The New Outlook

July-August 2016



NEXT MEETING

TUESDAY, July 19 7:30 pm

GLENBROOK HOSPITAL

2100 Pfingsten Rd, Glenview, IL

Conference Rooms C & D, 1st Floor

Last Months' Meeting (our 459th)

We were happy to welcome several new members, which seems to be a happy monthly occurrence since we moved to Glenbrook. Judy opened the meeting by talking about the November 5th Regional Education Conference with an update on speakers we can expect. Details on page 9.

Our guest speaker was **Hedy Holleran** from **Hollister**. She talked about Hollister's renewed focus on leakage protection and peristomal skin issues. These are major concerns for all of us. To this end Hollister has come out with barrier products called CeraPlus which are infused with ceramide.

Ceramide is a naturally occurring lipid in the skin which helps prevent water loss that can lead to skin damage and dryness. The CeraPlus skin barrier is infused with ceramide to help protect the skin's natural moisture barrier, maintain good peristomal skin health and decrease trans-epidermal water loss from damaged skin. These barriers are soft and bond with the skin for a comfortable fit.

Our WOCN Madelene Grimm was so helpful, providing additional pouching information and answering questions.

Our next meeting, July 19, will feature an Ice Cream Social and include two special guests: Robert Evans presenting Coloplast products and Vicki Kaminsky presenting Byram Healthcare services.

Attending your first meeting? There are always supportive ostomy veterans to chat with you.

Be sure to notify us if your physical or email address changes so you don't miss an issue or important announcement.

Thanks to everyone who voluntarily receives this newsletter via email. If you have Internet access, please **save us money** by joining our electronic distribution list. To try the electronic version, send e-mail request to: **uoachicago@comcast.net** Be sure to add us to your address book or safe sender's list, and **check your email inbox**. Or a donation of just \$10 will help offset the cost

of your mailed newsletter.



Ostomy Association of Greater Chicago (OAGC)

Established 1975

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Wound Ostomy Continence Nurses (WOCN)

Bernie auf dem Graben	773-774-8000
Resurrection Hospital Nancy Chaiken	773-878-8200
Swedish Covenant Hospital Teri Coha	773-880-8198
Lurie Children's Hospital Jan Colwell, Maria De Ocampo,	773-702-9371 & 2851
Michele Kaplon-Jones University of Chicago	
Jennifer Dore Evanston Hospital	847-570-2417
Kathleen Hudson Rush University Surgeons & Ostomy Clinic	312-942-7088
Robert Maurer, Laura Crawford Rush University Medical Center	312-942-5031
Madelene Grimm	847-933-6091
Skokie Hospital-Glenbrook Hospital North Shore University Health System	
Connie Kelly, Mary Kirby Karen Blum	312-926-6421 312-695-6868
Northwestern Memorial Hospital Kathy Krenz	815-338-2500
Centegra-Northern Illinois Medical Marina Makovetskaja	847-723-8815
Lutheran General Hospital	
Carol Stanley Northwest Community Hospital	847-618-3125
Nancy Olsen, Mary Rohan Little Company of Mary Hospital	708-229-6060
Kathy Garcia, Jola Papiez Advocate Christ Medical Center	708-684-3294
Sandy Fahmy Saint Francis Hospital	847-316-6106
Nancy Spillo Presence Home Care	847-493-4922
Colleen Drolshagen, Jean Heer, Barb Stadler	630-933-6562
Central DuPage Hospital Kathy Thiesse, Nanci Stark (Ginger Lewis-Urology only 708-216-5112)	708-216-8554
Loyola University Medical Center Alyce Barnicle (available on as needed basis o LaGrange Hospital	only) 708-245-2920
Sarah Greich Porter Regional Hospital & Ostomy Clinic Valparaiso, Indiana	219-309-5939 or 219-983-8780

National UOAA Virtual Groups

Continent Diversion Network: Lynne Kramer	215-637-2409
Familial Adenomatous Polyposis (FAP) Foundation: Travis Bray	334-740-8657
Friends of Ostomates Worldwide - USA: Jan Colwell	773-702-9371
GLO Network: Fred Shulak	773-286-4005
Ostomy 2-1-1: Debi K Fox	405-243-8001
Pull-thru Network: Lori Parker	309-262-0786
Quality Life Association: Judy Schmidt	352-394-4912
Thirty Plus: Kelli Strittman	410-622-8563

Upcoming 2016 Meetings at Glenbrook Hospital

TUESDAY, July 19 – Robert Evans, Coloplast Vicki Kaminsky, Byram

AUGUST – NO MEETING

Additional area support groups:

Northwest Community Hospital, Arlington Heights

2nd Thurs at 1:00 pm every other month. Feb, Apr, Jun, Aug, Oct, Dec in The Learning Center, Level B1 of the Busse Center Contact Carol Stanley 847-618-3215, cstanley@nch.org

Rush University Medical Center, Chicago

The first Thursday every month in the Professional Bldg, Suite 1138 Conf Room. Contact Kathleen Hudson 312-942-7088, Kathleen_Hudson@rush.edu

Southwest Suburban Chicago, Evergreen Park

The third Monday at 6:30pm, Little Company of Mary Hospital. Contact Nancy Olesky 708-499-4043 or Edna Wooding 773-253-3726, swscost@gmail.com

Sherman Hospital, Elgin

The second Wednesday of each month at 2 pm. Lower level Conference B. Contact Heather LaCoco 224-783-2458, Heather.Lacoco@Advocatehealth.com or Tom Wright, tomwright122@att.net

DuPage County, Downers Grove

The fourth Wednesday at 7:00pm, Good Samaritan Hospital, in the Red and Black Oak Rooms by the cafeteria. Contact Bret Cromer 630-479-3101, bret.cromer@sbcglobal.net

Aurora

The second Tuesday at 7:00pm, Provena Mercy Center. Contact John Balint 630-898-4049, balint.john@yahoo.com

Will County, Kankakee IL

2:00 p.m. the last Saturday of Feb, Apr, Aug and Oct in the Riverside Medical Center Board Room, next to the cafeteria. Also a June picnic and December holiday party. Charlie Grotevant 815-252-1551, charliegrtvnt@gmail.com

Grundy County, Morris IL

Monthly Meetings at 11:00 AM, the 3rd Saturday at Grundy Administration Bldg., 1320 Union St., Morris, IL. Contact Judy Morey at 815-592-5717 or Kelly Hitt at 815-941-6818.

Lake County Illinois

Hollister in Libertyville,10:00am the 3rd Saturday, every other month. Jan, March, May, July, Sept, Nov. Contact Barb Canter 847-394-1586, barb1234@sbcglobal.net

Loyola University Health System, Maywood

The 2nd Wednesday of the month at 7:15 in the Cardinal Bernadine Cancer Center 2nd floor Auditorium A. Contact Robin Handibode 708-205-6664 or Nanci Stark, WOCN 708-216-8554, nhstark@lumc.edu

Valparaiso, Indiana

Porter Regional Hospital, 1st floor Community Room. 6:30 pm the 4th Thurs., Jan – Oct. Contact Sarah Greich 219-309-5939, Sarah.Greich@porterhealth.com

Here and Now

with Patricia Johnson

There is a little guy that sometimes comes to our meetings. He usually comes with his mom, but has brought his dad and sister. They have been coming off and on for a couple of years. We are always glad to see them!

We have watched this child grow. At first he would sit quietly and play with some electronic gadget. (This shows my age!) Now when he comes he speaks right up, telling us what he has and what has been happening to him. You see, he too has an ostomy. So young. But he is a dear and we think of him as our own.

We listen to his mom as she tells us her frustrations and triumphs. We try to answer her questions and offer advice and understanding.

Unfortunately, this is the only child that comes to our meetings. There are many children and teens with ostomies. A whole section of the ostomy population that is not represented at our meetings. Because they struggle with some of the same things we struggle with, managing the ostomy and acceptance. Trying to figure out what to tell and what to keep to themselves. Wanting to be "normal", wanting to fit in. Except for age, we are not that different.

I wonder how we can get the word out that we are here for them. A place where they are accepted. To know them, their trials and triumphs. Listen to their stories and tell our own. Tell them about the Youth Rally ostomy camp, where everyone with an ostomy is normal.

If you know anyone, child or teen with an ostomy, reach out. Invite them to our meetings. Encourage them to come. Bless them with the sincere knowledge that they will be welcomed. Tell them they will be heard. Share your experience as part of this support group. Rejoice when they come.

I would love to see children and teens at our meetings. It would be awesome. In blessing others we ourselves are blessed.

Life is good

Ostomy ~ The New Normal



Living life to the fullest. You've never been one to let life slow you down. Every challenge is met with the confidence that comes from knowing life is all about the journey. And that confidence is an inspiration to us every day at Hollister.

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> BE CRAZY. BE STUPID. BE SILLY. BE WEIRD. BE WHATEVER. BECAUSE LIFE IS TOO SHORT TO BE ANYTHING BUT HAPPY



Moving Away From Shame and Stigma

by Heather Clark Ph D as transcribed by Debbie Walde CWOCN via Broward Beacon, Broward Ostomy Association



Stigmas – we all have them and are subjected to them.

Heather started with the story of a little girl who grew up on a beautiful Polynesian island. She was born with a birth defect in which her eyes were

two different colors. Also at age 5 she was the only child with platinum blond hair in a school full of lovely little girls with long black hair. These are not the only things that made her different. She had soft baby teeth which required silver caps to protect them. We all know how children and even adults can be when someone looks different than everyone else. She was told what she could do to fix her eyes. She was told to keep her mouth shut – children even called her Jaws after the evil villain in those old James Bond movies. What would a child's reaction be to this negative attention? Shame, anger, embarrassment. Someone even suggested she could become depressed and suicidal.

Stigmas are marks of disgrace, sets of negative beliefs that people have about something. There are two kinds of stigmas; **Societal stigmas** are stereotypes, negative beliefs or thoughts by a society toward an entire group or subclass of people. **Self stigmas** are an individual thinking less of him or herself due to circumstances, qualities, or character. It is self criticism and always negative.

Shame is a feeling of guilt, regret, or sadness because you know you have done something wrong. It is a painful emotion caused by the consciousness of guilt or shortcomings. Shame is something we do to ourselves. It is a thought, how we perceive ourselves and how we think others perceive us. It is your THOUGHT that has everything to do with how you FEEL.

What and how we think is the only way to eliminate self stigma. And when other people say or do hurtful things, it is important to have compassion for their ignorance, for truly it is a fact that they are ignorant of you, your circumstances, your life. Below are tools to help move your thoughts away from stigma and shame:

Deal with your self stigma and own shame.

Look for evidence of your own negative thoughts that are not true. This is called cognitive challenging. Your shame will be replaced by more positive emotions. Type in the words stigma and Ostomy on the Internet. You will see all kinds of people raising awareness and virtually saying "look at me – I have an ostomy and here is how I deal with it". Those individuals sharing their stories on the Internet are helping others to change their self stigmas.

Deal with social stigmas.

Educate ignorant (not knowledgeable) people who lack knowledge about the mechanics of your life.

Here are choices of how to deal with those people: a) have great fun at their expense, b) choose to keep people at a distance, c) show compassion for their ignorance and draw closer by educating them.

Stigma isolates us

Ask yourself if you are going to let other people define you and give them that power to do so? Are you going to expend your time and energy on them instead of something or someone worthy?

Now, going back to that little girl. That special girl grew up with parents and a church family who taught her that she was unique. God had made her special just the way she was. She was "Wonder Woman" with special strength in her teeth. As the years went by, that little girl's unique qualities began to fade with age. Her soft baby teeth fell out for new healthy adult teeth to grow in. Her platinum blond hair became a darker shade of blond. And the two different colors of her eyes even became less noticeable. Who was that little girl? It was Heather Clark herself.

Remember that a stigma is a thought or belief, shame is an emotion. How we think affects how we feel.

Don't let anyone push you around.... Unless you're on a swing, cuz that's just plain FUN



6 Signs You Love Your Ostomy Way Too Much

Featured on OstomyConnection.com, A Hub for Ostomates Reprinted with permission from OstomyConnection.com

You'll be the first to admit it wasn't love at first sight. After all, who finds out they need an ostomy and hears the saxophones from 'Careless Whisper'? (Answer: no one.)

But surgery happened, and you've soldiered through recovery, and now the relationship with your ostomy has changed. Actually, you love it. Actually...you may have a bit of a problem.

Here are six signs you're over the moon about your ostomy:

1. Your stoma has a name. You talk to it. It's literally your friend.

"What do you think, Minerva? Should we add bananas to this smoothie?"

"I'm feeling grumpy today. Don't worry, it's not vou."

"Who's a good stoma? Stan's a good stoma. Who's a good stoma?"

"Psst...I'm on a date, use your inside voice."

Conversations with your ostomy... out loud.... in public. You dare anyone to judge.

2. Your ostomy is permanent and you decide to get a permanent tattoo of your stoma's name.

Other people get their kids' names inked. You got your stoma's name inked.

What? It gave you your life back and you're damn proud of it.

3. You buy it presents.

Your ostomy has its bad days, as we all do, and when they happen you don't hold back with the pampering.

Now your significant other is jealous of your ostomy, because it definitely gets more gifts.

Your partner has also...gently suggested...you put an upper limit on your stoma spending.

It's not your fault all this new bling keeps coming out. Pouch covers, ostomy apparel and underwear, wraps, accessories, etc. Are you actually expected to resist this stuff?!

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4. You show off your ostomy online.

You've gone public. In fact, somewhere along the way, you started posting selfies starring your ostomy on social media.

Using your preferred ostomy-related hashtags.

A few times a month.

Okay, a week.

5. You celebrate your stoma's birthday.

With more gifts and accessories, obviously.

6. You say a quiet "thank you" to your ostomy every time you do something you couldn't do before.

Having an ostomy means not being able to do some things. Your bathroom experience, for example, is somewhat untraditional.

But your ostomy has empowered you to do so many more things. You're not sick anymore, and that means you have the strength and energy to be the person you want to be.

Every time you ride a bike, sit through a movie, try that weird artisanal desert at the café down the street... you say a little "thank you" to the ostomy that rebuilt your health.

FLUIDS AND ELECTROLYTES

UOAA Diet and Nutrition Guide

Electrolyte Balance

Electrolytes refer to the normal chemicals dissolved in body fluids needed to maintain body activity. If electrolytes are out of balance, a person may become weak or ill and may need to take medications by mouth or intravenously.

Electrolyte balance (especially potassium and sodium) is important. When the colon (large intestine) is removed, a greater risk for electrolyte imbalance can occur. Diarrhea, excessive perspiration and vomiting can increase this risk. A person with short bowel syndrome is at high risk. Their electrolytes should be monitored closely. Your diet should include fluids and foods rich in electrolytes. A general rule is to "salt foods to taste." Do not exclude sodium in the diet.

Fluid and Electrolyte Problems

Problem	Symptoms	Treatment	
Dehydration	Increased thirst, dry mouth, dry skin, decreased urine output, fatigue, shortness of breath, headaches, dry eyes abdominal cramping.	Increase fluids (any type, Gatorade/PowerAde high in potassium & sodium) and Daily intake of fluids should be 8-10 (8 oz.) glasses.	
Sodium Depletion	Loss of appetite, drowsiness, headaches, abdominal and leg cramping, feelings of faintness, particularly when standing, cold sensation in arms and/or legs.	Increase intake of foods and beverages high in sodium, such as any regular soup, bouillon, Gatorade/PowerAde.	
Potassium Depletion	Fatigue, muscle weakness, gas, bloating, shortness of breath, decreased sensation in arms and legs.	Increase intake of foods high in potassium, such as orange juice, bananas, Gatorade/PowerAde.	

Foods high in potassium: black-eyed peas, bananas, bouillon, chicken, fish, oranges, pinto beans, potatoes, raisins, tomato or vegetable soup, veal, watermelon and yogurt.

Foods high in sodium: broth, buttermilk, canned soups, canned vegetables, cheese, soy sauce, table salt, tomato juice and commercially prepared foods.

Preparing and Utilizing Electrolyte Drinks

Excessive fluid loss of more than one quart of liquid stool in 24 hours can cause dehydration and require medical attention. (Normal ileostomy pouch emptying is five to eight times daily.) Balance intake of fluids with the output from the stoma. Water is an excellent natural beverage; however, over-consumption of water can wash away electrolytes in the body. Drink a combination of water and electrolyte beverages. The glucose ingredients in electrolyte drinks aid in absorption of electrolytes.

Homemade Electrolyte Drink

1 teaspoon salt 1 teaspoon baking soda 1 teaspoon white Karo syrup 1 6-ounce can frozen orange juice Add water to make one quart, mix well

Or... Quick Fix

Orange juice - 4 ounces Water - 4 ounces Pinch of salt

Diluted Electrolyte Drinks (Brand Names)

(Improve taste, tolerance, lower calories, and decrease cost)

1/2 quart (500 cc) – commercial electrolyte drinks 1/2 quart (500 cc) - water

1 teaspoon salt substitute (potassium chloride) Mix well

Water

Water is an essential nutrient needed by every body cell. Water controls body temperature, serves as building material and solvent, and transports nutrients. Thirst is a signal that the body needs fluids. Daily losses must be replaced.

Any liquid containing water (soda, milk, juice, etc.) helps to meet your daily requirement. You can also get water from the food you eat. (e.g., tomatoes have a 94 percent water content). Drinking coffee or tea will interfere with the ability to stay hydrated because they both cause the kidneys to increase urine and salt output. Be sure when drinking coffee or tea to increase your water consumption to counter balance the higher output.

Encourage fluid intake of eight to ten (8 oz.) glasses of liquids each day. Drinking more fluids is helpful in flushing out the kidneys, eliminating impurities in the blood, and helping you to maintain the proper electrolyte balance.

> Skin should return to position after lightly pinched. Skin that remains elevated (tented) indicates dehydration.

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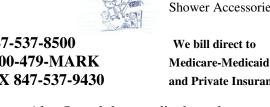
People with urinary diversions no longer have a storage area, a bladder, for urine. Therefore urine should flow from the stoma as fast as the kidneys can make it. In fact, if your urinary stoma has no drainage for even an hour, it is time for concern.

The distance from the stoma to the kidney is markedly reduced after urinary diversion surgery. Any external bacteria have a short route to the kidneys. Since kidney infection can occur rapidly and be devastating, prevention is essential.

Wearing clean appliances and frequent emptying are Equally important is adequate fluid intake, vital. particularly fluids which acidify the urine. In warm weather, with increased activity, or with a fever, fluids should be increased to make up for body losses due to perspiration and increased metabolism.

It is important that you be aware of the symptoms of a kidney infection:

Elevated temperature Chills Low back pain Cloudy, bloody urine Decreased urine output

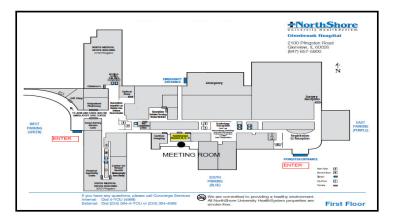


New Beginnings....

OAGC general meetings are now at Glenbrook Hospital, in the first floor Conference Rooms C-D.

There is **abundant free parking** including many handicapped spaces directly in front of the hospital. An information desk is just inside the Hospital's Pfingston Entrance. Upon entering, take the hallway to the left.

We exist to support you, you support us so we exist.



Glenbrook Hospital is approximately 4 miles north of Lutheran General. It is bordered by Pfingston Rd east, Hospital Dr. south and Landwehr Rd. west.

From I-294 take Willow Rd exit east to Landwehr Rd south. From I-94 take Willow Rd. exit west to Pfingston Rd. south. From Waukegan (43) take Lake or Willow west to Pfingston. The parking lot entrance is on Hospital Dr.



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Practical Support American Cancer Society

You may need to learn about programs or discuss practical concerns when you are coping with a cancer diagnosis. We understand that life can get complicated when you are trying to take care of your health and manage day to day life. You can choose from different kinds of information and resources that apply to your situation. You might also find that you need the help of a counselor to review your situation and point you in the right direction.



Today is a great day... for a Great Day!

Saturday, November 5, 2016

REGIONAL OSTOMY EDUCATION CONFERENCE

Presented by the

Ostomy Association of Greater Chicago

and

Hollister, Inc.

The Double Tree Hotel

75 W. Algonquin Road, Arlington Heights, IL 60005 Arlington Heights Rd exit off I-90

Don't miss this opportunity to learn all about ostomies, focusing on both medical and lifestyle issues.

Additional Sponsorship provided by Coloplast, Convatec, Mark Drug, MPM Medical

Speakers:

Dr. Marc Singer, Colon and Rectal SurgeonDr. Omar Khan, GastroenterologistUrologist TBADr. Eugene Yen, GastroenterologistMs. Jan Colwell, CWOCN, APNDr. Tiffany Taft, PsychologistMs. Stephanie Horgan, Clinical Social WorkerMs. Kesuri Sethuraman, Physical TherapistDietician TBALaura Cox, Ostomy LifestyleSessions for family/spouses

Stoma Clinic:

Organized and staffed by Carol Stanley, CWOCN

You will need to bring an appliance change.

Information on making an appointment will be provided closer to event.

Schedule:

8:00am - Check-in/Continental Breakfast (sponsored in part by Mark Drug, MPM Medical)
8:00am - 4:00pm - Vendor Fair
9:00am - 5:00pm - Sessions with lunch break (sponsored in by Coloplast)
9:00am - 4:00pm - Stoma Clinic
5:00pm - 8:00pm - Casual Hawaiian Pa'ina (party) (Sponsored by Convatec) with Pu Pu's (light bites, pun intended!)

Parking is free. Pre-registration cost is \$25/patient; \$20/spouse, family; children under 12 are free. Registration form on next page. Or register online with a credit card.

A Vendor Fair will feature Manufacturers, Distributors and Healthcare Providers, as well as patient Education and Support information.

If any attendee wants to stay over night, in addition to the Double Tree, there are a variety of options; a Courtyard (right across the street), Red Roof Inn and Motel 6 on Algonquin Rd, and a Holiday Inn Express, Wingate Inn and Comfort Inn on Arlington Heights Rd.

Our website <u>www.uoachicago.org</u> is continually updated as Speakers and Vendors are confirmed. You will also find links to the area hotels.

REGIONAL OSTO Saturday Noveml	DMY EDUCATIO					
	REGISTRATION					
NAME						
ADDRESS						
EMAIL						
TYPE OF SURC	GERY (check what you h	nave or will hav	re)			
Colostomy D Ileostomy DUrostor	ny 🗖 J-Pouch 🗖 Contin	ent Urostomy	□Other			
Are you a member of a support group?	Name of group	,				
Name of Attendees (for badge)	Relationship	Cost	Box lunch choice			
1 2 3 4	Spouse \$20 Family/Friend \$20		(circle one) Turkey Beef Veg Turkey Beef Veg Turkey Beef Veg Turkey Beef Veg			
C	Children under 12 (no char	ge)				
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Total: Adults (12+)	Children(<12)	Total Co	st \$			
Will you attend the evening social even There is no additional charge, but we		NO				
Check sessions of interest to you: Physical Therapist Psychologist (p Ask the Nurse Lifestyle Mee Other	eatient)	mily/caregiver)	Ask the Doctor			
>Please note - you are <u>not</u> register purposes only.	ed for any specific sessions	s. This informa	tion is for scheduling			
	payable to: ny Association of Greater (c/o Judy Svoboda/Presider	-				
	605 Chatham Circle Algonquin, IL 60102					
Or register online using a credit card:						
	10					

Ostomy Association of Greater Chicago

Confidential Membership Application

We invite you to join our association. You are especially welcome if you have an ostomy, are preparing for surgery, are a healthcare professional and/or have a loved one who has had surgery. We are a completely volunteer-operated ostomy support group. Our mission is to support, educate and advocate for people with ostomies.

Name								
Address								
City			State_			_Zip		
E-mail				Phone				
Type of Ostomy:	Colostomy	lleostomy	Urostomy	Continen	t Proced	dure		
Date of surgery			_ Age Group	<21 22–36	37–50	51–65	66–80	80<
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Attend one of our participate in our as free (our funds com	ssociation's leade	ership. We alwa	ays need talen	ted people to	o share i			
		Judy	v Svoboda, Pr	esident				

Judy Svoboda, President 605 Chatham Circle, Algonquin, IL 60102

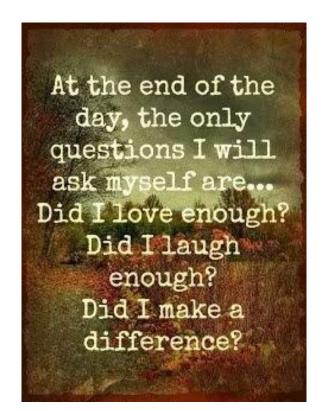
• A very special thank you to everyone who donates to our association. Our largest expense, the cost of printing and mailing <u>this</u> newsletter, is continually increasing and is only made possible through the generous donations of our members.

To make a tax-deductible donation, please make check payable to Ostomy Association of Greater Chicago or OAGC and bring to a meeting, or send to

> Tim Traznik Treasurer/OAGC 40 Fallstone Drive Streamwood, IL 60107

Donations can also be made online using a credit card: www.uoachicago.org/donations

Without you we don't exist!



The information contained in this newsletter and on our website is intended for educational/informational purposes only, and is not a substitute for the medical advice or care of a doctor, surgeon, WOCN, licensed pharmacist or other health care professional.

The New Outlook 267 Noble Circle Vernon Hills, IL 60061



We invite you to attend our general meetings at Glenbrook Hospital. Relatives, friends, doctors, and nurses, as well as our members—any interested people—are invited and welcome. Our association has a team of trained volunteer listeners available to discuss the concerns of patients. Healthcare professionals and families are urged to use this free benefit. When you know of a patient who would like to talk to a person who has been there and done that, please call the visiting chairperson (see page 2).