



## What Do You See?

What do you see, nurses,  
what do you see?  
What are you thinking  
when you're looking at me?

A crabby old woman, not  
v e r y w i s e ,  
Uncertain of habit, with  
f a r a w a y e y e s ?  
Who dribbles her food  
and makes no reply  
When you say in a loud  
voice, "I do wish you'd  
try!"

Who seems not to notice  
the things that you do,  
And forever is missing a  
stocking or shoe.....  
Who, resisting or not, lets  
you do as you will,  
With bathing and feeding,  
the long day to fill....  
Is that what you're  
thinking? Is that what you  
see?

Then open your eyes,  
nurse; you're not looking  
at me.

I'll tell you who I am as I  
sit here so still,  
As I do at your bidding, as  
I eat at your will.  
I'm a small child of ten ...  
with a father and mother,  
Brothers and sisters, who  
love one another.

A young girl of sixteen,  
with wings on her feet,  
Dreaming that soon now a

lover she'll meet.  
A bride soon at twenty --  
my heart gives a leap,  
Remembering the vows  
that I promised to keep.  
At twenty-five now, I have  
young of my own,  
Who need me to guide  
and a secure happy home.  
A woman of thirty, my  
young now grown fast,  
Bound to each other with  
ties that should last.  
At forty, my young sons  
have grown and are gone,  
But my man's beside me  
to see I don't mourn.  
At fifty once more, babies  
play round my knee,  
Again we know children,  
my loved one and me.

Dark days are upon me,  
my husband is dead;  
I look at the future, I  
shudder with dread.  
For my young are all  
rearing young of their  
o w n ,  
And I think of the years  
and the love that I've  
k n o w n .  
I'm now an old woman ...  
and nature is cruel;  
'Tis jest to make old age  
look like a fool.  
The body, it crumbles,  
grace and vigor depart,  
There is now a stone  
where I once had a heart.  
But inside this old carcass  
a young girl still dwells,

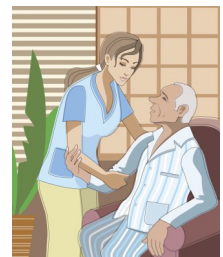
And now and again my  
battered heart swells.

I remember the joys, I  
remember the pain,  
And I'm loving and living  
life over again.  
I think of the years.... all  
too few, gone too fast,  
And accept the stark fact  
that nothing can last.

So open your eyes, nurses,  
o p e n a n d s e e ,  
Not a crabby old woman;  
look closer ... see ME!!

Submitted by: Kerrie  
Burns, Interim Nurse Mgr.

(This was written by an  
elderly woman who died in  
Ashludie Hospital near  
Dunde, England. The poem  
was found among her  
possessions and so  
impressed the staff that  
copies were made and  
distributed to every nurse in  
the hospital. Although it is  
addressed to the nurses who  
cared for the woman in her  
last days, the message is a  
powerful lesson for us all.)



### Inside this issue:

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Weird Facts  
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## ***From the desk of the Interim CEO***

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This hospital has been through a number of changes in the past few months. Thank you for your dedication and persistence as we work through those changes.

I'd like to welcome Dr. Nazim Syed. He comes to us from Union County where he worked in the Carolinas Healthcare System. For the past 11 years, he has practiced throughout the Midwest and East coast. Dr. Syed earned his degree from the Sind Medical College, a University of Karachi, Pakistan. Dr. Syed is married and has three young children. In his spare time, he enjoys spending time with his family.

Dr. Byron Leak has returned! He was born in Atlanta, Georgia and studied medicine at Case Western Reserve University School of Medicine. He did his residency in internal medicine at MetroHealth Medical Center in Ohio. Dr. Leak is a newlywed to Alexis, an RN, and he enjoys football, grilling/cooking, fishing and relaxing with a good movie. Please welcome him to our team.

If you haven't met Dr. Syed or Dr. Leak, please introduce yourself and welcome them to our hospital.

As Interim CEO, I've been working on the list to secure a certificate of need to move the hospital. This will be submitted to the state on January 15<sup>th</sup>, 2011. I have an appointment in Raleigh to discuss the upcoming move with representatives in the state office in hopes that it is approved quickly. We are working with an architect to design OUR building. There's an exciting future in store for CSH. We plan to have 40 private beds and space for all our needs. If you should have questions or concerns, please visit me. I have an open door policy and welcome your input.

Leanne



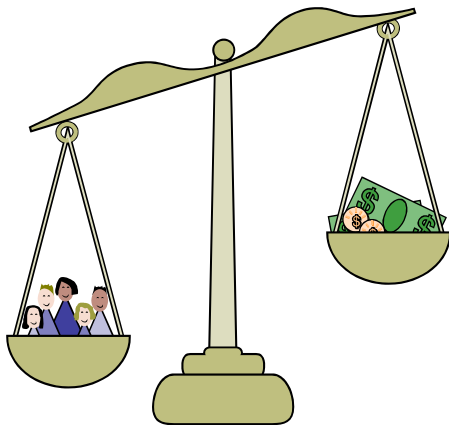
**Dr. Byron Leak**



**Dr. Nazim Syed**

## 2011 Insurance Renewal

The time is approaching for our annual Insurance Renewal and the flexible spending accounts. I am currently working with our insurance representative and the insurance carriers on renewal rates. At this time there doesn't appear to be any major changes with the plans or any significant increases. We are looking at Open Enrollment to be from January 9<sup>th</sup> to January 22<sup>nd</sup>. Our representative is planning to be on-site for a few days the week of January 17<sup>th</sup>. These date are not yet confirmed so more information is to come.



## 401K Update

CSH is glad to announce their will be a contribution match to the employees that were enrolled in the 2009 401K Plan. The contribution will match up to 3%. If you would like to enroll in the plan, please see Doug Gallagher. You must be a Full Time/Part-Time employee for at least 90 days to enroll. Our investment professional is Steve Dotson. He can be reached at 704-553-6365 if you would like to schedule an appointment with him.

## Mailboxes

Mailboxes are located in the employee break room and all employees have been assigned a box. Please be sure that you check your box every shift for any new announcements and keep boxes empty. Do not place any patient information such as care plans or other patient information in the boxes. This is a HIPPA violation and against CSH policy. If you are not able to find your box number on the list, please see Drenna Hannon.

## Policy Review:

### Policy HR 11

1. Employees may make personal phone calls only during work breaks or lunch periods. Calls may not be made in work areas. This applies to calls made on the employee's personal cell phone or a hospital phone.
2. Cell phones must be turned off during work hours.
3. Long distance phone calls may not be charged to the Hospital and must be either placed collect or billed to the employee's personal account.
4. Employees contacted by creditors or collection agencies should immediately inform the caller of this policy and end the call. The employee should then follow up with the agency in writing, advising them not to call at work. If calls continue, employees should seek assistance from the Human Resources Department.
5. Employees are expected to inform friends and family members of this policy and will be held accountable for their actions under the Hospital's disciplinary procedure, HR 601, Discipline of Employees.

## CAUTI Facts

by Leigh-Anne Sessoms

- ❖ CAUTI is the most common hospital associated infection.
- ❖ 1 in 4 patients receive an indwelling catheter at some point during their hospital stay.
- ❖ Up to 50% of these catheters are unnecessarily placed.
- ❖ Inappropriately placed catheters are more often forgotten.
- ❖ Requests from nurses to place a urinary catheter for nursing convenience are NOT uncommon.
- ❖ The most effective way to prevent CAUTI is to avoid inappropriate catheterization.
- ❖ Alternatives to catheterization should be considered.
- ❖ Documentation must include: indications for catheter insertion, date and time of catheter insertion.
- ❖ Educate your patient on proper care of the catheter.

# Happy Anniversary CSH Team!



## November—January

### One Year

Christopher Agu

Ellen Anin

Veronica Asangbah

Georgia Hansen

Holli Myers

Aaron Thomas

Valerie Warren

### Two Years

Joyce Alexander

Georgette Cameron

Janet Combs

Lelah Hoang

Julius Hobbs

Lamin Kolley

Anna Lewandowski

### Two Years Cont'd

Luz Lopez

Jefet Ricart-Nunez

### Five Years

Crystal Smiley

### Six Years

Hubert Middleton

### Seven Years

Nina Wilson

### Eight Years

Pat Farrington

### New Employees

#### September—November

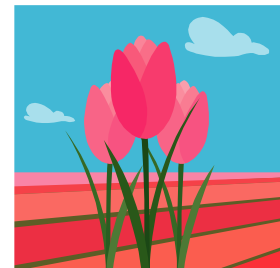
Valeria Caprucci

Beth Eudy

Chinelle Johnson

Welcome to those of you new  
to our team!

Thank you for your years of hard  
work and dedication.



## Weird Facts About Humans

1. Your brain has huge oxygen needs: The brain requires 20% of the oxygen and calories your body needs even though your brain makes up 2% of your total body weight.
2. Your brain comes out to play at night: You'd think that your brain is more active during the day, when the rest of your body is. But it's not. Your brain is more active when you sleep.
3. Your brain operates on 10 watts of power: It's true. The amazing computational power of your brain only requires about 10 watts of power to operate.
4. A higher IQ equals more dreams: The smarter you are, the more you dream. A high IQ can also fight mental illness. Some people even believe they are smarter in their dreams than when they are awake.
5. Information in your brain travels at different speeds: The neurons in your brain are built differently, and information travels along them at different speeds. This is why sometimes you can recall information instantly, and sometimes it takes longer.

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# Happy Birthday to You!

<u>January</u>				<u>February</u>			
Rosti Mialik	01/01	Cynda Rankin	01/20	Shannon Metz	02/01	Chris Agu	02/15
Bonnie Foster	01/06	Aditi Mehta	01/21	Pat Farrington	02/03	Lelah Hoang	02/20
Drenna Hannon	01/07	Selwyn Wishnefsky	01/22	Sabrina Tolson	02/08	Jeff Ware	02/24
Angel Fernandez	01/15	David Crowe	01/26	Thelma Parr	02/12	Paige Baggett	02/27
Holli Myers	01/18	Alison Starkey	01/26	Dana Clifton	02/13		
Rudy Begic	01/20	Nick Primo	01/31				
<u>March</u>				<u>April</u>			
Derrick Jay	03/12	Valeria Caprucci	03/25	Mark Hill	04/03	Keira D'Aleo	04/21
Yukishia Austin	03/13	Eric Mares	03/27	Margaret Jeannite	04/04	Loudell Mobley	04/22
Latasha Ruffin	03/13	Nicole Philbin	03/27	Margurite King	04/04	Jennifer Vereen	04/22
Carlos Ramirez	03/20	Travis Nestlerode	03/30	Cheryl Uttley	04/04	Kerrie Burns	04/26
Rebecca Wernstrom	03/21			Kirsten Roach	04/06	Lisa Johnson	04/26
				Andrea Webb	04/12		



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6. Women smell better than men: Women are better than men at identifying smells.
7. Your nose remembers 50,000 scents: It is possible for your nose to identify and remember more than 50,000 smells.
8. Your hearing decreases when you overeat: When you eat too much food, it actually reduces your ability to hear. So consider eating healthy and only until you are full.

9. Babies are stronger than oxen: On a pound for pound basis, that is. For their size, babies are quite powerful and strong.
10. Your feet can produce a pint of sweat a day: There are 500,000 (250,000 for each) sweat glands in your feet, and that can mean a great deal of stinky sweat.
11. Throughout your life, the amount of saliva you have could fill two swimming pools: Since saliva is a vital part of digestion, it is little

surprise that your mouth makes so much of it.

12. You probably pass gas 14 times a day: On average, you will expel flatulence several times as part of digestion.
13. A sneeze can exceed 100 mph: When a sneeze leaves your body, it does so at high speeds, so you should avoid suppressing it and causing damage to your body.
14. Coughs leave at 60 mph: A cough is much less dangerous, leaving the body

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# Pharmacy

by Dana Baker, PharmD

**Propoxyphene has been withdrawn from the market. Pharmacy has removed all propoxyphene products from omniceils. Please see information from the FDA below:**

**Propoxyphene: Withdrawal - Risk of Cardiac Toxicity Sold as Darvon, Darvocet, and generics**

**AUDIENCE:** Pain management, Pharmacy

**ISSUE:** FDA notified healthcare professionals that Xanodyne Pharmaceuticals has agreed to withdraw propoxyphene, an opioid pain reliever used to treat mild to moderate pain, from the U.S. market at the request of the FDA, due to new data showing that the drug can cause serious toxicity to the heart, even when used at therapeutic doses. FDA concluded that the safety risks of propoxyphene outweigh its benefits for pain relief at recommended doses. FDA requested that the

generic manufacturers of propoxyphene-containing products remove their products as well.



**BACKGROUND:** FDA's recommendation is based on all available data including data from a new study that evaluated the effects that increasing doses of propoxyphene have on the heart (see Data Summary in Drug Safety Communication). The results of the new study showed that when propoxyphene was taken at therapeutic doses, there were significant changes to the electrical activity of the heart: prolonged PR interval, widened QRS complex and prolonged QT interval. These

changes can increase the risk for serious abnormal heart rhythms.

**RECOMMENDATION:** FDA recommends that healthcare professionals stop prescribing and dispensing propoxyphene-containing products to patients, contact patients currently taking propoxyphene-containing products and ask them to discontinue the drug, inform patients of the risks associated with propoxyphene, and discuss alternative pain management strategies. Patients were advised to dispose of unused propoxyphene in household trash by following the recommendations outlined in the Federal Drug Disposal Guidelines.

Read the MedWatch safety alert, including links to the Drug Safety Communication, News Release, and supporting documents, at:

<http://www.fda.gov/Safety/MedWatch/SafetyInformation/SafetyAlertsforHumanMedicalProducts/ucm234389.htm>

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at 60 mph. That's still highway speed though.

15. When you take a step, you are using up to 200 muscles: Walking uses a great deal of muscle power, especially if you take your 10,000 steps.

16. Your tongue is the strongest muscle in your body: Compared to its size, the tongue is the strongest muscle. But I doubt you'll be lifting weights with it.

17. Bone can be stronger than steel: Once again, this is a pound for pound comparison, since steel is denser and has a higher tensile strength.

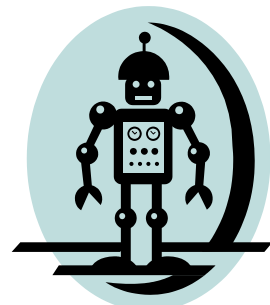
18. Memory is affected by body position: Where you are and how you are placed in your environment triggers memory.

19. You can't tickle yourself: Go ahead. Try to tickle yourself.

20. Being right-handed can prolong your life: If you're right-handed, you could live

up to 9 years longer than a lefty.

21. Only humans shed emotional tears: Every other animal that produces tears has a physiological reason for doing so.

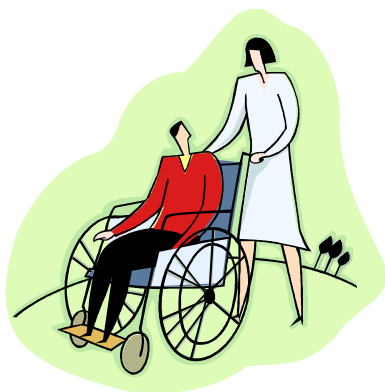


# The Language of Rehab

by Janet Combs, Rehab Manager

Do you ever talk to the rehabilitation therapists and think they are speaking in code or another language? Do you ever try to read their notes and have no clue how to interpret them? Read this to decode the rehab therapists' language. The following are acronyms, words and phrases which include appropriate definitions to help you better understand how to care for your patient or family member.

As a new initiative to promote carryover, maximize independence and ensure appropriate knowledge regarding how to mobilize each patient, the rehab staff now posts information on the cork boards in patients' rooms as an easy reference guide to inform all caregivers of what the patient is able to do.



## Levels of Assistance:

+1: the patient requires one person to assist them safely.

+2: the patient requires two people to assist them safely.

I: Independent: the patient can perform tasks without any assistance.

S/U: Setup: the patient needs items to be within reach or setup for them but can complete the tasks without additional help.

S: Supervision: or Stand by Assist: SBA: the patient requires only verbal cues and someone nearby but can complete the task without additional help.

CGA: Contact Guard Assist: the patient requires close or hands on supervision to ensure safety and balance.

Min A: Minimal Assistance: the patient requires 1-25% assistance from the caregiver to complete an activity.

Mod A: Moderate Assistance: the patient requires 26-50% assistance from the caregiver to complete an activity.

Max A: Maximal Assistance: the patient requires 51-75% assistance from the caregiver to complete an activity.

D: Dependent: the patient requires 76-100% assistance from the caregiver to complete an activity.

Stretcher Chair: A specialized device used by staff for patients that cannot get out of bed on their own two feet can be pulled over into this chair which is able to go completely flat for the transfer.

Hoyer Lift: a specialized device in which a sling is positioned under the patient in bed and is then hooked onto a lift harness. The lift can dependently lift the patient from bed to chair and back.

## Common Rehab Phrases and Acronyms

OOB: Out of bed

SPT: Stand pivot transfer: The patient is able to take a few steps to a chair or bedside commode

Scot Pivot or Scot Transfer: The patient is unable to stand to transfer but can scoot over pushing with arms to a bedside chair or commode

OM: Oral motor

Hand Over Hand: the therapists' helps to engage in activities by guiding the patients' hands with their own.

AE/AD: adaptive equipment/ adaptive devices

RW: Rolling walker

W/C: Wheelchair

FWW: Front wheeled walker

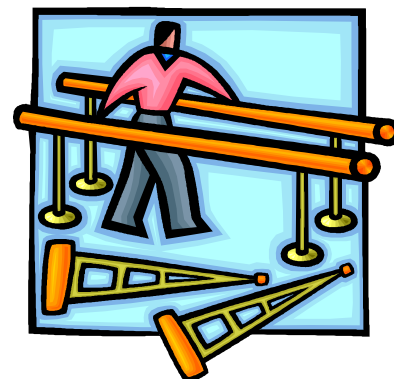
SW: Standard walker

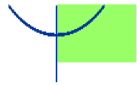
SPC: Single point cane

QC: Quad cane

Therex: Therapeutic exercise

ADL's: Activities of daily living.





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## What is an LTAC?

An LTAC is a Long Term Acute Care Hospital for patients that continue to be acutely ill and require a physician's care each day, just as in a "traditional" hospital. The patients are medically complex and are not going to be ready for discharge in a short period of time.

Carolin's Specialty Hospital has been providing Long Term Acute Care services to the Charlotte region for over six years. Our dedicated team of professional healthcare providers are exceptionally qualified to meet the needs of the LTAC patient.

Each patient at Carolin's Specialty Hospital receives a customized plan of care to meet their specific needs. Each patient's treatment plan is updated weekly by a multidisciplinary team, including the patient and their family. The goal for each of our patients is to return to their highest level of wellness.

**Visit us on the web at [www.cshnc.com](http://www.cshnc.com)**



## A Christmas Profession

Once again we find ourselves at that time of year. Christmas is fast approaching and there is so much to do. Shopping, wrapping presents, decorating, baking, sending Christmas cards, caroling, etc., etc. This is the time of year when we gather with friends and family to celebrate and give thanks.

We belong to an elite profession. Not only are we at the bedside every day of the year, we are also the givers of countless gifts. From a smile and a sure touch to lifesaving interventions and family support; we bless our patients on days when their suffering seems counter to the world's celebration. We have worked our share of holidays and special family occasions. Our

families and friends have had to accept that the time for gift opening and holiday feasting would be altered. Memories of those shifts we have worked range from blessed to mournful.



Be proud of the career you have chosen. I give my thanks and appreciation to each and every one of you for your caring, compassion, comfort, professionalism and excellent nursing care you provide to our patients and families. Know that every day you will touch a life or a life will touch yours.

A Very Merry Christmas and a Happy and Safe New Year. As a cohesive team, Carolin's Specialty Hospital will only excel in 2011.

My wish for you is peace and joy in the knowledge that you continue to make a difference as the greatest of gifts.....A Christmas Professional!!

Kerrie Burns