Ostomy Association of Greater Chicago

The New Outlook

October 2016



NEXT MEETING

TUESDAY, Oct. 18 7:30 pm

GLENBROOK HOSPITAL

2100 Pfingsten Rd, Glenview, IL

Conference Rooms C & D, 1st Floor

Last Months' Meeting (our 461st)

Our September meeting was well attended with several new people. The meeting was an open forum. We covered topics like hernia surgery, blockages and NG tubes, air travel and security questions for international travel. As always it was awesome to see the openness and willingness of the group to be candid and offer advice and knowledge. Peggy and Danah offered information based on their experience as both RNs and ostomates.

Our next meeting, Oct. 18, will incorporate "Preparing for Winter" and include "Ask the Nurse", featuring WOCN, Madelene Grimm.

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

Mark your calendar for our Holiday Party, Dec 6.

Ostomy ~ The New Normal

www.uoachicago.org

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

The future of our (USPS) mailed newsletter is currently under review.

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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.,	()
Bernie auf dem Graben	773-774-8000
Resurrection Hospital	
Nancy Chaiken	773-878-8200
Swedish Covenant Hospital	772 000 0100
Teri Coha	773-880-8198
Lurie Children's Hospital	772 702 0271 0 2071
Jan Colwell, Maria De Ocampo,	773-702-9371 & 2851
Michele Kaplon-Jones	
University of Chicago	
Jennifer Dore	847-570-2417
Evanston Hospital	
Kathleen Hudson	312-942-7088
Rush University Surgeons & Ostomy Clinic	
Robert Maurer, Laura Crawford	312-942-5031
Rush University Medical Center	
Madelene Grimm	847-933-6091
Skokie Hospital-Glenbrook Hospital	
North Shore University Health System	
Connie Kelly, Mary Kirby	312-926-6421
Karen Blum	312-695-6868
Northwestern Memorial Hospital	
Kathy Krenz	815-338-2500
Centegra-Northern Illinois Medical	
Marina Makovetskaia	847-723-8815
Lutheran General Hospital	
Carol Stanley	847-618-3125
Northwest Community Hospital	
Nancy Olsen, Mary Rohan	708-229-6060
Little Company of Mary Hospital	
Kathy Garcia, Jola Papiez	708-684-3294
Advocate Christ Medical Center	
Sandy Fahmy	847-316-6106
Saint Francis Hospital	
Nancy Spillo	847-493-4922
Presence Home Care	0.7.55.522
Colleen Drolshagen, Jean Heer, Barb Stadler	630-933-6562
Central DuPage Hospital	050 755 0502
Kathy Thiesse, Nanci Stark	708-216-8554
(Ginger Lewis-Urology only 708-216-5112)	, 00 210 000 1
Loyola University Medical Center	
Alyce Barnicle (available on as needed basis of	only) 708-245-2920
LaGrange Hospital	700 210 2020
Sarah Greich	219-309-5939 or 219-983-8780
Porter Regional Hospital & Ostomy Clinic	217 307 3737 01 217 703-0700
1 orier Regional Hospital & Oslomy Clinic	

National UOAA Virtual Groups

Valparaiso, Indiana

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

<u>Upcoming 2016 Meetings at Glenbrook Hospital</u> TUESDAY, Oct. 18 – Winterize

TUESDAY, Dec. 6 - Holiday Party

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, barb 1234@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

November 2014 was the first ever OAGC one day conference. I had had my ileostomy for only two years and had never been to a conference. I didn't know what to expect and was more than pleasantly surprised.

When we walked into the big meeting room I didn't look around and wonder if there was anyone else with an ostomy because we all had them, (except for a few spouses and friends.) People were talking and friendly, ready to tell me about themselves and asking about me. The atmosphere was alive and exciting. I was glad to be there.

A lot of planning went into the conference and it was evident by the way things ran smoothly. The speakers were great, informed and open. I listened intently as they told their stories, taught about life with an ostomy and shared insights on coping with situations that come up in the life of an ostomate.

The day ended with a "pu pu" party. It was a chance to let down your hair and enjoy new friends. We talked and laughed, told jokes and related funny incidents in our lives. I will never forget Jerry, a member of our group who has since passed away, laughing and telling jokes. I remember his smiling face as he told jokes that night. I left feeling energized, capable of doing anything.

Now, two years later another one day conference is planned for November 5th. Doctors and nurses are volunteering their time. They come prepared, wanting to help us because they really care about us and want us to thrive. There will be a stoma clinic where you can meet privately with a WOCN, who will examine your stoma and answer questions, offer advice. A vender fair to see what is new and what is available to make life with a stoma a little easier. I am looking forward to the speakers, to hear what they have to tell us.

Again so much thought has been taken in the planning of this conference. It is scheduled for a Saturday so people won't have to take time from work. It is local so hopefully travel will not prevent people from coming. It is all on one floor for easy maneuverability. And, it is affordable.

(More details on page 9)



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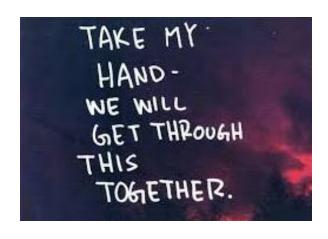
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I hope you will come. The food will be great. Opportunities abound. New friends to make. New experiences. The "pu pu" party fun. And lastly, the amazing fact that with 150 ostomates in one room and THERE WAS NO ODOR!

Life is good



Going Gluten Free Just Because?

Harvard Health

After being confined to health-food stores for years, gluten-free foods now show up everywhere. Supermarket aisles abound with products proudly labeled "Gluten free," and many restaurants now offer gluten-free options.

For people who can't tolerate gluten, a protein found in wheat, rye, and barley, this abundance is a blessing. But lately it's become hip to go gluten-free. Based on little or no evidence other than testimonials in the media, people have been switching to gluten-free diets to lose weight, boost energy, treat autism, or generally feel healthier. This doesn't make much sense to Dr. Daniel A. Leffler, director of clinical research at the Celiac Center at Beth Israel Deaconess Medical Center in Boston.

"People who are sensitive to gluten may feel better, but a larger portion will derive no significant benefit from the practice. They'll simply waste their money, because these products are expensive," says Dr. Leffler, who is also an assistant professor of medicine at Harvard Medical School.

How gluten causes trouble

People with celiac disease can't tolerate gluten, not even small amounts. Just 50 milligrams of the protein—about the amount in one small crouton—is enough to cause trouble. In people with celiac disease, gluten triggers an immune response that damages the lining of the small intestine. This can interfere with the absorption of nutrients from food, cause a host of symptoms, and lead to other problems like osteoporosis, infertility, nerve damage, and seizures.

A related condition called gluten sensitivity or nonceliac gluten sensitivity can generate symptoms similar to celiac disease but without the intestinal damage.

Not long ago, celiac disease was diagnosed by a process of elimination. Today it can be identified with a blood test for the presence of antibodies against a protein called tissue transglutaminase. A biopsy of the intestine confirms the diagnosis.

Going gluten free

Avoiding gluten means more than giving up traditional breads, cereals, pasta, pizza, and beer. Gluten also lurks in many other products, including frozen vegetables in sauces, soy sauce, some foods

made with "natural flavorings," vitamin and mineral supplements, some medications, and even toothpaste. This makes following a gluten-free diet extremely challenging.

If you're determined to go gluten-free, it's important to know that it can set you up for some nutritional deficiencies. Fortified breads and cereals have become a major source of B vitamins in the United States. Although breads made with white rice, tapioca, and other gluten-free flours are becoming more common, they are generally not fortified with vitamins. This can be a problem for anyone, but it's especially worrisome for women who are pregnant or may become pregnant. They need vitamin B₉, more commonly known as folate or folic acid, to prevent birth defects. Taking a gluten-free multivitamin-multimineral supplement is a good idea for anyone trying to avoid gluten.

Whole wheat is also a major source of dietary fiber, which the bowels need to work properly. "The average American diet is deficient in fiber," says Dr. Leffler. "Take away whole wheat and the problem gets worse." It's possible to get the fiber you need from other grains, such as brown rice or quinoa, or from fruits, vegetables, and beans, but you'll need to make the effort.

If you think you might have celiac disease or gluten sensitivity, it's best to see a doctor *before* going gluten free. Once a person has avoided gluten for a while, it becomes difficult to establish if he or she has celiac disease, gluten sensitivity, or neither.

There's one more thing you might consider doing: keep your dietary choice to yourself. The more than 300,000-plus people in this country with celiac disease have to follow a gluten-free diet, because the tiniest taste of gluten will trigger debilitating gastrointestinal discomfort. It's time consuming, expensive, and restrictive. "It's a gigantic burden for those who have to follow it," says Dr. Leffler. "They get frustrated when they hear how wonderful this diet is."

What lies behind us and what lies before us are tiny matters compared to what lies within us.

--Ralph Waldo Emerson

A GIFT OF TIME

Excerpted from UOAA UPDATE April 2014 (The Pacesetter, Ostomy Assoc. of St. Paul, May/June 2014)

What does your ostomy mean to you? Does it mean a constant nuisance and care, problems, embarrassment, leakage and resentment? Or do you relegate it to a significant but minor part of your daily routine and now enjoy a new lease on life?

What would have happened to you if the surgery hadn't been done? Did you get to choose between a box six feet under, or a pouch on your belly? That doesn't leave much room for negotiation, does it? A surgical diversion to create an ostomy or an internal pouch is usually done as a life-saving procedure. Some are temporary solutions to an acute problem, and some are permanent diversions. Some are done as cures for whatever ailed you in the first place, and some alleviate a lot of worry, pain, misery and medical expense. All of them buy you a GIFT OF PRECIOUS, EXTRA TIME!

For those who have been given that GIFT OF TIME, what are you going to do with it? Are you going to waste it—now that you have it—or are you going to do something productive or memorable with it? Are you going to crawl into a psychological hole and remain there, feeling sorry for yourself until your time runs out, or are you going to make a difference in the world around you? Are you going to appreciate and give thanks for good health, family, friends, and live life to the fullest, making good use of the time you have left? THE CHOICE IS YOURS!



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Dear Crohn's,

It's always the same thing with you. "I'm sorry. I didn't mean it. Let's just start over. Take this medicine, and I'll change. I'll be good to you this time, treat you right, the way you deserve, baby. I swear." I realized this is abuse! You and I are in an abusive relationship, and I'm not going to take it anymore.

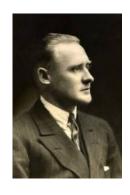
If you're reading this letter, it means the police are currently escorting you out of my apartment. All I had to do was tell the court how many times you put me in the hospital and that was it. Everyone was convinced you need to go. Goodbye, Crohns. Go find some other victim, because this one is starting a new life, and it's going to be a great one without you.

--Anonymous

A strong positive mental attitude will create more miracles than any wonder drug.

Actress, Patricia Neal

Someone you should know...



Reginald Joseph Mitchell CBE, FRAeS, (20 May 1895 -11 June 1937) was an English aeronautical engineer, who worked for Supermarine Aviation. Between 1920 and 1936 he designed many aircraft. He is best remembered for his racing seaplanes, which culminated

in the Supermarine S.6B, and an iconic World War II fighter, the Supermarine Spitfire. The Spitfire was credited with helping to win the Battle of Britain.

In August 1933, Mitchell underwent a colostomy to treat rectal cancer. Despite this, he continued to work, not only on the Spitfire, but also on a four engine bomber, the Type 317. Unusual for an aircraft designer in those days, he took flying lessons and got his pilot's license in July 1934.

Pneumonia Q & A Medicine.net

What is pneumonia?

Pneumonia is a type of lung infection caused by bacteria, viruses, or fungi. It can also be caused by inhalation of certain chemicals that irritate the lung tissue. Pneumonia may affect one or both lungs.

Bacterial pneumonia can develop on its own, or after a person has had a cold or the flu. Respiratory diseases or viral infections can put people at greater risk for getting bacterial pneumonia. Risk factors for getting bacterial pneumonia include illness, recent surgery, being immune compromised (such as people with HIV/AIDS or cancer or on certain medications), old age, or malnutrition. When the body's immune system is compromised, bacteria that live in healthy throats can move to the lungs, causing pneumonia and systemic infection.

What is walking pneumonia?

The definition of "walking pneumonia" simply refers to a mild case of pneumonia, where a person is not seriously ill and does not require bed rest or hospitalization. It is usually caused by mycoplasma pneumoniae (M. pneumonia) bacteria. Symptoms are

mild, and it most commonly affects school-aged children and young adults under the age of 40.

Is pneumonia life-threatening?

While many cases of pneumonia can be mild such as with walking pneumonia, left untreated some cases of pneumonia can be serious and even life-threatening. Thousands of people die or are hospitalized from pneumonia each year. Those most at risk of severe infection from pneumonia include smokers, people with heart or lung disease, infants and young children, adults age 65 and older, and people with chronic medical conditions or weakened immune systems. If you have risk factors for severe pneumonia and you develop a cough that won"t go away, shortness of breath, chest pain, fever, or you feel worse after recovering from a cold or the flu, see your doctor.

What are symptoms of pneumonia?

Common symptoms of pneumonia include:

- Cough (may produce yellow-green or bloody mucus)
- Fever and chills
- Shortness of breath, sometimes only on exertion
- Chest pain when you cough or inhale deeply
- Headache
- Sweating and clammy skin
- Loss of appetite
- Fatigue
- Confusion (especially in the elderly)

Symptoms of pneumonia may be mild to severe, and can vary depending on your age and health, and what type of pneumonia you have.

Is pneumonia contagious?

This is a tricky question. Technically, pneumonia refers to inflammation of the lungs which in itself is not contagious. However, causes of pneumonia such bacteria or viruses can be contagious. Pneumonia-causing bacteria or viruses can be spread from person to person from respiratory droplets in the air, such as when a person coughs or sneezes. These particles can also land on surfaces such as doorknobs or tables, where another person can touch the surface and then their face and become infected. Mycoplasma pneumoniae (M. pneumonia) bacteria that often causes walking pneumonia (mild methicillin-resistant Staphylococcus aureus (MRSA) bacteria, and tuberculosis are all highly contagious. A person can be contagious from one or two days, to up to two weeks.

If the cause of pneumonia is due to aspiration (inflammation of the lungs that results from inhalation of foreign material, such as food, liquid, saliva, or vomit) it is not contagious.

Is there a vaccine against pneumonia?

There are currently vaccines to prevent two types of pneumonia. These vaccines won't prevent all cases of pneumonia but they can reduce the risk of severe and life-threatening complications. PCV13 (Prevnar 13) is recommended for all children younger than 5 years old, all adults 65 years or older, and people 6 or older with certain risk Pneumococcal polysaccharide vaccine (PPSV23 or Pneumovax) is recommended for children older than 2 years old, and all adults who are 65 years or older who are at high risk for pneumococcal disease. Those at high risk include people who smoke or abuse alcohol, have chronic medical conditions (asthma, diabetes, heart or lung disease, cirrhosis of the liver), weakened immune systems (HIV/AIDS, kidney failure, damaged or removed spleen), sickle cell disease, are taking medication to prevent organ transplant rejection, or are receiving chemotherapy. Side effects of pneumonia vaccines are usually mild and temporary, and include injection site reactions (redness, tenderness), low fever, loss of appetite, muscle soreness, or irritability.

Adult Immunizations

Peggy Bassrawi, RN

The following recommendations are from the CDC for adult immunizations. Before getting ANY immunizations, always check with your doctor first. A flu shot should be given annually between the end of September and the end of November. The shingles vaccine (herpes Zoster) is only needed once in a lifetime and should be given on or after age

There are 2 pneumonia vaccines that should be given after age 65. The first vaccine is the PCV13 (Prevnar) and then second vaccine is the PPSV23 (or pneumococcal 23) and should be given one year after the first vaccine.

If you are going to be a new grandparent, then you should get a Tdap (tetanus, diphtheria, acellular pertussis) vaccine. The pertussis vaccine (whooping

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cough) will protect the infant. Every 10 years after one Tdap you can get a Td (tetanus and diphtheria) vaccine.

If you are traveling overseas, you may need to get the hepatitis A, hepatitis B, polio, or other vaccines. You can get these other unique vaccines at a travel medicine clinic or look on the CDC website and enter travel.

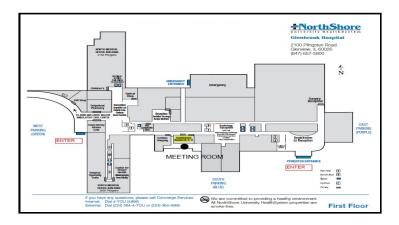


New Beginnings....

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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Much too oft we make life gloomy—
When happy we might be,
If we gathered more of sunshine,
And not dark shadows see.
--ARDELIA COTTON BARTON, Thoughts

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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**, **Abbvie**, **Fortis**, **Shield Healthcare**, Convatec, Mark Drug, MPM Medical

Speakers:

Dr. Marc Singer, Colon and Rectal Surgeon Dr. Omar Khan, Gastroenterologist Urologist Dr. Leslie Deane

Dr. Eugene Yen, Gastroenterologist Ms. Jan Colwell, APN, CWOCN Dr. Tiffany Taft, Psychologist

Ms. Stephanie Horgan, Clinical Social Worker Ms. Kesuri Sethuraman, Physical Therapist

Dietician TBA Laura Cox, Ostomy Lifestyle Sessions for family/spouses

Stoma Clinic:

Organized and staffed by Carol Stanley, CWOCN You will need to bring an appliance change.

To make an appointment for the Stoma Clinic (highly recommended!) please call 847-618-4968. Mention the Nov. 5th Regional Ostomy Conference. Appointment line provided by Northwest Community Hospital.

Schedule:

8:00am - Check-in/Continental Breakfast (sponsored by Fortis, Shield)

8:00am - 4:00pm - Vendor Fair

9:00am - 5:00pm - Sessions with lunch break (sponsored 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. Exhibitors include Hollister, Coloplast, Shield Healthcare, Fortis Medical, Abbvie, Convatec, MPM Medical, Mark Drug, Stoma Cloak, Byram Healthcare, C&S Pouch Covers, UOAA, FOW, Youth Rally, CCFA and more.

If an 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. You will find links to the area hotels on our website.

Our website <u>www.uoachicago.org</u> is continually updated as Speakers and Vendors are confirmed.

REGIONAL OSTOMY EDUCATION CONFERENCE

Saturday November 5, 2016 Arlington Heights, Illinois

REGISTRATION

NAME					
ADDRESS					
EMAIL					
TYPE OF SUR	GERY (check what you h	nave or will hav	ve)		
□ Colostomy □ Ileostomy □ Urosto	my 🗖 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 (circle one)		
1	Self	\$25	Turkey		Veg
2		\$20	Turkey		Veg
3		\$20	Turkey	Beef	Veg
4		\$20	Turkey	Beef	Veg
	Children under 12 (no charg	ge)			
1. 2.			Turkey Turkey		_
Total: Adults (12+)	_ Children(<12)	Total Co	st \$		
Will you attend the evening social ever There is no additional charge, but we Check sessions of interest to you: Physical Therapist Psychologist (Ask the Nurse Lifestyle Me Other	e need a count for catering. Colo-rectal Surgeon Urol patient) Psychologist (far	mily/caregiver)	□Ask the l	Doctor	
>Please note - you are <u>not</u> registe purposes only.	red for any specific sessions	s. This informa	tion is for s	chedul	ing
Please send this form with checl	c pavable to:				
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	c/o Judy Svoboda/Presider	_			
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	Algonquin, IL 60102				

Or register online using a credit card: www.uoachicago.org

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.

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Date of surgery			Age Group	<21 22–36 37–50	51–65	66–80	>08
Donation enclosed \$_		· · · · · · · · · · · · · · · · · · ·	(optional)				

Attend one of our general meetings. There are always friendly people to talk with you. You may even want to participate in our association's leadership. We always need talented people to share in our good work. Membership is free (our funds come primarily through donations). Please mail this application to

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 this 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!

October is Breast Cancer Awareness Month



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



If you are not the person to whom this is addressed, and/or you no longer need/want to receive this newsletter, please let us know using the email or phone of our president on page 2. We don't have the funds to continue unnecessary mailings.

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).