks premature, weighing only 2 pounds. Now at five months old, he is reaching his normal development. Like Jesus, he is what Michaels calls another "graduate" of the NICU Occupational Therapy program.

"There aren't even words to describe how helpful it was to me," Sage said. "I can't imagine what it would've been like without Kara here."

"Because I'm dedicated staff, I don't have any of the other responsibilities the nurses have. I can sit down and take that time with the moms, and I've been a sounding board," Michaels said. "We've cried together, talked about all the difficulties (NICU) entails."

Sage agreed, telling Michaels, "The therapy you were able to provide us helped me so much. Dealing with NICU life is really difficult, and you helped us with that."

"The program, they're really encouraging," Elizabeth echoed. "I really appreciate it. I felt like giving up breastfeeding at one point. I was really stressed, and Kara sensed that and gave me a hug, and I felt better. That's something I appreciated. I'm just not a number; I felt like she was a sister."

"I really believe in what I do," Michaels said. "I can only imagine what these moms go through. This isn't part of any mom's birth plan. Nobody wants to have their baby in the NICU. There's a sense of loss with that because it's not what you want, and you're always thinking about it. The baby is my patient, but you can't really



The NICU uses a special mattress to create a 360-degree surround. Pictured is Journey Wallace.

separate mom and baby — they're a unit."

Discharge criteria is determined by Dr. Doshi, based upon the infants meeting developmental goals set by Michaels: feeding on their own, proper sleep positioning, and parents demonstrating that they can feed the infant properly. Once discharged, parents can get continued help whenever a need arises.

"With healthcare in general, there are cuts in occupational therapy funding," said Dr. Doshi. "We're never going to turn a patient away if a mom needs help with feeding. We give them numbers to the lactation consultants.

"I'm a parent too — and didn't realize it until I became a parent — someone is

trusting you with their child. It's a lot of faith that someone is placing in you, and you hope you do the best by them.

"When people think of a hospital, they think of a doctor or a nurse, not the ancillary staff that comes into play. A hospital is more than just doctors or nurses.

"By the time you've talked to them, they've gone through a healthy pregnancy to all of a sudden now you've got to take the baby from (them), and (they) have to trust whoever's going to come in and take care of the baby. (The) baby is 2 to 3 months early, and you have to tell them there's all these things because the baby's early. It's a lot of faith and a lot of trust and we're just glad they have that faith in us."

fluid movement

How a standard procedure is becoming a new healthcare trend

By Ginger Broomes

On the west end of Beaumont, tucked inside a strip mall on Phelan Boulevard, is a new clinic designed expressly for patients and their individual healthcare needs. Kare Infusion Center at 6755 Phelan Boulevard, Suite 46, opened in February of this year and has seen a steady stream of patients ever since. A group consisting of a medical doctor, anesthesiologists and pharmacists recognized a need brought on by high insurance deductibles and the high costs of getting infusions (IV treatments), either at a hospital or by going to a clinic in Houston.

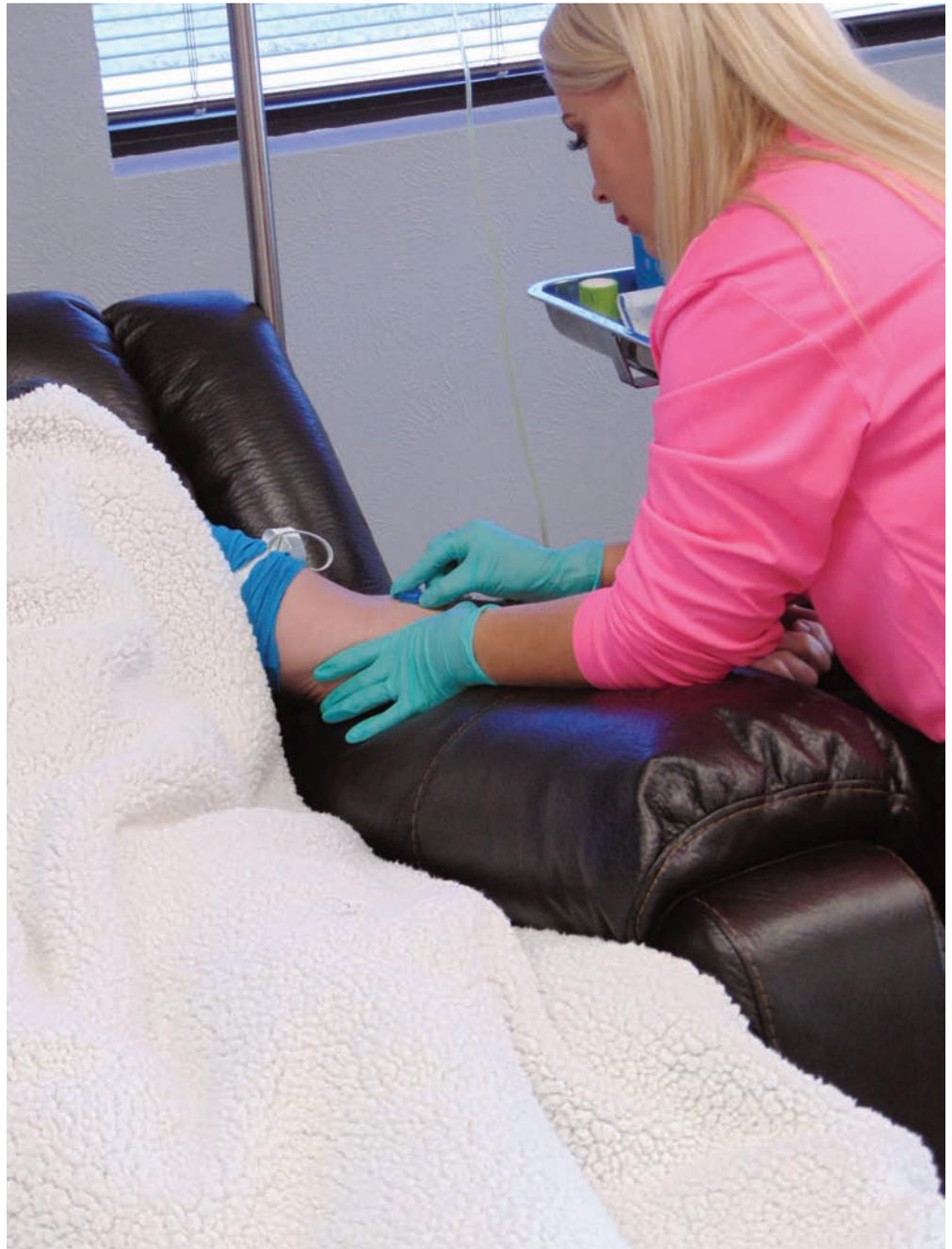
“We started looking around and asking questions,” said Dr. Gerald “Ray” Callas, one of the owners. “No one does infusion therapy except for in oncology or in the hospital in Houston. There’s no place like this, so we decided to go down this path, and probably in September of last year, got a group together and have been doing everything we can to help patients out.”

IV therapy is not new and has been used in hospitals for years. What is new is the trend of making it available on an outpatient and even non-medical basis. The idea is that fluids and vitamins are only absorbed half the time in oral doses, but almost 100 percent of the time in intravenous doses, according to Nurse.org.

“We do two types of scenarios; one is a walk-in type, where we do hydration, vitamin infusions, things that don’t require a prescription because we are all physicians here anyway. And the other is if someone has a chronic disease state, then we will get a prescription from their doctor; we will follow the guidelines of what the patient needs.”

Dr. Callas’ group saw that there was a market for this type of service, and they wanted patients to have the ability to stay in Beaumont and avoid paying the high insurance deductibles involved with receiving infusion therapy at a hospital.

According to the website NHIA.com (National Home Infusion Association), “infusion therapy involves the administration of medication through a needle or catheter. It is prescribed when a patient’s



Kare Infusion Center’s Lisa Callas, RN, administers an infusion treatment on a patient.

Photo by Ginger Broomes

condition is so severe that it cannot be treated effectively by oral medications.” At the Kare Infusion Center, it is delivered to the patient via an IV, much like when a patient is admitted to a hospital.

“We do biologics for disease states – immunodeficiencies, Chron’s disease, antibiotics. Some patients have been coming here for 45 days straight for

their treatment,” said Dr. Callas. “We do specialized drugs for opioid addiction recovery, depression, PTSD, migraines, and neuropathy.”

Some, like ketamine, can only be given by an anesthesiologist.

“We are one of the only sites between Lake Charles and Houston that can infuse ketamine,” Callas said.

Recently, a group of researchers from the Washington University School of Medicine in St. Louis conducted a meta-analysis to get a better understanding of how well ketamine performs when it is provided alone to treat acute pain in an ER setting. Their findings were published in the journal *Academic Emergency Medicine*.

After searching for relevant trials to analyze, just three met their stringent criteria. In all, the studies involved 261 patients. The researchers contacted the authors of the three studies, who provided them with access to more detailed, patient-level information.

The authors concluded that ketamine was not inferior to morphine. Importantly, “no severe adverse events were reported in any study.” However, there were higher rates of nonsevere adverse events with ketamine use.

“Ketamine appears to be a legitimate and safe alternative to opioids for treating acute pain in the emergency department. Emergency physicians can feel comfortable using it instead of opioids,” said Senior study author Dr. Evan Schwarz.

According to an article by *Medical News Today*, although ketamine has become infamous for its use as a recreational drug, ketamine is effective, relatively safe, and well-tolerated.

At Kare, there are also private rooms where certain infusions – such as the ketamine infusion – must be given due to the monitoring that must be done. In those rooms, there are cameras and a television complete with Netflix for the hours-long infusions, and the staff keeps an eye on the patients via monitoring stations, keeping an eye on heart rate, blood pressure and temperature. The availability of these rooms prevents patient from having to go to the ER or hospital for such a treatment.

Kare Infusion Center has a row of chairs resembling pedicure chairs along one wall, used mainly for the walk-in patients. Although the infusion trend began as a popular remedy for hangover cures, Dr. Callas said there’s more to infusion care than just treating those who drank too much the night before. There is a menu with a price list devoted to several different types of infusions for different ailments.

“The reason insurance companies are interested in what we do is we are decreasing costs, because going to the hospital for the same treatment bills at a higher rate,” Callas said.

He says the infusion therapy is 100

percent directed from medical care, and that his group does a lot of research. If a patient is already established with a physician, they don’t take over that care, but are rather an extension for the physicians that don’t have this capability in their office. The clinic sees walk-in patients but also gets many of their patients from physician referrals, maintaining constant contact with that physician during the treatment of the patient.

“Since we have a pharmacist on staff as part-owner, it’s very easy for us to get the medicine we need, and to maintain such a high standard that our facility has — something no one else has,” Callas said.

While Kare Infusion Center wants to be known as primarily a medical facility, there has been a national trend among celebrities in recent years using it as more of a spa treatment. Celebrities such as Madonna, Kim Kardashian and Rihanna boast about the benefits of their own infusion therapies – primarily vitamins, electrolytes and amino acids that promise to give their skin a youthful glow, boost energy and aid in weight loss – and even Adele has boasted of receiving her own treatment prior to a performance at the Staples Center in Los Angeles, according to *Shape.com* and *Hollywoodreporter.com*.

For walk-in clients (those not referred to the clinic from physicians), there are a variety of treatments and costs available, ranging from \$85 for a general hydration IV (i.e., hangover “cure”), up to \$150 for an infusion said to relieve stress, fatigue and elevate mood. There are also combinations available for athletes and those looking to lose weight.

Most of these procedures take only 20 minutes. Dr. Callas says many regulars come in on their lunch hours for these treatments. Bachelorette groups have also booked treatments, holding private parties complete with wine and cheese service.

But are IV treatments safe? The re-

search so far is inconclusive and seems to depend upon the regulation of the IV treatment center itself and/or a placebo effect, according to doctors and other experts cited by CBS News. Yet many people swear by them. One of Kare Infusion’s regular clients is a runner who had just been to get his latest infusion before his next triathlon.

Another patient, Tammy Anderud, said she had a treatment two weeks ago after suffering from a dull headache that lasted about three days.

“My children had been sick for several days and between lack of sleep and poor eating, I knew I was getting sick.” After getting a liter of B12, vitamin C, an anti-inflammatory and some antacids, she said she felt normal in about 20 minutes.

“Headache was gone, and my energy was back,” she said.

Dr. Callas says this is no spa but a certified medical clinic. A physician is

on staff every day, along with licensed nurses. He says Kare is in network for almost all insurance providers and Medicare, and had to be cleared by the FDA, registered with the secretary of state, Texas Medical Board, and the Nursing Board. By accepting insurance, the clinic agrees to rigorous contracts with the insurance companies that accept them. The physicians on staff also continue to practice in hospitals in the Southeast Texas region.

He has even turned away patients if he felt that the treatment would be detrimental to them.

“We have told people we can’t do certain things (without their own physician’s prescription),” he said. “If someone said they had a deficiency and (our lab work) determined they didn’t.”

Kare Infusion Center has the ability to pull on-site lab work.

“We recently prevented a 2-year-old from being admitted (to the hospital) due to dehydration from chronic tonsillitis,” Callas said. “We have seen patients from all ages, anywhere from 2 to 90.”



‘Since we have a pharmacist on staff as part-owner, it’s very easy for us to get the medicine we need, and to maintain such a high standard that our facility has — something no one else has.’

— Dr. Gerald “Ray” Callas, co-owner,
Kare Infusion Center

NEW APPROACH

Baptist Hospital chosen as initial site for study that may have global implications, impact future of treating stroke patients

By Kevin King

Baptist Hospital in Beaumont has been chosen as the initial site for a clinical study involving its stroke patients. The TRUST study is sponsored and monitored by Cerevast, a medical technology company from Washington State that develops medical devices for acute ischemic stroke.

“This is a very proud moment and it’s a good thing for our community,” said Kellie DeMary, administrative director of Emergency Services at Baptist Hospital in Beaumont. “This will help us to take care of these patients even better.”

Cerevast, Dr. Andrew D. Barreto at Memorial Hermann – Texas Medical Center (TMC) in Houston and other medical professionals involved in the study will evaluate the Aureva Pulse as a therapy for Baptist’s stroke patients, who do not

have immediate access to mechanical thrombectomy and must undergo lengthy transport times to receive this treatment at Hermann Memorial hospitals in Houston. These patients are usually transported by air medical services to receive a mechanical thrombectomy.

Ischemic strokes happen when a blood clot (thrombus) or a fatty deposit blocks an artery supplying blood to the brain. Mechanical thrombectomy is a procedure in which a long catheter is used to physically break up the clot. This represents a newer device-based approach to treating ischemic stroke that has been shown to be highly effective at removing large vessel occlusions. However, because this procedure requires specialized facilities and trained medical staff, the majority of mechanical thrombectomy cases performed in the United States are limited to a small percentage of primary stroke centers and approximately 125 Joint

Commission certified comprehensive stroke centers, such as TMC in Houston.

Stroke patients are frequently admitted to outlying community-based hospitals without the required facilities or capabilities to perform mechanical thrombectomy, forcing transport to a comprehensive or primary stroke center following the initial diagnosis and initiation of tissue plasminogen activator (tPA), clot-busting agent used in

the treatment of heart attack and stroke. These transfers often involve significant time delays during which brain tissue remains deprived of oxygen.

Since being approved by the U.S. Food and Drug Administration in 1996, tPA remains the only approved drug in the United States for the treatment of ischemic stroke, according to an article published in the U.S.

National Library of Medicine National Institutes of Health. Although tPA is generally effective at dissolving smaller blood clots, it is only effective at dissolving larger proximal vessel occlusions in 15-25 percent of all cases, several studies have shown.

Barreto said a previous study published in the New England Journal of Medicine found that using ultrasonic waves, like those the Aureva Pulse uses, along with tPA tripled the effectiveness of dissolving blood clots in stroke patients.

“The ultrasound helps tPA work better, or the ultrasound may vibrate

the clot and break it up better than tPA alone,” Barreto said.

By breaking up these clots in a more effective manner, strokes could be smaller and patients could have less disability.

“It could save lives or reduce disability,” Barreto said.

Cerevast claims the Aureva Pulse, a device that is placed on the head almost like a king’s crown, represents a first-in-class stroke treatment device designed to address this treatment gap.

“Used in combination with tPA during the acute phase of ischemic stroke to help



‘The ultrasound helps tPA work better or the ultrasound may vibrate the clot and break it up better than tPA alone. It could save lives or reduce disability.’

— Dr. Andrew D. Barreto, Memorial Hermann – Texas Medical Center, Houston



Casey Adams, an RN in the Baptist Hospital ER in Beaumont, wears the Aureva Pulse device during a demonstration July 19.



Cerevast Chief Operations Officer John Alleman trains Baptist Hospital Beaumont staff on how to use the Aureva Pulse.

Photos by Kevin King

break-up blood clots and restore blood flows to the ischemic regions of the brain, the device consists of the ultrasonic head-frame that properly orients the ultrasound transducer into the proper location on the patient's head and a control box that generates the ultrasound signal and provides the user interface controls," a release by the company states.

According to Cerevast, features of the device enable the ultrasound to be directed to the target region of the brain without the need for a trained ultrasound technician to deliver the therapy. Based on the portable nature of the device, therapy can be administered while stroke patients are undergoing transport via ambulance or helicopter to a primary or comprehensive stroke center to receive thrombectomy.

Baptist is one of around 20 U.S. medical facilities whose patients may consent to the study. If successful in the United States, the study will be expanded to more than 70 medical facilities worldwide likely in Europe, Eastern Asia, and South America, said Joyce Su, director of Clinical Affairs for Cerevast.

Beaumont is one of the "spoke" hospitals in the southeast Texas region that feed into the hub at Memorial Hermann – Texas Medical Center (TMC) in Houston, Su said. "One of the region's leading stroke neurologists, Dr. Andrew D. Barreto at TMC, is an outspoken proponent of using ultrasound to enhance the clotbusting effect of tPA for stroke. Dr. Barreto provides telemedicine neurology services to many outlying hospitals in Southeast Texas,

including Baptist (in) Beaumont. Dr. Barreto wanted TMC to be a part of the TRUST trial and he specifically requested that Baptist Beaumont be the first spoke site in the trial, which they have graciously accepted to agree to participate."

The hospital hosted a presentation by Cerevast to introduce and train medical staff to use the Aureva Pulse and to educate staff on the study and what their role and the role of patients who agree (possibly through family members who are legally designated to make medical decisions for them on-site) to participate in the study.

"Cerevast Medical is exceedingly pleased that Baptist Beaumont, Hermann

Memorial TMC and Dr. Barreto have agreed to work on the study," said John Alleman, Chief Operations Officer at Cerevast. "We simply could not ask for a better group of professionals to work with. We believe that this therapy can provide a substantial life-saving benefit to stroke patients and we are lucky to have a champion like Dr. Barreto."

Su also wanted to stress that Dr. Barreto has no financial ties to Cerevast Medical nor has derived any financial benefit in assisting with the study.

Cerevast hopes to have the lead-in phase of the study completed in early 2019 and then complete the subsequent primary phase in late 2020.



Aureva Pulse



Lori Wenner's personal essays, which she used to help her grieve after her husband died of colon cancer nearly a decade ago, have been published in several scholarly journals.

Photos by Kevin King

Journaling to heal

By Kevin King

When you think of treating cancer patients, a pen and notepad usually aren't the tools you expect a doctor to offer.

Baptist Hospital in Beaumont, however, utilizes journaling to help its patients relieve stress through writing and documenting their struggles and triumphs during their battle with the C word.

The idea of journaling as a therapy for cancer patients at Baptist Hospital is the brainchild of Lamar English professor Dr. Melissa Hudler, a friend of Todd Senters, service line administrator of oncology services at the Baptist Cancer Center.

"She said, 'I have an idea I want to run by you,'" Senters explained. "'What do you think about doing some sort of journaling club for those who are diagnosed with cancer?'"

"It's a really fascinating idea," Senters continued. "The more we talked about it, the more that things just sort of stuck and it really resonated ... that this was something we not only should do but needed to do."

Senters said the hospital was finding poems,

letters and drawings by cancer patients left for the staff, or "they would say, 'Hey, I've written this, do you mind if I share this story with other patients?' ... We've even had patients paint murals on walls and those sort of things because it was cathartic for them."

Social psychologist, author and University of Texas professor James Pennebaker pioneered the theory in the 1980s that expressive writing could be therapeutic.

"Writing about emotional upheavals is beneficial for mental and physical health for a number of reasons," Pennebaker told Vital Signs. "Merely acknowledging an upsetting event you've not talked about makes the experience concrete and real. Labeling your emotions associated with an event has also been found to affect brain processing causing people to

Lamar University professor Melissa Hudler hopes to launch a journaling group for cancer patients at Baptist Hospital this fall.



better understand why they are feeling the ways they are.

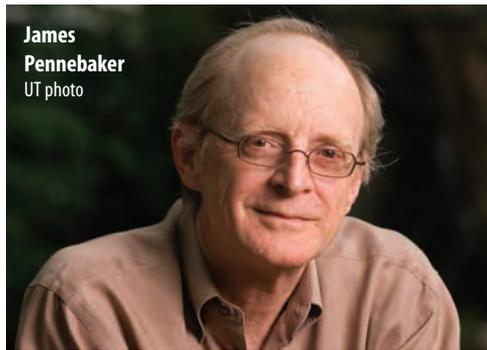
“Translating the experience into words helps people to organize a complex event,” he continued. “Very often, people don’t realize how an upheaval has touched every part of their lives. Writing brings the entire experience into focus in a way that just ruminating can’t do.”

Pennebaker also pointed to several studies that have shown how writing clears the mind.

“After writing, they have greater working memory and are able to think more clearly about issues. They also have a greater attention span since they are no longer dwelling on their experience,” he said.

After writing, people sleep better, as well, according to the member of the Academy of Distinguished Teachers.

“Sleep is known to be associated with more effective immune function, and lower levels of depression,” Pennebaker said.



Journaling can help a person become more extroverted.

“Studies have found that after writing, people spend more quality time with others,” he said. “They laugh more and are more socially engaged. In all likelihood, they are less defensive and don’t feel the need to be on guard the ways they were before writing.”

Hudler, who hopes to launch the journaling group for cancer patients this fall, said she became interested in the idea while working on her dissertation for her PhD in Renaissance Studies.

“I was reading some articles on trauma theory, which was related to some of the literature that I was looking at for my dissertation. ... I discovered this whole field of medical humanities, narrative medicine and writing therapy,” Hudler said. “Since my background was in writing as far as teaching and what I enjoy doing myself, I got really interested in the writing therapy.”

Senters said the hospital does not set standards for patient journaling and, instead, allows them to express themselves freely.



Beginning this fall, Baptist Hospital’s Cancer Center will be offering a ‘journaling club’ for cancer patients who wish to open up through writing.

“It doesn’t have to look like anything in particular, but yet it’s meaningful to the person who wrote it,” Senters said.

Not only will the journaling club help the patients themselves, but it will also allow patients to help each other. Patients who might not normally open up will feel more comfortable doing so after hearing other patients’ stories that are sitting right next to them, he stressed.

Journaling can also be beneficial to caregivers, spouses and other family members.

Hudler, who said she plans to bring patients other writers’ works such as the personal essays of Lamar University nursing instructor Lori Wenner.

Wenner’s personal essays, which she used to help her grieve after her husband died of colon cancer nearly a decade ago, have been published in several scholarly journals.

Wenner said Rohn’s death left her to raise three daughters by herself and liquidate his photography business. Seeking an outlet for her grief, she began attending creative writing workshops in Houston’s Museum District.

“That was my time to get away,” said Wenner, who was an RN in the NICU at Christus – St. Elizabeth hospital for nearly 32 years prior to becoming an instructor at Lamar.

During the process of mourning for her husband, for the first time she also began to mourn their daughter, who had died years before from sudden infant death syndrome (SIDS).

Not only did writing help her heal, but it also led to her being published in several scholarly collections of personal essays.

Wenner’s surviving daughters Caitlyn,

Jillian and Zoe have all gone on to successful careers or are currently attending college, and Lori is remarrying.

Journaling helped Wenner stay strong during a difficult time in her life, much like the oak tree she describes in one of her favorite personal essays “The Major,” which was published in Concho River Review.

In her memoir “The Long Goodbye,” Meghan O’Rourke notes, “The people we most love ... become a physical part of us, ingrained in our synapses, in the pathways where memories are created.”

“I understood this wisdom soon after Rohn’s death; his being had permeated my brain and my heart, spreading into me like so many tiny roots,” Wenner writes. “Death did not silence his spirit. When the girls misbehaved, I heard his voice: ‘Don’t you put up with that! Don’t let them talk to you that way!’ When I began dating, Rohn sometimes counseled me. Once, as I walked through the hospital parking garage alone, lost in thought over two men I was considering dating, I stopped and burst into loud laughter at Rohn’s response. As if he were standing next to me, I heard him say, ‘That’s right, baby! It’s gonna take at least two men to replace me!’”

“With time, Rohn’s voice faded as I faced difficult decisions and new experiences alone. I knew what Rohn would do or say in almost any situation, but absent his physical presence, my own thoughts and feelings emerged with increasing clarity. I began to pursue writing and international travel, and with time, became as adventurous as he’d ever been. Through it all, I distinctly heard him cheering me on. I still do.”

Wet nose, wagging tail therapy

By Sharon Brooks

The Medical Center of Southeast Texas recently introduced a program that pairs patients with therapy pets to help promote the “PAWSitive” and healing atmosphere always encouraged at the community hospital.

SETX Paws 4 Love therapy pets will be taking time to visit patients on the hospital campus as part of the Medical Center’s new P.E.T. (PAWSitive Encounter Therapy) Program, an animal-assisted interaction program.

The Medical Center of Southeast Texas launched the innovative, hospital-wide pet therapy program at a kick-off event at the facility June 18. The program features handlers and their animals certified through either The Delta Society or Intermountain Therapy Animals in AAI (Animal Assisted Interaction).

Tammy Lilly, director of education at the Medical Center, said, “We have had some terrific AAI (Animal Assisted Interactions) resources, such as Christie Wolfe, a wound care and hyperbaric RN who volunteers with SETX Paws 4 Love. Christie’s input has been invaluable as we’ve pioneered our new P.E.T. Program. Many hands have helped us create this program and prepare for launch.”

The Delta Society and Intermountain Therapy Animals are two nationally recognized non-profit organizations that ensure pet and handler members

have successfully completed training and testing to participate in AAI. The Delta Society, which was founded in 1977, is a leading organization in connecting people with specially trained animals. The organization coordinates millions of therapy animal visits per year. Intermountain Therapy Animals is

celebrating its twenty-first year of animal-assisted therapy services. The organization services individuals in a wide range of settings, from hospitals and psychiatric facilities to schools and libraries.

“The new pet therapy program will help us provide a higher level of care to patients in our community,” said Richard Gonzalez, Medical Center of Southeast Texas president. “We are excited to enhance the therapeutic environment for our hospital’s patients and visitors beginning this summer.”

Chief Nursing Officer Debbie Vaughn echoed Gonzalez’s excitement and said the P.E.T. Program would benefit both patients and medical center staff.

“Our PAWSitive encounter therapy is going to mean so much to our patients and our staff,” Vaughn asserted during the June 18 kick-off event. “There is evidence out there that it does improve the outcomes of our patients and our staff.”

“Staff can have a really rotten day, which we all know every once in a while we all do have a rotten day, and you see one of these beautiful creatures and you can just feel the stress melt away.”

Education Director Lilly agreed, and said that scientific research and data provide proof of the effectiveness of similar programs across the nation.

“Our mission at the Medical

Center is really to provide compassionate care and quality care,” she explained. “When we did the research and we looked into it using the animals and the animal-assisted activities, it truly is evidence-based practice, and we think it’s going to improve the outcomes of our patients, improve their satisfaction and it’s also going to improve morale for the staff and support them in providing care for our patients.”

Lilly says she too is affected PAWSitive by the presence of the therapy pets.

“They bring me joy, so they can’t help but bring our patients and our staff joy,” Lilly shared. “It’s really about the community we serve. When they’re here and they’re in their worst moments, this is an opportunity for them to feel the love of an animal. You can’t help smile when you see these dogs.”

Mayo Clinic staff asserts that animal-assisted therapy programs “help people recover from or better cope with health problems, such as heart disease, cancer and mental health disorders.”

“After the visit, you realize you’re smiling,” suggests an article about the topic on the clinic’s website.



Niesy Bevilacqua and Chili



Sara Gubala and Kennedy

Christie Wolfe and Sarge

Using data from studies by John Hopkins University, the American Heart Association, the American Journal of Critical Care, the American Journal of Alzheimer's Disease and Other Dementias and other sources, UCLA Health compiled a list of benefits associated with animal-assisted therapy in treating both mental and physical health ailments. According to their findings, "The simple act of petting animals releases an automatic relaxation response. Humans interacting with animals have found that petting the animal promoted the release of serotonin, prolactin and oxytocin – all hormones that can play a part in elevating moods."

In addition, the research indicates that animal-assisted therapy can lower anxiety, help people relax, provide comfort and increase mental stimulation while also lowering blood pressure, improving cardiac health and diminished patients' overall physical pain.

SETX Paws 4 Love President Niesy Bevilacqua says she has seen the benefits of animal-assisted therapy firsthand.

"People definitely enjoy it," she posited. "We have a lot of neat stories. There is a lot of medical research and evidence to support the positive impacts of the program, but we've seen it with our own eyes. We've gotten to watch people's responses."

She related a story of a patient at a local facility who was struggling with recovery.

"We visited a lady at Baptist Hospital many years ago," Bevilacqua recalled. "My son brought his therapy dog. ... There was a lady who'd had a hip replacement, and she just wasn't making any progress. She wasn't doing very well. But then she heard there was a dog. She said, 'Bring him in; I want to see him. Put him up here on the bed.'"

Bevilacqua said they were a little hesitant to place the 60-pound dog on the bed with the injured woman, but the animal was well-trained and very good-natured.

"We put him up there, and he crawled so sweetly to her. She sat there, and she just petted him and she loved him. We just had the nicest visit with her."

But, she said, "The thing about hospitals is, patients go home and we don't see them again." So, she and her son did not immediately realize the impact the visit with the dog had on the patient. Months later, however, a woman from her church said she had been approached by the patient's daughter who passed on her deep appreciation to Bevilacqua, her son and his dog.

"She said, 'When you brought that dog, mom started missing her dog and she decided that she was going to get well. She started doing everything she was supposed to do because she wanted to go home and be back with her dog.' It gives me chills. Just those few minutes that we spent with her inspired her that she had to do what she needed to do – go through the pain and whatever else – to get back to her dog. That was a really cool story, but I could tell those all day long."

The dogs (and their handlers) are trained and vaccinated, said Wolfe, who will be bringing her dog Sarge to the center for visits.

"We want to assure you that we will have proper identification, the dog will be properly identified, the dogs have had their shots – and we've had our shots," Wolfe smilingly told staff.

She said the handlers know how their dogs communicate and "listen" to them to assess their needs, as well as the patient's.

"We're responsible for our animals," she said. "If we go in for a patient visit, we can tell when our dog wants to go to the bathroom or when they have had enough, and we are always an

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LIT Dental Hygiene Program takes mission trip to Philippines

The Lamar Institute of Technology Dental Hygiene program recently traveled to the Philippines to help underprivileged people in the country learn about dental care.

The Philippines, a Southeast Asian nation in the Western Pacific, is comprised of more than 7,000 islands.

The trip was the brainchild of Dr. Kristina Mendoza, a 2011 graduate of LIT's Dental Hygiene program, faculty member, and practicing dentist from the Philippines.

Mendoza also helped launch a new Dental Assistant program at LIT in June.

This is the first-ever medical mission trip made by the college in school history.

The unsung heroes in this story, LIT program Director Debbie Brown said, are Dr. Mendoza and her Filipino family, who helped finance some of the trip, partnering with the Philippines Knights of Columbus and the country's Mental Health Association's Lipa-Batangas Chapter.

The group, consisting of faculty members Mendoza, Brown, Michelle DeMoss, Lisa Harrell and Lori Rogers, adjunct in-

structor Tami Browning and student Ken Baxley, stayed with Dr. Mendoza's family, who also helped finance meals.

Mendoza's aunt is a psychiatrist in the Philippines, and she helped arrange the group's visit to the mental health association.

They visited three locations including the SOS Children's Village in Lipa City, an orphanage; the Philippine Mental Health Association's Deaf and Hard-of-Hearing Community; and the House of Our Lady Guadalupe, a home for abandoned elderly. Brown said they taught the residents how to brush their teeth properly and floss, applied fluoride varnish and assisted dentists extracting teeth.

She said they planned to make future mission trips. LIT's Dental Hygiene Department received certificates of appreciation from their mission, which Brown said, they are framing and hanging in the dental clinic.



Courtesy photos

PET • FROM PAGE 29

advocate for our animals. We are trained through our organization to open and close a patient visit ... and how to handle that patient visit. We will be doing exactly what the hospital tells us to do to be in compliance to be here, but what supercedes that is our dog. We do listen to our dogs; we know the signs to look for. If the dog's ready to end the visit, then guess what? The visit is over because we are

advocates for our animals."

Therapy dogs are different from service dogs, Bevilacqua said, explaining that people should not approach service dogs wearing identifying vests as the action could upset the handler and distract the dog from doing its job. Therapy dogs sometimes wear vests or shirts, but they usually indicate in writing that they dogs may be petted. Bevilacqua, who visits patients with her dog Chili, says just ask to pet the animal because "he'd probably really enjoy it."

Medical Center Marketing and Public Relations Director Katie Celli said she is pleased the SETX Paws 4 Love group will be participating in the hospital's new P.E.T. Program.

"This is definitely going to be a benefit to our patients as well as our staff," said Celli. "We're so excited that they decided to present this program to our hospital."

The Medical Center of Southeast Texas is located at 2555 Jimmy Johnson Blvd. in Port Arthur.



Courtesy photos

Congratulations! It's a ... manikin?

LSCPA to receive birthing simulator equipment for its nursing students

By **Kevin King**

Lamar State College Port Arthur President Betty Reynard announced that the college has been approved to receive a Jobs and Education Training (JET) Grant from the Texas Workforce Commission in the amount of \$169,494. Dr. Betty Reynard made the announcement at the Greater Port Arthur Chamber of Commerce Leadership Breakfast on Tuesday, July 24.



Betty Reynard

The grant will be used for the school's nursing program to enhance its simulation lab, Reynard said.

LSCPA's Director of Allied Health Department Shirley MacNeill said she is excited about the new high-fidelity patient

simulation equipment her students will have access to.

"They are specifically to meet some of the requirements for the obstetrical maternal-child experiences that they need within the clinical setting," MacNeill said.

MacNeill said the equipment will allow high-fidelity patient simulation (HPS), which refers to the use of computerized manikins that simulate real-life scenarios. Long used in medical schools and the military, HPS is quickly becoming essential for many nursing schools, according to the American Nurses Association.

"There's going to be a simulation mom who can actually deliver the 'baby,' and in addition to that, you've got the 'baby'



Shirley MacNeill

that she delivers and a separate newborn hi-fidelity simulator," she said. "The intent is for the student to be able to care for a laboring mother when she comes in, participate in the delivery of the baby, and then to further carry out care on the mother during the post-partum phase and then for the baby in the transitional stage after delivery."

The school will also use grant money for items to enhance the simulation experience such as a special birthing bed, crash carts (wheeled containers carrying medicine and equipment for use in emergency resuscitations) and other accessory equipment.

According to Dr. Gary Stretcher, executive director of External Learning for LSCPA and the grant writer, the college plans to purchase the equipment during the fall 2018 semester, although it will not be required to spend it before Aug. 31, 2019.

Real men get checked!

Gift of Life provides lifesaving medical, cancer prevention services to more than 550 Southeast Texans

During June, National Men's Health Month, Gift of Life and its health and wellness partners provided an extensive scope of medical care and cancer prevention education combined with support services to more than 550 Southeast Texas men who could not afford insurance or their high deductibles.

Gift of Life's Men's Health & Prostate Cancer Screening initiatives expanded to address critical, unmet health and post-hurricane needs of "at-risk" men and their families who experienced heightened



Joe Washington and Regina Rogers



Gift of Life clients

Courtesy photos

barriers to care.

Through its regional collaborative health and wellness consortiums in Beaumont, Port Arthur and Orange, the organization broadened its range of resources to include primary care and PSA (prostate-specific antigen) screenings; immunizations provided by Beaumont, Port Arthur and Hardin County health departments; presentations about cancer prevention, chronic and infectious diseases and hearing, eye and dental preventative care; healthy lifestyle and cancer prevention outreach; and on-site health services that included physician consultations and clinical appointments for clients with abnormal outcomes.

Ancillary services and direct goods were also provided by the Southeast Texas Food Bank, Endeavors Disaster Case Managers, Southeast Texas Civilian Task Force and the Orange County Disaster Rebuild Relief, who along with Workforce Solutions, P.A.L.M., Brown Hearting Center, TSO and many other concerned and committed groups and individuals, advanced the Gift



Maggie Jones, Elayna Nunley and Eric Taylor

of Life's cause to save lives.

Beaumont, Port Arthur and Orange Health Consortium members, regional elected officials, program supporters and hundreds of compassionate and caring volunteers publicized and participated in the Gift of Life's platform for equitable health opportunities and the reduction of disparities for medically underserved individuals.

Throughout May and June, Beaumont Fire Chief and Men's Health Month Honorary Chair Earl White served as a champion of the Gift of Life's Men's Program and encouraged all men to "be a man and get checked."

"As a prostate cancer survivor, I understand the importance of early detection," White said. "I am so proud of the many men who showed up to the screenings and are taking that important first step to live a long life in good health. These screenings are lifesavers."

Clients at the Port Arthur screening site were motivated to participate by hometown hero and Super Bowl Champion Joe Washington, Jr.

“The Gift of Life is a great healthcare team, and I’m delighted to be a part of this organization,” Washington said. “It’s a privilege to cheer these men on!”

The Southeast Texas Food Bank provided boxes of non-perishable foods and bags of fresh produce to all screening clients and their families. At the Orange screening site, the food bank was joined by Orange County Disaster Rebuild and the Southeast Texas Civilian Taskforce, which made available additional disaster-related supplies for screening clients, many of whom are still struggling to recover from the effects of Hurricane Harvey.

“It has been a rough year,” said an Orange screening client. “The Gift of Life is providing relief at a very difficult time. I am so grateful that they care about our community and that so many other groups have joined in to bring help.”

Countless clients similarly expressed gratitude for the extra care and concern they received from Gift of Life staff and the hundreds of volunteers.

Studies indicate that despite improved



Dr. Moses E. Wilcox Sr., John Fowler, Wayne Margolis and Gwendolyn Lavalais

medical technology, on average, American men will die five years earlier than their female counterparts. In 2018, it is estimated that prostate cancer will be diagnosed in 164,690 American men, and an estimated 29,430 will die from the disease this year.

Since 2000, the Gift of Life has made available nearly 10,000 free prostate cancer screenings and helped extend the lives of 74 men who have been diagnosed with prostate cancer and whose diagnostic and cancer treatment costs were entirely underwritten by the Gift of Life.

Gift of Life’s Prostate Cancer Support

Group, Men Against Cancer (MAC), assists men recently diagnosed with cancer, along with survivors and their families and caregivers. Meetings are hosted the second Tuesday of each month at St. Mark’s Episcopal Church and provide men an opportunity to share experiences and gain information from featured speakers who address medical issues and recovery.

Gift of Life will continue scheduling screenings throughout August and eligible men should contact the organization for an appointment. For more information, call (409) 833-3663 or visit giftoflifebmt.org.

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Norma Sampson, executive director of the Julie Rogers 'Gift of Life' Program; Regina Rogers, founder and chair of Gift of Life; Anne Marie Cervenka, development and special events coordinator at Gulf Coast Regional Blood Center; Camille Briggs, community relations advisor at Total Port Arthur Refinery; Carol Hebert, manager of Community & Government Affairs at BASF Port Arthur; Ashley Joseph, site communication specialist at BASF Port Arthur; Denise Duke, regional account manager at LifeShare Blood Center; and Tiffany Ybarra, administrative assistant at LifeShare Blood Centers

Photo by Kevin King



Miracle Match for Life

Golf tournament raises more than \$84K for area nonprofits

By Kevin King

Total Port Arthur Refinery and BASF raised more than \$84,000 through its annual Miracle Match for Life Golf Tournament held Friday, April 27, at the Bayou Din Golf Club. The funds were distributed Wednesday, July 11, to three local charities — the Julie Rogers “Gift of Life” Program, LifeShare Blood Centers, and the Gulf Coast Marrow Donor Program.

Miracle Match for Life was created in collaboration between BASF and Total in Southeast Texas to help educate and promote the need for bone marrow donors, blood donation and cancer screening.

“We are privileged to take part in an initiative that will help raise awareness

of medical needs within our communities,” said Total Port Arthur Refinery GM Bryan Canfield. “As in previous years, proceeds will support underserved residents in Southeast Texas and ensure they will receive lifesaving medical care.”

“Giving back is a natural part of our work culture, and we are grateful for the continued support we receive from our employees who are always willing to give back to the communities in which they live,” added Greg Masica, vice president and site manager at BASF in Port Arthur. “Being part of the critical services that these charities provide has been an amazing experience, and we look forward to continuing our partnership.”

The joint efforts of BASF and Total have raised more than \$1.5 million

through 2017. As a result of Miracle Match for Life, employees from both BASF and Total have been inspired to become donors to the three charities, and in some cases have been the perfect match for patients in need.

Denise Duke, regional account manager at LifeShare Blood Center, said the money that is donated to her non-profit goes to their elementary schools programs.

“We’re out at the elementary schools to not only host blood drives, but also to educate kids on the importance of blood donations to kind of familiarize them at an early age of what it is and how it’s not scary. It’s saving lives. It’s being heroes for our community,” Duke said. “It’s a big endeavor, but it’s important because

we're trying to educate an entire new generation about the importance of giving blood."

Norma Sampson, executive director of the Julie Rogers "Gift of Life" Program said "every dollar makes a difference" for the cancer-fighting nonprofit.

"Everything goes to direct services, and in light of (Hurricane Harvey), we have just seen so many more needs that have come our direction that are really outside of the scope of our traditional direct services," Sampson said.

Since the organization's inception, the Gift of Life has diagnosed more than 300 medically underserved Southeast Texas women and men with cancer and navigated them into treatment.

The Gulf Coast Marrow Donor Program is part of the National Marrow Donor Program (NMDP), the largest and most diverse marrow registry in the world through its "Be The Match" initiative.

"In order to keep adding people to the registry, it costs about \$100 to add one person to the registry, so this money helps us ... offset donor-related costs. Donors never pay for anything. Sometimes we have to fly them in from Louisiana and they might have to spend the night, so we help pay for their hotel accommodations. We help pay for their meals. Some people have to pay for childcare because they have to miss a day of work — lost wages. So this event enables us to continue to help the donors so they are able to continue to come forward and donate to these patients in need," said Anne Marie Cervenka, development and special events coordinator at Gulf Coast Regional Blood Center.

BASF Learning and Development Coordinator Jason Bussell said he learned about "Be the Match" when representatives from the program conducted a site visit.

"They came into the control room at our facility, and asked for volunteers to be a part of the registry," Bussell said. "I decided that it was important to me for personal reasons. I had a friend that I lost to leukemia when I was a child, and I remember the feeling of helplessness that I experienced. I always wished that there was more that I could do, although I knew that there was very little I could do to ease his pain or his family's. Plus, the idea of some positive karma coming my way made it a win-win."

Bussell said he also tries to participate in the annual golf tournament each year. "This year my wife joined me, and we

Total Port Arthur Refinery and BASF raised almost \$90,000 through its annual Miracle Match for Life Golf Tournament, held Friday, April 27, at Bayou Din Golf Club.

Courtesy photos



Colton Collier six days after his bone marrow transplant, which took place on Aug. 20, 2015. Colton, now 7, had a rare inherited bone marrow failure syndrome.

had a great time volunteering at the event. We donate money together at the golf tournament," he said.

Why should plant employees like Bussell continue to support these nonprofits through the Miracle Match For Life Golf Tournament each year?

"It's not only important for employees to get involved, it's our responsibility," he said. "This community allows us to operate near their doorsteps; therefore, it's on us to give them our very best. This area isn't only where the company I work for operates its facility. It's where I raise my children. It is our responsibility to make it better in any way we can. ... I am fortunate to work for a company that

encourages us to make the world a better place, but that is all of our responsibility as humans."

Colton Collier, a bone marrow disease survivor and advocate of the Gulf Coast Marrow Donor Program, found his perfect match through the "Be The Match" program, his mother said.

"Our son is a true success story of how donor registry can really save a life," Karen Collier said. "Happy news is not always the case in these medical situations, but our family is truly grateful for the donor that was a perfect match for our son."

At the age of 4, Bridge City native Colton Collier was diagnosed with congenital amegakaryocytic thrombocytopenia (CAMT), a rare inherited bone marrow failure syndrome characterized by an isolated and severe decrease in the number of platelets and megakaryocytes during the first years of life that develops into bone marrow failure with pancytopenia later in childhood. At that time, Colton was one of only 100 reported cases in the world and only the fourth to be transplanted at Texas Children's Hospital in Houston, Karen said.

"The only cure would be a successful bone marrow or stem-cell transplant," she said. "We go and start looking for a match. Nobody in the family is a match."

When people join the Be The Match Registry, they provide a sample of their DNA by swabbing their cheek, according to the nonprofit's website. This cheek swab is tested for a minimum of six basic human leukocyte antigen (HLA) markers.

A patient's doctor will usually choose

SEE MATCH • PAGE 37

Speech therapy helps Port Arthur woman recover from brain bleed

By Ginger Broome

When Muriel Polk, 62, came home from work early because of another headache, she didn't know she would fall asleep and wake up three days later in the hospital, head shaved and tubes sticking out of her, with no memory of what happened.

"I got into bed Monday, and woke up in the hospital Wednesday," she said. "Family members said I was answering questions when the paramedics came, but I have no memory of it."

She'd been plagued by headaches for months and could usually find some relief with BC Powder. But lately the headaches had grown in intensity, so much so that she left work at noon that Monday in December 2017.

She lay down, thinking it was just a combination of the stress she'd been under (she was living with her sister due to her home flooding in Harvey), or a sinus infection.

Waking up in the hospital, Polk learned that not only had she lost time, and yet retained the ability to answer questions, but that doctors had performed a craniotomy just that morning to relieve a brain bleed, the cause behind her worsening headaches. Her medical code was "traumatic subdural hemorrhage" and the doctors did not know what caused it.

"I had subdural hemorrhaging (brain bleed), and it was causing the tremendous headaches I couldn't get rid of," Polk said.

According to the Mayo Clinic, subdural hematoma occurs when blood vessels — usually veins — rupture between your brain and the outermost of three membrane layers that cover your brain. The leaking blood forms a hematoma that presses on the brain tissue. An enlarging hematoma can cause gradual loss of consciousness and possibly death.

Angela Harrington, lead speech pathologist at Christus St. Elizabeth in Beaumont, said Polk's symptoms were common with brain injury.

"Sometimes we test patients with their automatics — name, birthday, Social Security number, and they still have those," Harrington said.

That was the case with Polk's memory loss.

Polk did not recall any head trauma



Muriel Polk (right) discusses her experience with subdural hemorrhaging with her speech pathologist Angela Harrington.

Photo by Ginger Broome

that would have caused the bleed, and when she awoke in the hospital, it seemed as if she had all her functioning. She had memory and speech, so the doctors released her just a few days after the surgery. But still, she felt something wasn't right.

"I could do everything. But to me, there felt like there was some hesitation in my speaking."

Polk kept asking her family if they noticed her hesitating before speaking or stuttering, but everyone said no. Upon her insistence that something was still wrong, doctors referred her to speech therapy, something she didn't realize was available in the area until her sister started researching it.

"Speech pathology has really grown a lot in 10 to 15 years," Harrington said. "It wasn't always known how it could help patients, but now we see a lot of support from physicians."

The speech pathologists at St. Elizabeth see patients in the acute setting when they're in the hospital, such as in the ICU, and at outpatient clinics in Beaumont and Mid-County. Harrington said patients can range in age from babies in NICU to geriatric patients, and that speech pathology is a therapy that helps with everything from swallowing disorders — such as in premature infants — to traumatic brain injuries, such as stroke or accidents.

The therapy is also successful in treating patients suffering from Parkinson's or ALS who typically have trouble with thinking

and cognition as the disease progresses.

Patients who have had cancer of the throat, or tracheotomies, also need to relearn working those muscles for speech and swallowing.

"We work on how the sounds are produced, what a patient understands, and language," Harrington said. "They have trouble expressing themselves, so we work on both sides — comprehension and expression."

When Polk was referred to a speech pathologist, she was concerned because no one else could see a problem, and she worried that maybe it was all in her head. It was only when she met Angela that she felt vindicated about what she was feeling.

"Thank God I got Angela. I was so happy, because she knew exactly what I was talking about," Polk said. "I was so happy that she could see it."

"We did some standardized testing, for her language and comprehension and expression," said Harrington, "and what I found was that she had a few memory things, but it was working memory she was having a hard time accessing. She knew what she had to say but couldn't figure out how to put it in a sentence. It was a processing hesitation she was feeling. I could pick up on it."

Following Polk's release from the hospital, she visited with Harrington twice a week for the next two months, working on strategies and exercises to improve her memory and the connection between

what she thought and what she said. In addition to these twice-weekly sessions, Harrington assigned her “homework” therapy to continue on her own.

“Patients need someone to validate their concerns,” Harrington said. “I have to be able to identify your problem and come up with a solution.”

Polk’s job at AT&T required her to talk with field technicians at customer locations and to be able to convey their needs and how to fill them.

“One of the things she had me do was to repeat back what they (the techs) were telling me,” Polk said.

She’d gone back to work in March 2018 after completing her speech therapy. Using the skills from therapy and Harrington’s advice, she informed coworkers that she was having trouble expressing her words and that she still had a slight hesitation with speech.

“That made her feel more secure by letting them know,” Harrington said.

Polk continued her assigned home programming, and said she loved it so much that she continued it when it was no longer a requirement of her therapy, because not only was it helping with her memory, but she also liked the idea that she was “working out” her brain. She continues that to this day.

Polk started seeing progress using strategies learned from Harrington in her speech pathology, and she said she was like a kid when she saw the progress she was making.

“She was very patient and let me do

things at my pace,” she said. “She told me I was doing better than I thought.”

“Everyone in your department,” Polk said to Harrington, “I paid attention to how they dealt with patients, and you all were awesome.”

“We love what we do,” Harrington said, stating that Polk taught her a lot too, because no patient is the same. “It’s desirable work.”

When asked how she was doing after that harrowing experience and post-therapy, Polk said, “She helped me regain my life. Based on the tips she gave me, techs (at my job) call in and I can solve the problem, so it’s turning out great.”

Harrington stresses that a big focus of speech pathology is carryover – where the patients continue and incorporate the therapy skills at home, to promote continued success. To this day, both Polk and Harrington keep an open communication with each other and consider each other friends.

And they both agree, no matter what anyone else says, if you feel like something is wrong, trust your gut.

Polk continues to do “homework” on her on accord, improving day by day, and has returned to a mostly normal life. Or at least as normal as it could be since the brain surgery.

“I’m at about 90 percent now,” Polk said. “I know I will get to where I feel 100 percent. This is my new normal; this is what it is, and I’m doing well.”



Colton Collier poses for a photo in a golf cart at the Miracle Match for Life Golf Tournament, held Friday, April 27, at the Bayou Din Golf Club. Colton, who received a bone marrow transplant, is no longer on medication and can enjoy being a kid, playing baseball and living his life to the fullest.

Courtesy photo

MATCH • FROM PAGE 35

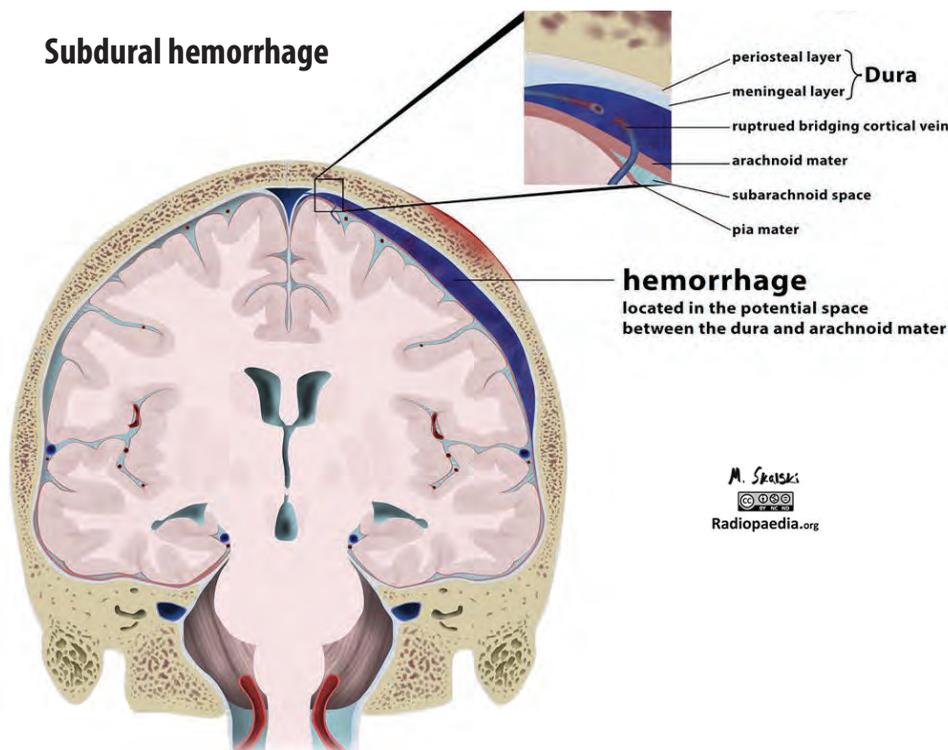
several donors who appear to match the patient at a basic level. The doctor will ask that these donors have additional tests. These detailed tests will show which donor’s HLA most closely matches the patient’s HLA markers. The tests are usually blood tests or additional cheek swabs.

About 8 percent of members who complete additional testing will go on to donate. If a member is asked to donate, that means they are the closest HLA match to the patient – the best donor.

Colton’s match happened to be a man from Poland, who the family has been able to communicate with, but only anonymously, due to privacy laws.

While they are waiting to see if they will ever be able to meet the mysterious man from Poland who was the match that Colton so desperately needed, Karen ponders what she will say to him if given the opportunity.

“I think I would just cry and hug him and thank him,” she said. “He literally saved our child’s life. ... Colton is no longer on medication and can enjoy being a kid, playing baseball and living his life to the fullest.”





Twenty-nine graduates of the school, which was founded in 1953 and graduated 366 nurses overall through its more than two decade history, turned out for the event. Nurses from classes 1957-1974 were represented. Photos by Kevin King

Classes of 1957-1974

Baptist Hospital School of Professional Nursing Reunion



Chaplain and Director of Pastoral Care David Cross, who has worked at Baptist Hospital for almost 37 years, updated attendees on the status of employees they once worked with — some of which had long since retired or passed away.

By Kevin King

Baptist Hospital School of Professional Nursing held a reunion for all graduating classes Saturday, July 28, in the Olga Keith Wiess Auditorium in Beaumont. Twenty-nine graduates of the school, which was founded in 1953 and graduated 366 nurses overall through its more than two decade history, turned out for the event. Nurses from classes 1957-1974 were represented.

Some of these nurses had not seen each other since they graduated, and there were many stories shared on Saturday and talk of how Baptist Hospital School of Professional Nursing is still respected as one of the best nursing schools to have ever existed.

Chaplain and Director of Pastoral Care David Cross, who has worked at Baptist Hospital for almost 37 years, updated attendees on the status of employees they once worked with — some of whom had long since retired or passed away.

Judy Bertrand, class of 1968, who helped

organize the event along with Valorie Wise Jones, a 1966 graduate and now an Oklahoma resident who spearheaded the effort, said the two began planning the event in the spring. This was the first ever reunion for the school, which predates the Lamar University JoAnne Gay Dishman School of Nursing and was opened 42 years after Hotel Dieu, Beaumont's first nursing school, which closed in 1967.

The Baptist Hospital School of Professional Nursing was made a reality thanks to funds donated by the wife of oil tycoon Harry C. Weiss, according to Baptist Hospital School of Professional Nursing's Historical Sketch. In 1960, Wiess donated an additional \$520,000 to add new housing for nursing trainees, an auditorium and library area and a heated swimming pool. The school, which closed due to the formation of the nursing program at Lamar University, graduated its last class, 44 nurses, in 1974. According to Cross, the school was demolished around 2008 or 2009.



The Link announces the closing of the nursing school in a June 1974 issue.



Laurie Donahoe Musachia and her mother, Juanita Donahoe (class of 1958), look for a photo of Juanita.

- Dorine Demacon - 1970
- Wanda Aulbaugh Kelly - 1965
- BECKY COX - 1966
- Judy Ascol Bertrand 1968
- Dean Wilson Etue 1968
- Martha Waener 1974
- Joye McConquodale 1974
- Brenda Kidd Hubbard 1971
- Mary Sybil Williams 1974
- Jerry Kelom 1974
- Dalicia Nodd Strangh
- Karen Chamberlain Holcomb 1971
- GAY GRAY 1958
- Susan Brooks McGlothlen 1967
- John "Scott" McGlothlen 1974
- Sandy Livingston Sterling 1972
- Cheryl Bryant 1974
- ~~Balena Jarriss 1971~~
- Dalena Ferguson Jarriss 1971
- LONDA MILLER CARTER CLASS 1974
- Vicki Crossett CLASS 1974
- Iris R. Robertson = 1967
- Juanita Marcontell/Donahoe 1958
- Carol Ascol 1968
- Valorie Wise Jones - 1966
- Jo K. (Gleidewise) Irvine 1967
- ALIEN DALE SAULSBERRY 1966
- Karen Dunshie Ascol 1974
- Golf Backalew Henning 1967
- Carolyn Dickinson Allemand - 1967
- Eve Ferguson Lunsford - 1965
- Martha Robbins Anderson - 1958



Scott McGlothlen (class of 1974), Jo K. Irvine (class of 1967) and Dale Saulsberry (class of 1966)



List of nurses who attended the first-ever Baptist Hospital School of Professional Nursing Reunion along with the year they graduated

Juanita Donahoe won 'Best All Around' while attending Baptist Hospital School of Professional Nursing.

To study or not to study medicine?



Kelly High alumna, pediatrician talks to students about pros and cons of pursuing medical career

By Kevin King

Dr. Ramona Ataya-Dakour spoke to students interested in entering the medical field during Monsignor Kelly Catholic High School's Career Spotlight in April.

Ataya-Dakour, a 2002 Kelly High Alumna, is a pediatrician at Greater Beaumont Pediatrics and Family Medicine. She works with her husband Ramzi Dakour, a family medicine doctor.

"I came to talk to students about becoming a doctor, so anybody that is interested in the medical field, I wanted to be here to answer any questions and kind of give them an idea of what it takes to become a doctor, so they know what to expect and make sure this is what they want to do," Ataya-Dakour said.

Dr. Ataya-Dakour said students interested in becoming a doctor need to know that it is a lengthy process to earn a medical degree and very challenging.

"They need to make sure this is what they want to do," she said.

"They need to have good study habits from the beginning and stay focused. It's very competitive to get (into medical school.)"

Students need to perform well in all academic subjects in high school, Dr. Ataya-Dakour stressed.

"You want to get a good GPA, so you want to do well in everything," she said. "I just stressed to them that the more successful you are at Kelly, in high school, the more successful you will be in college, and I told them how well Kelly prepared me for college, as well."

Ataya-Dakour said she always knew she wanted to be a doctor because her father was a pediatrician as well.

"I loved the way that he loved his job and loved taking care of kids, and I knew that's what I wanted to do from just watching how his patients loved him and how he treated his patients like his own kids," she said.

After graduating from Kelly, Ataya-Dakour earned a business degree from the University of Texas in 2006. Majoring

Dr. Ramona Ataya-Dakour's pros of becoming a doctor:

- Positive impact on people's lives and health
- Opportunity to save someone's life
- Challenging career field
- Lifelong learning
- Many choices of medicine to choose from
- Research has potential to make a real breakthrough in preventing or treating illness
- Profession is honorable and held in high esteem
- Job security

Dr. Ataya-Dakour's cons of becoming a doctor:

- Requires many years of expensive schooling (possibly 10+)
- Long hours
- Always on call
- Long periods of unpaid internships

Dr. Ramona Ataya-Dakour spoke to students interested in entering the medical field during Monsignor Kelly Catholic High School's Career Spotlight in April.

Photos by Kevin King



in finance was a good choice because it helped her learn how to run her own business, which is important and something students don't often think they may need to know in the future after graduating from med school if they want to start their own practice.

"I stressed to the students that you can major in whatever you want to major in," she said. "It doesn't have to be biology. It can be art, music — major in whatever you love because that's your only chance to do it. You are going to take pre-med courses anyway and once you get to med school, there's going to be so much to learn that you're going to be on the same level anyway." A degree in biology or chemistry may help you the first week of med school, but the difficulty level increases so much afterwards that it really isn't a big advantage, she said.

Ataya-Dakour received her medical degree from UTMB-Galveston in 2010 and she performed her residency at Texas Children's Hospital and Baylor College of Medicine. She worked there as faculty for a year

before becoming a pediatrician in Beaumont. Overall it took Ataya-Dakour 11 years of school to become a doctor, she said. Becoming a specialist, however, requires a fellowship, a period of medical training that a physician undertakes after completing a specialty-training program.

"For instance, if I had wanted to become a pediatric gastroenterologist or pediatric cardiologist, I would to have been in fellowship for another three years," she said. "I would have had to do a fellowship on top of residency. If I would have wanted to be a surgeon, it would have been five years on top of residency. Dermatology would have been four years on top of residency, so it just depends on what you want to do."

So why go into medicine?

According to Ataya-Dakour, you do it to have a positive impact on people's lives and health; save a life at some point in your career no matter what field of medicine you choose; because it's challenging; because it affords lifelong learning; and it's fulfilling if you have a true love of medicine.

The pros of choosing to become a doctor include the many choices you make along your career path; you can research whatever specialty you choose with the potential to make a real breakthrough in preventing or treating illness; the profession is honorable and held in high esteem; and it has good job security.

What are the cons of pursuing a career in medicine?

According to Ataya-Dakour, it requires lots of education, which costs lots of money, long periods of unpaid internships and long hours because you are almost always on call.

Career Day attendee Chinye Nwaobi, who has since graduated from Kelly and is currently attending Stephen F. Austin



Chinye Nwaobi and Elizabeth Peeler



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CALENDAR OF EVENTS

AUGUST

Saturday, Aug. 11

Anayat House
Zummo Meat Co. BIG Cup Challenge
Beaumont Country Club
9 a.m.
(409) 898-7011

Saturday, Aug. 11

Southeast Texas CrossFit
WODs On Wheels workout benefiting
Nutrition & Services For Seniors
9 a.m.
Will take place at various gyms throughout
the area
Donation is \$20 to participate
(409) 651-5679

Thursday, Aug. 16

Samaritan Counseling Center of SETX
2nd Annual Not So Newlywed Game
The Event Centre, Beaumont
6-9 p.m.
(409) 727-6400

Friday, Sept. 28

The Medical Center of Southeast Texas FORE
Hope Golf Tournament
Benefitting The Mid-South County
Rainbow Room and Community Care Prayer
Outreach
Henry Homberg Golf Course at Tyrrell Park,
Beaumont
8 a.m.
(409) 853-5745

Saturday, Sept. 29

Alzheimer's Association
Walk to End Alzheimer's
The Event Centre, Beaumont
8 a.m.
(409) 833-1613

Saturday, Sept. 29

Wells of Agape
Pumpkins and Pearls Fundraising Gala
The Garden District, Orange
6 p.m.
(409) 263-0132

SEPTEMBER

Friday, Sept. 21

Southeast Texas Food Bank
"Will Golf for Food" Tournament
Bayou Din Golf Club, Beaumont
8 a.m. and 1 p.m. tee times
(409) 839-8777

OCTOBER

Oct. 1 – Dec. 6

Southeast Texas Food Bank
Share Your Christmas Food and Fund Drive
Conduct an organizational collection of food
and/or funds for benefit of Food Bank (any
time within the dates given)



Walk to End Alzheimer's

Photo courtesy of the Alzheimer's Association



Making Strides Against Breast Cancer

Photo by Brandon Gouthier

(409) 839-8777

Saturday, Oct. 6

Julie Rogers "Gift of Life"
Julie Richardson Procter 5K Ribbon Run
Color Rush
Starts at Beaumont Civic Center
8 a.m.
(409) 833-3663

Thursday, Oct. 11

United Way of Beaumont and North
Jefferson County
United Way Hometown Huddle: "Celebrity
Chef Chili Cook-Off"
The Event Centre, Beaumont
5:30 p.m.
(409) 835-4575

Monday, Oct. 22

Children's Miracle Network and Christus
Southeast Texas Foundation
Swinging For a Miracle Golf Tournament
Beaumont Country Club
8 a.m.
(409) 236-7598

Saturday, Oct. 27

Arc of Greater Beaumont
7th Annual Beaumont Buddy Walk
Event Centre, Beaumont
10 a.m.
(409) 838-9012

Saturday, Oct. 27

American Cancer Society
Making Strides Against Breast Cancer
Lamar University, Beaumont
10 a.m.
(409) 924-0576

Wednesday, Oct. 31

Altus Health
Trunk or Treat
Altus Emergency Center – Lumberton
Halloween night
(409) 227-0532

NOVEMBER

Saturday, Nov. 3

Muscular Dystrophy Association
MDA Muscle Walk of Lake Charles
Millennium Park, Lake Charles
10 a.m.
(337) 234-0088

Thursday, Nov. 8

Harbor Foundation
Eighth annual Dinner for Life Gala, Derby
Days
The Event Centre, Beaumont
7 p.m.
(409) 540-4043

Thursday, Nov. 15

Garth House
28th Annual Pour Les Enfants Fundraiser
Garth House, Beaumont
6 p.m.
(409) 838-9084

LU students raise funds for playroom makeover

Courtesy photo

After a year of hard work raising money for pediatric patients at Christus Southeast Texas St. Elizabeth, a group of Lamar University students debuted their playroom makeover Tuesday, July 10, at the hospital.

The Lamar University Dance Marathon (LUDM) students have used the nearly \$5,000 they raised all year to purchase new toys and furniture for the hospital's Pediatric Center playroom.

The students worked all day to put the new furniture and decorations together before revealing the makeover to patients during a special re-dedication ceremony and blessing at Christus Southeast Texas St. Elizabeth patients and associates.

"I am immensely grateful to the Lamar University Dance Marathon students. Their donation is going to help our pediatric patients and their families have a more relaxed hospital stay," said Melissa Conley, program manager, Children's Miracle Network Hospitals, Christus Southeast Texas Foundation.

Lamar University Dance Marathon students arrived early to put the finishing details on the playroom, before debuting it to hospital associates and pediatric patients. The group's president, Cade Johnson, said he and several of his fellow students visited hospitals as children and knew firsthand



how it can feel for a young child.

"We just wanted to create an area where kids would have fun and enjoy being here with their families," Johnson said. "Hopefully, this will make the hospital a little more inviting for pediatric patients and help them be less nervous when they visit the doctor."

Hospital Associates gathered to thank the students, and share in punch and cupcakes with the group to show their appreciation.

"This new playroom will give our pediatric patients the opportunity to relieve some of the stress that comes with being in the hospital," Conley added.

MEDICINE • FROM PAGE 41

University, said she comes from a family with a medical background. Her parents are originally from Nigeria and they came to America to pursue careers in the medical field. Her mother is a nurse practitioner and her father is a pharmacist.

Ataya-Dakour stressed that "going into it for the money" isn't by itself a reason to enter the field. Practicing medicine is something you have to want to do because you love the field, she stressed.

"It influenced me a lot because I like the fact that they take care of people and help them," she said. Watching the TV show "Grey's Anatomy" also influenced her decision, she said. "I just like the fun of it, the thrill of it. I think I'm going to be a pediatric surgeon because ... I found out ... we really (don't) have one in Beaumont. For children that require



Ataya-Dakour, a 2002 Kelly High alumna, is a pediatrician at Greater Beaumont Pediatrics and Family Medicine.

pediatric surgery, they ... have to send them to Houston. I wanted to see if there was a way I can help."

Nwaobi said what stuck out to her in Ataya-Dakour's presentation was

that not all people in the medical field major in a science for their bachelor's degree.

Elizabeth Peeler, who also attended Career Day to listen to Ataya-Dakour's advice, has since graduated from Kelly and is studying biochemistry/pre-medicine at Mississippi State University.

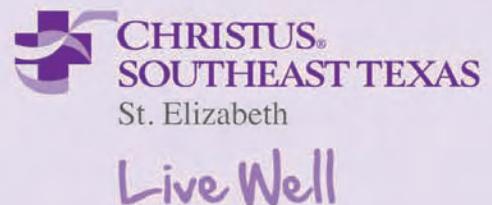
"I had talked to different doctors and different parents that I know and what I've always wanted to do is become a pediatrician to work with younger kids," Peeler said. "This helped me know what I'm going to have to put into (becoming a doctor) — the workload, the course load. I've never really looked into medical school separated in different parts and the specifics and this really helped me a lot. I know it's going to be a lot of hard work, but to see someone who's gone through and done it, it encourages me that I can do it, too."

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