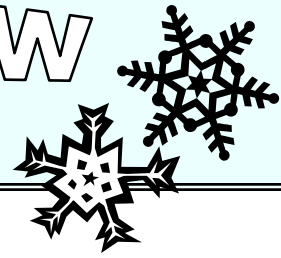


SC-HCQU View

Facilitate-Educate-Communicate



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EMTALA

“A PATIENT’S RIGHT TO EMERGENCY CARE”

~ Star Long, RN

What is EMTALA? The Emergency Medical Treatment and Labor Act is a statute which governs when and how a patient may be (1) refused treatment or (2) transferred from one hospital to another when he is in an unstable medical condition. EMTALA was passed as part of the “COBRA law of 1986” and part of the US Code governing Medicare.

EMTALA is intended to ensure that all people have equal access to emergency treatment regardless of their ability to pay, though it does not apply only to people without insurance. The law applies to hospitals that participate in Medicare and to all patients who seek emergency treatment at such hospitals. When supporting people with disabilities, staff may be involved in accessing emergency care for them. Staff who understand EMTALA, know that when bringing the consumer to the emergency department requesting an examination or treatment, he must be provided with an appropriate medical screening exam to determine if he is suffering from an “emergency medical condition. If he is, the hospital is obligated to provide him with treatment until he is stable, or transfer him to another hospital for appropriate treatment. This is the hospital’s fundamental obligation towards a patient presenting to an emergency department.

The definition of an emergency medical condition provided under the statute is:

“A medical condition manifesting itself by acute symptoms of sufficient severity (including severe pain) such that the absence of immediate medical attention could reasonably be expected to result in placing the health of the individual ... in serious jeopardy, serious impairment to bodily functions, or serious dysfunction of any bodily organ or part ...”

When a situation arises that will likely lead to a serious threat to life or limb in the absence of immediate medical attention, staff supporting consumers are obligated to seek an emergency medical screening at a designated emergency department, and the hospital is obligated to evaluate and stabilize the condition.

EMTALA is not a law that is clearly black and white, but gives general guidance to those involved in providing emergency care. EMTALA guarantees that Emergency Care is a Patient’s Right.

Sources:

1. 42 Code of Federal Regulations 482.12, 489.20, 489.24
2. www.emtala.com
3. www.nursingspectrum.com 19-21, October 24, 2005



Note: This article is for information only and is not a substitute for legal advice.

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January

National Health Awareness Month

National Birth Defects Prevention Month

askus@marchofdimes.com

www.marchofdimes.com

National Blood Donor Month

publicrelations@aabb.org

www.aabb.org

National Folic Acid Awareness Week (9-15)

info@folicacidinfo.org

www.folicacidinfo.org/campaign/

National Galucoma Awareness Month

info@preventblindness.org

www.preventblindness.org

Thyroid Awareness Month

info@aace.com

www.aace.com



Remember!



National Wear Red Day

The South Central HCQU will be visiting day programs during the week of January 30th - Feb 3rd, with the good news that both men and women can lower their risk of heart disease by as much as 82% by leading a healthy lifestyle. Anyone can participate by showing off a favorite red dress, shirt, tie or sweater.

During the visit, the HCQU staff will provide fact sheets and red rubber bracelets to all participants. The centerpiece of the campaign is the Red Dress – the national symbol for women and heart disease awareness. What's a Red Dress have to do with it? A simple Red Dress works as a visual red alert to get the message heard loud and clear:

"Heart Disease Doesn't Care What You Wear – It's the #1 Killer of Women."

Please join in and help spread the word about women and heart disease. If you would like to participate in this event, please call your HCQU Nurse or the HCQU Office for more information.

www.nhlbi.nih.gov

GIVE BLOOD - THE GIFT OF LIFE

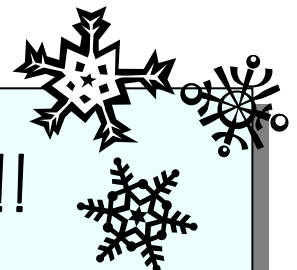
~ American Red Cross ~

There is a tremendous growing need in our country for blood and the supply in the U.S. is consistently low. There was a heart-warming response to this need in the wake of the September 11th tragedy and Hurricanes Katrina and Rita. But the day to day needs continue beyond these catastrophic events. Blood collection centers need a steady stream of donors, daily, as blood must be used within 42 days after it is donated.

Donating is easy, painless, and only takes about an hour of your time. Call your local blood center today to schedule an appointment to donate. Some of the people you may be helping may have blood disorders, major burns, cancer, be an accident victim, a newborn, or a child with leukemia--- They are your neighbors, maybe even your relative.

Make a difference--- give blood.

Snow!!

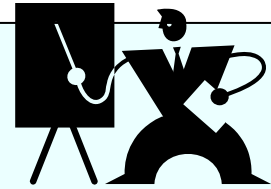


What do you do if you are registered for a SC-HCQU training and the weather is snowy and terrible??

Before traveling all the way to the training site, call for cancellation information at **717-909-3858** and listen to the message.

If the weather is bad and the training has to be cancelled, we will post that information on the **Cancellation Info line.**

South Central HCQU Regional Trainings



Trainings are free, but registration is required.

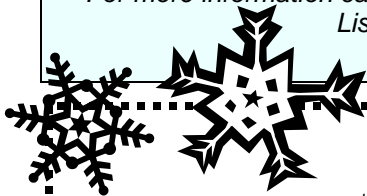
- **Genetics & MR** with Kimberly King-Spohn – January 23, 2006 from 10:00 am - 12:00 noon @ Lancaster County Public Safety Training Center, 101 Champ Blvd., Manheim – **Registration Deadline: January 9 before 4:00 pm** (Snow Date January 25, 10:00 am - 12:00 noon)
- **Grief & Coping With Death and Dying** – January 27, 9:30 am - 12:30 pm @ Mountain Valley Center Training Building, 474 Grant Street, Chambersburg – **Registration Deadline: January 20 before 4:00 pm**
- **De-Stress the Discharge & Communicating with Healthcare Professionals** – February 3, 2006 from 9:00 am-12:00 pm @ Lebanon County MH/MR, 220 E. Lehman St. Lebanon – **Registration Deadline: January 27 before 4:00 pm**
- **Substitute Health Care Decision Making** with Linda and Bob Derr – February 16, 2006 from 9:00 am - 3:30 pm @ Lebanon MH/MR, 220 E. Lehman Street, Lebanon – **Registration Deadline: February 2 before 4:00 pm**
- **Nurses' Training Day** – April 5, 2006 from 10:00 am - 2:30 pm @ Hershey Church of the Nazarene, 986 E. Governor Road, Hershey
- **Substitute Health Care Decision Making** with Linda and Bob Derr – April 6, 2006 from 9:00 am – 3:30 pm @ Typical Life Corp., North East Plaza, North George Street, Manchester – **Registration Deadline: March 23 before 4:00 pm**
- **Consumer Health Fair** – May 19, 2006 @ Chambersburg Recreation Department, 235 South 3rd Street, Chambersburg – look for more information in future editions of *The HCQU View*

The following trainings are co-sponsored by the
York/Adams Training Network

- **Anxiety Disorder & Bipolar Disorder** – January 12, 2006 from 10:00 am-12:00 pm @ Typical Life Corp., North East Plaza, North George Street, Manchester – **Registration Deadline: January 5 before 4:00 pm**
- **Fall Prevention & Body Mechanics** – January 24, 2006 from 1:00 pm – 3:00 pm @ Bell Socialization Services, 160 South George Street, York – **Registration Deadline: January 17 before 4:00 pm**
- **Bowel Management & Hypertension** – February 9, 2006 from 10:00 am – 12:00 pm @ Typical Life Corp., North East Plaza, North George Street, Manchester – **Registration Deadline: February 2 before 4:00 pm**
- **Osteoporosis & Wellness** – February 28, 2006 from 1:00 pm – 3:00 pm @ Bell Socialization Services, 160 South George Street, York – **Registration Deadline: February 21 before 4:00 pm**
- **Schizophrenia** – March 9, 2006 from 10:00 am – 12:00 pm @ Typical Life Corp., North East Plaza, North George Street, Manchester – **Registration Deadline: March 2 before 4:00 pm**
- **Diabetes Mellitus** – March 28, 2006 from 1:00 pm – 3:00 pm @ Bell Socialization Services, 160 South George Street, York – **Registration Deadline: March 21 before 4:00 pm**

Unfortunately, we are unable to accommodate registrations after the deadline.

*For more information call Cherie Adkins at 717-909-3858 and leave a message re: registration, questions, etc.
Listen to prompts on this phone line regarding trainings that are full,
as well as cancellations due to weather.*



**There are also training opportunities through
Riverside Professional Development**

3525 North 6th Street ~ Harrisburg, PA 17110 ~ Phone (717)-238-3660 ~ Fax (717)-238-5886

Lancaster County MH/MR

provides staff training opportunities covering a variety of topics including those addressing Self-Determination, Community Support Program, and Grammar/Writing. Many (but not all) of these training are free.

For more information, please contact Sandi Hampton at hamptons@co.lancaster.pa.us or 717-299-8038.



A MATTER OF LIFE

~Dysphagia~

Star Long, RN

Swallowing disorders or dysphagia can occur in all age groups, though more commonly in older individuals. At any stage of the normal swallowing process in which food or liquid moves from the mouth, through the pharynx (back of the throat), into the esophagus (food tube), and finally into the stomach, difficulty may be experienced.

Complications of undiagnosed or untreated dysphagia range from poor appetite, weight loss, choking, pneumonia, behavioral changes to potentially fatal conditions. In many cases, dysphagia can be partially or completely corrected, while in some cases it can be life-threatening and require aggressive interventions, such as a feeding tube.

Dysphagia is more common in individuals with

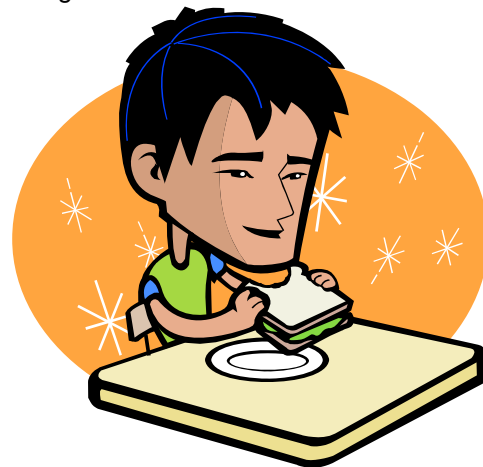
- Neurological disorders – such as Parkinson's Disease and Multiple Sclerosis, or sudden neurological damage from a stroke, spinal cord or head injury,
- Disorders affecting muscle strength or coordination – Muscular Dystrophy or ALS,
- GERD (Gastro-Esophageal Reflux Disease),
- Tumors or cancer of the head, neck, mouth or throat,
- Medication side effects and interactions

Other considerations that may lead to dysphagia include structure abnormalities, poor or missing teeth, ill-fitting dentures, esophageal narrowing, improper positioning while eating or drinking, behaviors such as eating or drinking too quickly, and poisoning or burns from swallowing household cleaners.

Treatment may include medication and/or surgery, though many individuals can be helped by changing their diets and learning new techniques (head positioning, food/liquid alteration) to promote safe swallowing.

Support staff, working with individuals at risk for dysphagia, need to be observant for signs and symptoms indicative of swallowing difficulties that can develop at any time. Some indicators include:

1. Abnormal positioning/movement of head/body during drinking/eating
2. Frequent respiratory infections/pneumonia
3. Weight loss
4. Unexplained elevated temperature
5. Refusal to eat
6. Excessive tongue movement or thrusting
7. Prolonged or effortful chewing
8. Eating rapidly
9. Swallowing food whole
10. Spitting out food
11. Pockets food or drink in mouth
12. Regurgitation of food (nose/mouth)/vomiting
13. Coughing/choking
14. Wet, gurgly voice
15. Excessive drooling or managing saliva
16. Weak cough
17. Watery eyes



When indicators of dysphagia are observed in a consumer, it is important not to dismiss as insignificant because "they have a cold," or "they've always eaten like that." Statistics indicate over 6 million Americans are affected by dysphagia. Advocate for individuals with signs and symptoms to have a formal swallowing evaluation by a speech and language pathologist. It is simple and can be a matter of life.

For further information on this condition contact your local HCQU nurse to arrange a training.

Sources:

"It's Tough to Swallow," Becky Dorner & Associates, www.beckydorner.com

National Institute of Neurological Disorders and Stroke, www.ninds.nih.gov/disorders/swallowing

Folic Acid Promotion

by Diane G. Schriver, RN



Folic Acid is a B vitamin which helps our bodies produce new cells. All women of child-bearing age need folic acid, though men and women of any age may benefit from it. Some studies indicate that folic acid may help prevent stroke, some cancers, heart disease, and possibly Alzheimer's disease.

The entire month of January is National Birth Defect Month and the week of January 9-15 is National Folic Awareness Week.

What is the association between folic acid and birth defects? If a woman of childbearing age is not consuming enough folic acid before and/or during pregnancy, she is at greater risk of having a child born with a birth defect. A neural tube defect (NTD) is a major birth defect of a baby's spine or brain. Two of the most common are spina bifida (when the spine and backbone do not close completely, causing immobility of the lower parts of the body, and/or learning disabilities), and anencephaly (insufficient formation of the brain and skulls bones, resulting in part or all of the brain and skull bones to be missing).

Approximately 3,000 pregnancies in the U.S. are affected by these two NTD's, and up to 70% of them can be prevented by the simple act of getting enough folic acid every day. Babies born with anencephaly die before birth (via a miscarriage) or shortly after birth. Most children born with spina bifida live full lives, but often experience lifelong disabilities and require many surgeries.

The Center for Disease Control (CDC) recommends that all women take 400 mcg of folic acid daily. The recommendations on the appropriate dosage of folic acid change with pregnancy, breastfeeding, or if a woman has already had a baby with an NTD. A doctor should be consulted in these situations as to the right amount of folic acid to take.



How can men and women ensure they are getting enough folic acid on a daily basis? A daily vitamin has 400mcg of folic acid in it. Some labels may use the word "folate" for folic acid, and others may state "100%" next to either folic acid or folate. Vitamins can be obtained at your local grocery store, drug store, or discount store. Other sources of folic acid are in our food. Some foods that contain folic acid or folate are broccoli, asparagus, peas, bananas, oranges, nuts, spaghetti, flour, bread and cereals.

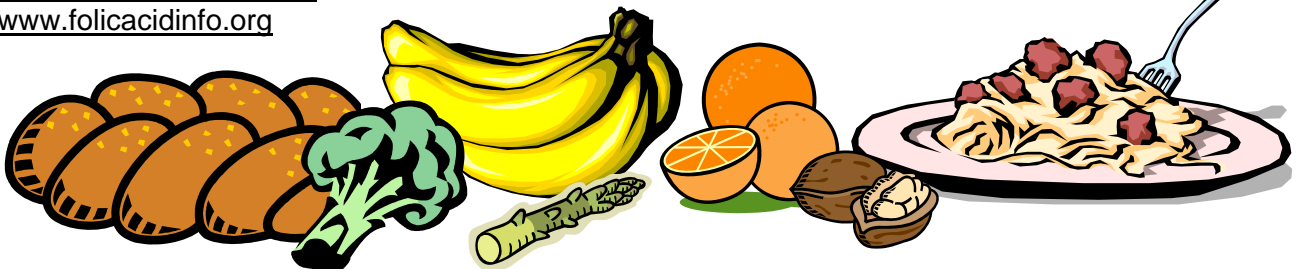
Folic acid is so important to our health that the CDC, the March of Dimes and the National Council on Folic Acid (NCFA) have organized national folic acid promotion efforts and newsletters.

For more information on this vitamin contact your HCQU nurse or go online to:

www.cdc.gov/ncbddd/folicacid/faq

www.marchofdimes.com

www.folicacidinfo.org



Bulletin Board

Take note!

To receive our newsletters just send your e-mail address to mmerdman@geisinger.edu

You will be placed on our e-mail list and automatically receive *The HCQU View* each month.

Don't Forget

South Central HCQU continues to **collect used cell phones**. These phones will be recycled or resold and a portion of the proceeds will benefit the *National Organization On Disability (NOD)*. Just drop off old/unwanted cell phones at the HCQU office or hand them to your regional nurse.

Remember –

One kind word can warm three winter months.

~Japanese Proverb

Live Auction

Fine Art, Sports Memorabilia, Music Memorabilia & More!

Proceeds to Benefit Living Unlimited Program

Wildwood Conference Center

Harrisburg Area Community College
One HACC Drive
Harrisburg, Pennsylvania

Saturday, April 1, 2006

Preview: 6:00 pm to 7:30 pm

Auction: 7:30 pm

\$10.00 per person or \$15.00 per couple

Hors d'oeuvres – Wine & Cheese – Door Prize
Master Card, Visa, Discover & AmEx will be accepted

All artwork is custom framed and matted. Opening bids are up to 50% less than traditional framed gallery prices.

Tickets & Information Call: (717) 526-2111 or call Ben Shuey at 1-800-310-7776