Although snow may be beautiful, the bitter cold and snowy roads present many challenges. I am confident that we all are ready to bid farewell to Old Man Winter. The promise of springtime with longer daylight hours and daffodils rising from the chilly ground tells us that the warm sunshine and colorful blooms will soon replace the gloomy, grey days of Winter. As Spring clean up begins on the grounds of CCRC look for uplifting displays of colorful beauty that springtime brings. Everyone deserves the chance to breathe the fresh air and take in the wonders of nature after dealing with the wrath of COVID-19.
Administrator’s Letter cont’d

The State and Federal Governments continue to change the guidance and orders that rain down on us like spring showers. We are hopeful in March to be able to start visitation again. We are in the process of getting clarification of the most recent guidance and will update all of you soon. Visitation at skilled nursing facilities will be fluid based on COVID-19 cases at the facility in either residents or staff and any possible exposure by a visitor. As always, our priority is the safety of our residents and staff and appreciate your cooperation and understanding as we go through this together.

Employee Recognition Week will be held March 22nd through March 26th. Like last year, this will be done socially distant and winners of awards and door prizes will be announced over our paging system. I always look forward to this event each year to celebrate each of you as you care for the residents of CCRC. We cherish all of our Crofton Family employees and it is an extremely difficult task for the department heads to choose a limited number of employees to recognize each year. To celebrate all of our Crofton Family members we have something for everyone each day during this week and lots of door prizes to celebrate all of your achievements over the past year. After this extremely challenging year, you all deserve to be celebrated for your remarkable heroism, strength, and commitment to our residents and each other. You are always #CroftonStrong!

All My Best

Mary Wheat

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Daylight Saving Time is Sunday, March 14, 2021!
Before you go to bed on Saturday move your clocks forward one hour!
Please contact Jeanne Davenport, Nutritional Services Director at extension 6212, Kitchen at extension 4267, or, Shykelia “Shy” Hayes, Patient Services Coordinator at extension 4211, if we can make your stay better.

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Just a reminder for our new patients: Stations I, III, & IV serve hot coffee, sweet rolls, and fresh fruit every morning by 6:00 A.M. for those physical therapy patients who get up early and want their coffee to get the day started. If any patients have a specific meal preference, we have substitutions for every meal.

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You can purchase a meal daily for $5.00 or a sandwich for $2.00 at the front desk daily. Lunch needs to be ordered by 10 AM and dinner by 3 PM.

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National Food Holidays in March
Did you know that almost every day in the month is a celebrated food holiday? In addition, each month is a national food month, and some weeks are national food weeks.

**Month—Long Celebrations in March**
National Nutrition Month; National Noodle Month; National Peanut Month; National Sauce Month; National Frozen Food Month

**Week—Long Celebrations in March**
2nd Week—National Chocolate Chip Cookie Week

**Daily National Celebrations in March**
March 1st—National “Peanut Butter Lover’s” Day
March 2nd—National Banana Cream Pie Day
March 3rd—National Cold Cuts Day
March 4th—National Pound Cake Day
March 5th—National Cheese Doodle Day
March 6th—National Oreo Cookie Day; White Chocolate Cheesecake Day
March 7th—National Crown Roast of Pork Day; National Cereal Day
March 8th—National Peanut Cluster Day
March 9th—National Meatball Day; National Crabmeat Day
March 10th—National Blueberry Popover Day
March 11th—National Oatmeal-Nut Waffle Day; National Popcorn Day
March 12th—National Bake Scallops Day; National Milky Way Day
March 13th—National Chicken Soup Day
March 14th—National Potato Chip Day
March 15th—National “Peanut Lover’s” Day
March 16th—National Artichoke Heart Day
March 17th—National Irish Food Day
March 18th—National Sloppy Joe Day; National Oatmeal Cookie Day
March 19th—National Poultry Day; National Chocolate Caramel Day
March 20th—National Ravioli Day
March 21st—National Crunchy Taco Day; National Healthy Fats Day
March 22nd—National Bavarian Crepes Day
March 23rd—National Chips & Dip Day
March 24th—National Cheese Steak Day
March 26th—National Spinach Day
March 28th—National Black Forest Cake Day
March 29th—National Lemon Chiffon Cake Day
March 30th—National Hot Dog Day
March 31st—National Clams on the Half Shell Day
**Caribbean Shrimp & Rice Bowl**

**Ingredients:**
- 1 medium ripe avocado, peeled/pitted
- 1/2 cup salsa
- 1 medium mango, peeled/cubed
- 1 can (8 oz) unsweetened crushed pineapple, undrained
- 1 can (15 oz) black beans, rinsed/drained
- 1/4 teaspoon salt
- 1/3 cup reduced-fat sour cream
- 1/2 cup reduced-fat sour cream
- 2 tablespoons balsamic vinegar
- Lime wedges, optional

**Directions:**
1. For avocado cream, mash avocado with sour cream and salt until smooth. In a small saucepan, combine beans, pineapple, mango and salsa; heat through, stirring occasionally. Prepare rice according to package directions.
2. Toss shrimp with jerk seasoning. In a large skillet, heat oil over medium-high heat. Add shrimp; cook and stir until shrimp turn pink, 2-3 minutes.
3. Divide rice and bean mixture among four bowls. Top with shrimp and green onions. Serve with avocado cream and, if desired, lime wedges.

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**Turkey Gyros**

**Ingredients:**
- 1 medium cucumber, peeled
- 2/3 cup reduced-fat sour cream
- 1/4 cup finely chopped onion
- 2 teaspoons dill weed
- 1 teaspoon lemon juice
- 1/2 teaspoon ground cumin

**Directions:**
1. Finely chop a third of the cucumber. For sauce, mix sour cream, onion, dill, lemon juice and chopped cucumber. Thinly slice remaining cucumber.
2. In a nonstick skillet, heat oil over medium-high heat; sauté turkey until no longer pink, 4-6 minutes. Stir in Greek seasoning. Serve turkey, lettuce, tomato and sliced cucumber on pita; top with sauce and cheese.

---

**Fabulous Fajitas**

**Ingredients:**
- 1-1/2 lbs beef top sirloin steak, cut into thin strips
- 2 tablespoons canola oil
- 2 tablespoons lemon juice
- 1/2 teaspoon ground cumin

**Optional toppings:** Shredded cheddar cheese, sour cream, fresh cilantro leaves, sliced jalapeno pepper and avocado

**Directions:**
1. In a large skillet, brown steak in oil over medium heat. Place steak drippings in a 3-qt. slow cooker. Stir in the lemon juice, garlic, cumin, salt, chili powder and red pepper flakes.
2. Cover and cook on high until meat is almost tender, 2 hours. Add red pepper and onion; cover and cook until meat and vegetables are tender, 1 hour.
3. Warm tortillas according to package directions; spoon beef and vegetables down the center. Top as desired.

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**Cod with Bacon & Balsamic Tomatoes**

**Ingredients:**
- 4 center-cut bacon strips, chopped
- 4 cod fillets (5 ounces each)
- 1/2 teaspoon salt
- 1/4 teaspoon pepper
- 2 cups grape tomatoes, halved
- 2 tablespoons balsamic vinegar

**Directions:**
1. In a large skillet, cook bacon over medium heat until crisp, stirring occasionally. Remove with a slotted spoon; drain on paper towels.
2. Sprinkle fillets with salt and pepper. Add fillets to bacon drippings; cook over medium-high heat until fish just begins to flake easily with a fork, 4-6 minutes on each side. Remove and keep warm.
3. Add tomatoes to skillet; cook and stir until tomatoes are softened, 2-4 minutes. Stir in vinegar; reduce heat to a medium-low. Cook until sauce is thickened, 1-2 minutes longer. Serve cod with tomato mixture and bacon.

---

**Tortilla Chicken Bean Soup**

**Ingredients:**
- 1 can (10-1/2 oz.) condensed chicken with rice soup, undiluted
- 1-1/3 cups water
- 1 cup salsa
- 1 cup canned pinto beans, rinsed/drained
- 1 cup canned black beans, rinsed/drained
- 1 cup frozen corn
- 1 cup frozen diced cooked chicken, thawed
- 1 teaspoon ground cumin

**Optional toppings:** Crushed tortilla chips, shredded cheddar cheese and sour cream

**Directions:**
1. In a large saucepan, combine the first eight ingredients. Cook over medium-high heat for 5-7 minutes or until heated through. Serve with tortilla chips, cheese and sour cream.

---

**Loaded Baked Potato Soup**

**Ingredients:**
- 4 large baking potatoes
- 2/3 cup butter, cubed
- 2/3 cup flour
- 3/4 teaspoon salt
- 1/4 teaspoon white pepper

**Directions:**
1. Preheat oven to 350°. Pierce potatoes several times with a fork; place on a baking sheet. Bake until tender, 65-75 minutes. Cool completely.
2. Peel and cube potatoes. In a large saucepan, melt butter over medium heat. Stir in flour, salt and pepper until smooth; gradually whisk in milk. Bring to a boil, stirring constantly; cook and stir until thickened, about 2 minutes. Stir in potatoes; heat through.
3. Remove from heat; stir in sour cream and green onions. Top servings with cheese and bacon.
SPECIAL MESSAGE FROM THE MAINTENANCE DEPARTMENT:
Resident Televisions

Did you know that long-term care residents who have Medicare A and B are eligible for a Special Medicare Program while residing here?

OPTUM is a federally-funded Special Needs Medicare Program specifically designed for Medicare recipients who live in nursing homes. The program provides enhanced Medicare benefits and is designed to be proactive and to prevent illnesses before they become severe.

The Optum Nurse Practitioner monitors the health of the residents more closely, watches for changes in medical condition, and treats problems at the bedside as quickly as possible. She also provides Skilled Nursing services without sending someone to the hospital for three days. This cannot be done without a program like Optum. This has proven to keep people healthier and produce better clinical outcomes.

No Appointment Needed.

For questions or more information please contact Nick Shenton at (410) 259-9185 or by email at nicholas_shenton@optum.com

SPECIAL MESSAGE FROM THE MAINTENANCE DEPARTMENT:
Resident Televisions

If you are planning on bringing in a television for your loved one please consult with a member of the maintenance department before making your selection. This will assure that the new television is compatible with the space and will help eliminate interference with their roommate’s television.
Improving the use of antibiotics in healthcare to protect patients and reduce the threat of antibiotic resistance is a national priority. Antibiotic stewardship refers to a set of commitments and actions designed to “optimize the treatment of infections while reducing the adverse events associated with antibiotic use.” The Centers for Disease Control and Prevention (CDC) recommends that all nursing homes take steps to improve antibiotic prescribing practices and reduce inappropriate use.

The Problem

Antibiotics are among the most frequently prescribed medications in nursing homes, with up to 70% of residents in a nursing home receiving one or more courses of systemic antibiotics when followed over a year. Similar to the findings in hospitals, studies have shown that 40–75% of antibiotics prescribed in nursing homes may be unnecessary or inappropriate. Harms from antibiotic overuse are significant for the frail and older adults receiving care in nursing homes. These harms include risk of serious diarrheal infections from Clostridium difficile, increased adverse drug events and drug interactions, and colonization and/or infection with antibiotic-resistant organisms.

The Solution

Crofton is joining the fight against antibiotic resistance, starting with Urinary Tract Infection (UTI). We have implemented a program to properly identify symptoms of a UTI, appropriateness for obtaining a urinalysis and culture, and analyzing those results to determine the best treatment plan. The form to the right is used as guidance to the providers and nursing staff to diagnose and treat a true UTI. Many people have bacteria without symptoms in their urinary tract. This is called asymptomatic bacteruria. Our residents must present with symptoms, as outlined in Loeb’s criteria on the form prior to obtaining a urine sample. Please note that confusion, or altered mental state is NOT the sole indication of a UTI. The resident must present with an actual urinary symptom to rule out a UTI. Once it is determined that the resident meets the criteria to obtain a diagnostic test, the sample is collected for analysis. The provider will review the results to determine if treatment is indicated. Evidenced-based practice suggests that bacteria can be eliminated with a shorter duration of treatment than in earlier years. The course of antibiotics may be only 3-5 days. If you have questions about antibiotic resistance or antibiotic stewardship programs, please ask a nurse manager or your physician.

Source– Centers for Disease Control and Prevention.  
https://www.cdc.gov/longtermcare/prevention/antibiotic-stewardship.html
Valentine's Day at CCRC

RESIDENTS CORNER
Unlike traditional health insurance, long-term care insurance is designed to cover long-term services and supports, including personal and custodial care in a variety of settings such as your home, a community organization, or other facility.

Long-term care insurance policies reimburse policyholders a daily amount (up to a pre-selected limit) for services to assist them with activities of daily living such as bathing, dressing, or eating. You can select a range of care options and benefits that allow you to get the services you need, where you need them.

The cost of your long-term care policy is based on:

- How old you are when you buy the policy.
- The maximum amount that a policy will pay per day.
- The maximum number of days (years) that a policy will pay.
- The maximum amount per day multiplied by the number of days determines the lifetime maximum amount that the policy will pay.
- Any optional benefits you choose, such as benefits that increase with inflation.

If you are in poor health or already receiving long-term care services, you may not qualify for long-term care insurance as most individual policies require medical underwriting. In some cases, you may be able to buy a limited amount of coverage, or coverage at a higher “non-standard” rate. Some group policies do not require underwriting.

GOOD TO KNOW
Many long-term care insurance policies have limits on how long or how much they will pay. Some policies will pay the costs of your long-term care for two to five years, while other insurance companies offer policies that will pay your long-term care costs for as long as you live—no matter how much it costs. But there are very few that have no such limits.

BRIGHT IDEA
Before you buy a policy, be aware that the insurance company may raise the premium on your policy. It is a good idea to request information on the company’s premium rate history.
MARCH RESIDENT and STAFF BIRTHDAYS

**Resident Birthdays**

03/12 MARGARET OGILVIE
03/23 INGIBJORG SMITH
03/24 KATHLEEN BEDNARZ
03/25 DOLORES AROSTEGUI
               MARLIN FITZWATER
03/26 FLORENCE STUART
03/28 CAROL COOPER
               FRANCES NADASH
03/29 DAISY ZUMBRUN
03/30 JOSEPH TILLMAN

**Staff Birthdays**

03/03 YUMICA BROWN
03/08 MARY CARTER
03/09 JENNIFER ESCALERA
03/15 MARIANNE HOWE-SPENCE
03/17 NICOLE STEELE
03/19 LINDA CIRINO
               MOLLY WARE
03/20 KARISS GUZIK
03/23 SARA MILJKOVIC
03/26 CECELIA TEJAN-KELLA
03/28 ANN TODD
03/29 BREONA TINSLEY
03/31 SONDRA BOST
               DIANE HURST

MARCH EMPLOYEE ANNIVERSARIES

Congratulations to the following employees who are celebrating their anniversary this month!

**ONE YEAR**

SHAINA DORSEY
SHIRYL FRANCIS
JOI GARDNER
SHANNON JOHNS
NIKEARA RICHARDSON

**TWO YEARS**

AMY ASKINS
FATMATA KALLAY
NICOLE WILLIAMS

**THREE YEARS**

JEAN FALLON-MANOGUE
RILEY MACINTYRE

**FOUR YEARS**

SABRINA EMBRACK
SUSMITA REGMI
FANTA SONGOWA

**FIVE YEARS**

BIDEMI KEGLO

**NINE YEARS**

SHARON BROWNE
KARISSA GUZIK

**TWELVE YEARS**

JYOTI PATEL
AMANDA TOPPER
ANDRE VARON

**FIFTEEN YEARS**

KAREM DIAZ

**TWENTY YEARS**

SAMANTHA DOUCETTE
Doll Therapy
by Alisa Tagg, BA ACC/EDU CADDCT CDP
NAAP Association Director

Doll therapy is a non-pharmaceutical intervention aimed at reducing behavioral and psychological disorders. This type of therapy has been used for over 30 years. While doll therapy has received a lot of positive feedback, it is also controversial.

About 25 years ago, I worked with a client who would carry her “child” around with her everywhere she went. When surveyors inspected our memory care community, one of them approached me and gave me a hard time about using dolls. They informed me that dolls were not age-appropriate and that we were providing childish support.

I had a lengthy discussion with the surveyor about why I disagreed and why the doll was person-appropriate and supported the participant in a positive way. The surveyor still issued a citation and a plan of correction. Our community responded to the plan of correction by stating that we would continue to provide education on alternative therapeutic interventions that met the individual needs of the people we served. I felt this was a win for engagement and person-centered therapeutic approaches. Since then, federal regulations have been updated to reflect the importance of person-appropriate care above all else.

Doll therapy shows lots of positive outcomes, including a dramatic reduction in behaviors—and zero medication side effects—but there are concerns with this therapeutic practice. The biggest concern is treatment with dignity. Like the state surveyor I encountered, there is the viewpoint that giving an adult a doll is childish no matter what their diagnosis.

An adult carrying a doll could cause observers to respond with statements such as, “Oh, aren’t they adorable!” The person living with dementia might be viewed in a condescending way instead of as an adult who is living with a memory problem.

Another concern is the reactions of family members. They may be distressed at the sight of their loved one holding a doll. This could lead to feeling that the facility is not valuing their loved one. One solution is to help family and friends understand the justifications for doll therapy ahead of time.

Another concern with using dolls is the question of who “babysits” when the individual is unable to care for the doll or dealing with confusion if the doll gets broken or needs to be replaced. Proper education is valuable for all staff to be available to “babysit” when needed and/or have a duplicate replacement if it should break.

Doll therapy potentially offers meaning and purpose for someone who is living with dementia. Research has shown that the benefits are:

- Decreased anxiety
- Decreased agitation
- Increased happiness
- Improved food intake
- Fewer negative verbal expressions
- Decreased wandering
- Greater focus

More research is still needed to support doll therapy. In the meantime, the best course of action is to review the following recommendations:

- **Follow the lead of the person with dementia.** If they want to hold a doll, let them. If not, don’t continue to offer it. If they view it as an inanimate doll, let them. If they refer to it as a baby, then treat the doll as such.
- **Be prepared.** Doll therapy can be extremely successful with people who are anxious and restless, but it also has the potential to make someone very upset about where the doll is and who is caring for it. Be aware that some people may become overly concerned about where the doll is sleeping and if it has been fed.
- **Be flexible.** Doll therapy has been effective for some people, but it’s not for everyone. If it doesn’t benefit your loved one or client, continue to try other non-drug interventions to reduce anxiety and increase quality of life.
- **Facilitate interaction with children.** There are many benefits from intergenerational communication and interactions. When possible, provide the chance for your loved one or community members to spend time with children. Research has shown that this interaction can be beneficial to both the older adult with dementia and the children.
Find and circle all of the words that are hidden in the grid.
The remaining letters spell an additional weather word.

BAROMETER
BLIZZARD
CELSIUS
CLOUDS
COLD
CYCLONE
DOWNPOUR
DRIZZLE
DROUGHT
FAHRENHEIT
FLOOD
FLURRIES
FOG
FORECAST
FREEZE
FROST
HAIL
HOT
HUMIDITY
HURRICANE
ICE
LIGHTNING
MIST
MONSOON
OVERCAST
RAIN
SHOWER
Sleet
SNOW
SQUALL
STORM
SUNNY
TEMPERATURE
THERMOMETER
THUNDER
TORNADO
TSUNAMI
TYPHOON
VISIBILITY
WINDY
1. Where was Saint Patrick born?  
2. When did St. Patrick die?  
3. Where is St. Patrick buried?  
4. Where did St. Patrick study religion?  
5. What was St. Patrick’s birth name?  
6. What is Saint Patrick’s nickname?  
7. What color was originally associated with St. Patrick?  
8. What kind of plant is associated with St. Patrick?  
9. Which creature did St. Patrick drive out of Ireland?  
10. Where was the first Saint Patrick’s Day Parade held?  
11. When did the custom of St. Patrick’s Day come to America?  
12. Which American city holds the largest Parade?  
13. In Ireland, what does the color green stand for?  
14. What type of creature is a leprechaun?  
15. Which profession does the leprechaun practice?

_____ Shamrock  _____ Hope  _____ Downpatrick  _____ Maewyn Succat  
_____ Shoemaker  _____ New York  _____ Gaul  _____ Fairy  _____ 420 AD  
_____ Paddy  _____ Blue  _____ Boston  _____ Wales  _____ 1737  
_____ Snakes
**MAKE HEALTHY REQUESTS**

Keep up your healthy eating even when you are eating out. Ask that foods are cooked in olive oil rather than butter, and get a side salad instead of french fries to go with your meal.

**QUICK & EASY QUICHE**

**Ingredients:**
1. 9-inch, premade pie crust
2. 1 cup chopped mushrooms, broccoli, and zucchini
3. 1/2 cup shredded cheese
4. 3 eggs, beaten
5. 1 cup nonfat milk
6. 1/2 teaspoon salt
7. 1/2 teaspoon pepper

**Direction:**
Preheat oven to 375. Sauté vegetables until cooked, but still crisp. Put vegetables and cheese into the pie crust. Mix eggs, milk, salt, pepper, and garlic powder in a bowl. Pour the egg mixture over the cheese and vegetables. Bake for 30-40 minutes, or until a knife inserted in the center comes out clean. Let cool for 5 minutes before serving.

**Nutrition Information Per Serving**

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March is Brain Injury Awareness Month

As it has for thirty years, early March marks the beginning of Brain Injury Awareness Month. Brain injury, often referred to as traumatic brain injury (TBI), can range from mild (commonly called a concussion) to severe and is caused by an impact to the head or the body or by a penetrating head injury. But there are also non-traumatic brain injuries that begin internally due to disease, poisoning, a hereditary condition, stroke, lack of oxygen, or other internal medical conditions. Millions of Americans are affected by a brain injury every year, including the family members who make adjustments to accommodate the “new normal” brought about by a loved one’s brain injury.

The month-long campaign aims to support and promote the country’s major brain health organizations using campaigns and social media activity that encourages interest in and education about brain injury. The campaign also seeks to de-stigmatize brain injury, empower those who have survived, promote support organizations, and raise funds to assist and support those affected. More than 5.3 million Americans are living with brain injury-related disabilities. According to the Centers for Disease Control and Prevention (CDC), direct medical costs of TBI and indirect, like lost productivity, amount to 76.5 billion dollars annually. Costs of fatal TBI’s and those requiring hospitalization account for 90 percent of TBI medical cost.

The Brain Injury Awareness campaign also seeks to mitigate risks in a measured way, especially for those most vulnerable, the elderly. Falls are the leading cause of TBI, and the older a person is, the higher the risk of the associated adverse outcome effects of TBI. The CDC’s Morbidity and Mortality Weekly Report (MMWR) documents a 17 percent increase nationwide in the rate of fall-related deaths due to TBI from 2008-2017, including increases in most states.

Unsurprisingly the largest increase in fall-related TBI deaths was among older adults 75 or more years old. To combat this trend, the CDC began the initiative, Stopping Elderly Accidents, Deaths & Injuries (STEADI), including tools and resources for health care providers to improve identification of older adults at risk for a fall. The initiative also includes effective strategies with sensors that continuously monitor and identify changes in gait and other markers in activities of daily living as a promising low-cost technology in the effort to prevent older adult falls, particularly those opting to age in place.

What can you do to help during Brain Injury Awareness Month? You have already accomplished one activity, and that is learning about traumatic brain injury by reading this. You can post your support for brain injury awareness on your social media channels. You can fundraise via a local bake sale, garage sale, or create a webpage that raises funds employing a site like First Giving, or you can donate directly to a credible brain injury support organization for an educational workshop or attend an awareness event. You can volunteer, distribute literature, or help an individual or family in need. Finally, if you are a survivor of a brain injury, tell your story. The Brain Injury Association has a special page to share your story here. Sharing experiences help others know they are not alone and may provide insight, sage advice, and support. A caring community can help problem solve and prevent the growing incidents of brain injury.

If you or a loved one have suffered a brain injury or other type of debilitating injury, we would be happy to talk with you about an estate plan to make sure your needs (or those of a loved one) are met both now and in the future. At a minimum, there are important legal documents that should be created to cover your choices and care, who will provide it, as well as who will make financial decisions for you if you are unable to.

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<td><strong>THE RECOVERY TIME FOR BRAIN INJURIES CAN TAKe YEARS FOR SOME PATIENTS</strong></td>
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<td><strong>BRAIN FACTS</strong></td>
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<td><strong>TRAMATIC BRAIN INJURY, OR TBI, ARE VErY PERsonal. UNFORTUNATELY, THEY OCCUR MORE OftEN THAN MANY PEOPLE REALiZe. TBI BAKes FROm HILeS TO sEVeRAl, BUT ALL ARE DAnGeRoUS AND CAN CAUSE MEDiCAL PROBLEMS FOR YEArs.</strong></td>
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<td><strong>SYMPTOMS</strong></td>
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<td><strong>15% OF PEOPLE WITH A TBI HAVE SYMPTOMS LASTING 5 YEARS OR MORE</strong></td>
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3 Ways to Boost Your Heart Health
Heart disease continues to be the leading cause of death for both men and women in the United States. In fact, 1 in every 4 deaths is caused by heart disease.

Heart disease refers to several different types of heart conditions. Coronary artery disease—caused by plaque buildup in the walls of the heart’s arteries—is the most common. Other forms of heart disease include heart attack, heart failure, arrhythmia and congenital heart defects.

The symptoms of heart disease can vary, and some people may not even know they have a heart condition until they have a heart attack. Red flags include shortness of breath, chest discomfort, difficulty with speech, heart palpitations, and sudden loss of responsiveness.

One American dies every 36 seconds from heart disease.

Take Control of Your Heart Health
There are certain uncontrollable factors that increase your risk of heart disease, including age, sex, and family history. However, other factors that increase your risk for heart disease—such as stress, inactivity, obesity, diabetes, smoking, and poor diet—are controllable.

A healthy diet and lifestyle are your best methods to fight heart disease, so consider incorporating these three kinds of exercise into your routine to improve your heart health:

1. Aerobic exercise improves circulation and can help your cardiac output. Try to get at least 30 minutes a day of heart-pumping moderate activity—like brisk walking, dancing or cycling—at least five days a week.
2. Resistance training with weights, resistance bands or body weight at least two nonconsecutive days per week can help create leaner muscle mass. When paired with aerobic activity, you can raise your good cholesterol levels and lower bad cholesterol levels.
3. Flexibility workouts, like stretching and balance, are critical for musculoskeletal health. It’s important to stay flexible and joint pain-free so you can maintain your regular aerobic and resistance workouts.

Keep in mind that it’s the overall pattern of your life choices that determines your heart health. Contact your doctor to find out your risk for heart disease, or for more information.

Don’t Delay Preventive Care
The once-a-year checkup has been considered a standard of health care, but many people may be putting off routine appoints during the pandemic. Preventive care allows health care providers to detect diseases or medical problems before they turn serious. Preventive care includes physical and mental health screenings, cancer screenings, annual checkups and immunizations.

Telemedicine makes it possible for you to talk to a doctor about your health, receive a prescription and obtain treatment recommendations from the comfort and safety of your home. Telemedicine shouldn’t be used for emergency care situations, but can be a great way to stay up to date on preventive care. Your physical and mental health are important, so don’t put it on the back burner.

While many major health plans cover telemedicine services, be sure to check your plan’s explanation of benefits to avoid any surprise costs.
St. Patrick’s Day Word Scramble

Unscramble the St. Patrick’s Day words and then use the letters with the numbers below the box to form the secret message at bottom of page.

CAOKRSHM

LYCKU

GRNEE

HIIRS

PEARELHUCN

GDLO

WIRBOAN

TPO

VEROCL

1 2 3 4 5 6 7 8 9 10 11 12 13 14 15

14 12 5 15 14 6 7 1 4

CAOKRSHM

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