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Dr. Reece helped give former Bryan resident Tiffany Thornton, (star of the Disney Channel's *Sonny With a Chance*), her famous smile.

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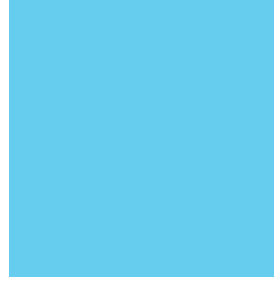


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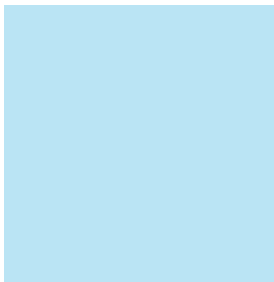
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A Decade of Difference

Voices for Children - Court Appointed Special Advocates of Brazos Valley has changed the lives of hundreds of local children in the past ten years.



ARTICLE | Ashley McCollum

PHOTOS | Courtesy of Voices for Children - CASA of Brazos Valley

With 405 children served, 311 of them already placed in safe, permanent homes, **Voices For Children – Court Appointed Special Advocates of Brazos Valley (CASA)** has truly made a “Decade of Difference” in the lives of abused and neglected children in Brazos, Burleson and Grimes counties since 2000.

What is a CASA? “Over the past 10 years, more than 200 community members have volunteered as CASAs, giving their time and energy to give hope to these children,” said Executive Director Liana Lowey of Voices For Children’s CASA volunteers, who serve as guardian ad litem and advocate for their CASA children throughout the child welfare system (average of 12 months). “CASAs interview the child and service providers; review copies of all relevant records; and participate in mediations and staffings in order to ensure the children’s needs are met.”

CASAs limit the amount of time children spend in foster care by limiting unnecessary placement changes and providing permanent placement research to ensure the best home for the child. This includes locating appropriate relatives who can take custody of the child in lieu of foster care.

Voices for Children was established in 2000, when community leaders, the East Texas Cluster Court and Texas CASA representatives recognized the dire need for a CASA program in Brazos County. The first CASA training was held in July 2001, and at its conclusion, Judge Jim Locke swore in eight advocates. Since then, Voices For Children’s volunteer base has grown to 73 and service area has expanded to include Grimes County (in 2006) and Burleson County (in 2009).

The need is so great for CASAs in Brazos, Burleson and Grimes counties that volunteers are appointed to a case by the Cluster Court Judge or requested by either Child Protective Services or an Attorney ad litem as soon as they have completed their training.

The Need for Advocates “Our hope for the Voices For Children: 10 in 2010 campaign is that it not only increases community awareness about our services and past accomplishments, but also inspires community members to volunteer and help us reach our goal of serving 100 percent of the children in need of CASAs in our service area,” said Jacque Flag, who was a member of

the first group of CASA volunteer trainees in 2001 and now serves as president of Voices For Children’s Board of Directors. “At the present time, we are serving 55 percent of the children in Brazos County, 25 percent of the children in Grimes County and 10 percent of the children in Burleson County. The need for more CASAs in all three counties is critical and vitally important, as the number of children coming into foster care each year is steadily increasing.”

Over the past year, Brazos County has experienced on average a seven percent (7%) increase in the number of children in foster care; Burleson County has had an increase of almost five percent (5%); and Grimes County has seen an increase of more than fifteen percent (15%).

“After studying these numbers and projections for our area, we’ve targeted aggressive growth of the CASA program by 40 percent per year, over the next three years, in order to be able to reach our goal of providing advocacy to every abused child in Brazos, Burleson and Grimes Counties by 2013,” said Lowey.

continued on the next page

Being a CASA is important to me. It's so rewarding to be able to communicate and work with the families to help them build a better, brighter and stronger future together before, during and after reunification or while moving toward adoption.

- Faye, CASA volunteer

The benefits of CASAs go much further than the criminal justice system, though. The CASAs themselves find much reward in their advocacy:

Going to see my CASA kids always makes me smile. They are always ready to hug and kiss. I love their smiles. - Arlene, CASA volunteer

I love the look on my child's face when he realizes someone really does care. -Josh, CASA volunteer

It's wonderful when my child dreams of becoming a football player or rap singer and actually realizes that he can accomplish his dreams even though he is in the foster system.

- Kay, CASA volunteer

I can express my love and compassion by hearing and voicing a child's dreams and hopes. When I explain my role as an advocate for children - my words of hope and joy can be seen on the faces of others. I see myself in their faces. When I see the tears of hope in their eyes or the strength for them to say - tell me more, I know that I am in the right place. - Bilaliah, CASA volunteer

In a survey conducted by the University of Texas, 81 percent of judges said they would like to have a CASA appointed on all of their cases, and 94 percent said a CASA on a case provides a better opportunity for a positive outcome.

In addition to providing court appointed advocacy, Voices For Children educates community members on child abuse, foster care and adoption.

Special Training "We also collaborate with Scotty's House, Child Protective Services (CPS) and other agencies to sponsor trainings for CPS workers, attorney ad litems, CASA volunteers and local therapists," Lowey said. "We coordinate with other agencies to host events surrounding Brazos Valley Adoption Day and the media to promote adoption awareness, like our Wednesday's Child segment on KBTX and in The Eagle."

Voices For Children is hosting a series of free, community awareness receptions in honor of its 10th Anniversary. Community of VOICES receptions and tours are being held monthly at the Voices For Children office, 115 N. Main Street, in Bryan.

"The Community of VOICES receptions and tours are not fundraisers or volunteer recruitment events, but simply a way to celebrate the accomplishments of CASA volunteers and promote community awareness about our history and vision for the future," said Lowey.

Lowey says the VOICES in Community of VOICES stands for the ways in which CASAs give a "voice" to their kids - Volunteer, Organize, Involve others, Create awareness, Empower youth and Support change.

Community support during Voices For Children's 10th Anniversary year has been stronger than ever. More than \$60,000 was raised through the agency's 7th Annual Art of Helping Children Dinner & Silent Auction and 5th Annual Rob Childress Golf Tournament this Spring.



A Candlelight Vigil was held this past April in honor of those who are survivors of sexual assault and child abuse, a collaboration between Voices for Children, Scotty's House, and the Sexual Assault Resource Center

Raising Awareness for the Cause Community awareness events have included the Heart Gallery of Central Texas photography exhibit at Post Oak Mall, which promotes awareness about youth in foster care in need of adoptive families; the Pinwheel Project, a project in which 800 pinwheels were planted in a garden on Texas Avenue by Voices For Children and Scotty's House to promote awareness about the 800 child abused and neglected last year in the Brazos Valley; and a Candlelight Vigil in Honor of Survivors of Sexual Assault and Child Abuse, a collaboration between Voices For Children, Scotty's House and the Sexual Assault Resource Center in April - Child Abuse Prevention and Sexual Assault Awareness Month.

Upcoming events include Coaches for Children this summer and Brazos Valley Adoption Day - November 19, 2010.

The mission of Voices For Children is to advocate for the best interest of abused and neglected children under the court's jurisdiction until each is placed into a safe, nurturing and permanent home, and to ensure that each child's needs are addressed and fully met. It is part of a national CASA initiative that began in 1977 in Seattle, WA, and now totals more than 900 programs nationwide.

Over the past year, Brazos County has experienced on average a seven percent (7%) increase in the number of children in foster care.

For more information on the CASA program or Community of VOICES receptions, please call 979-822-9700, email vfc@voicesforchildreninc.org or log on to www.vfcbrazos.org



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"This is your life, are you who you want to be? This is your life, is it everything you dreamed that it would be? When the world was younger and you had everything to lose..." -Switchfoot

I was a happy girl with a good life, good friends, and a great family, and one day I realized that it just wasn't enough. My answer to the question posed by the Switchfoot song on the radio was a resounding "No." So what did I want for myself? What was I lacking? How was I going to make this life extraordinary? I made a list. I wrote down everything I could think of that I'd ever wanted to try, every place I'd ever wanted to go. I made goals that ranged from paying my car off to traveling to Ireland. I listed things like classes, riding lessons, and trips to visit friends and family. And it hit me that even though I wanted to do these awesome adventurous things, at almost 200 pounds it would be pretty tough for me to keep up.

Instead of being discouraged, instead of editing my list to remove all the physically challenging things, I made a plan. I began working with Sharon at StudioFit three times a week. I found new ways to think about eating - instead of eating for entertainment or emotional therapy, I provided my body with nutrition. I started to see changes almost immediately, and in surprising ways. By the end of week two, grocery shopping was an adventure, and cooking dinner every night was new and exciting! Workouts with my trainer weren't exactly getting easier, but I was finding myself rising to the challenges she threw at me with more enthusiasm. As the weeks went on and the inches fell off, I found more motivation and more drive to not only keep on but to step up and do more outside of the studio. I've found that I really enjoy running and meet a friend twice a week for a three-mile trek through the park.

I'm about half way to my goal, and I can say that my life isn't just ordinary anymore. The friendships I'm building during this process are essential to reaching my goals, and I love how we can be mutually encouraging and supportive of each other. I feel fantastic, have so much more confidence, and am more enthusiastic about life. I finished my first 5K in November, and snorkeled in a two-piece bathing suit in Mexico last month! Plans for another tropical vacation are in the works for the summer, and I'm researching hiking trips for the fall.

I'm a work in progress, and I'll always be, but now I'm able to truly enjoy the ride. I'm working hard to be the best version of me, and I'm so appreciative of the support and encouragement that my friends and family give. My hope is that I can inspire others to truly love the life they're living.

So far, Lori has lost 25 pounds and 24 inches (9 inches on her waist alone!) Follow her progress online at studiofitbcs.com and her personal blog at www.missmykate.blogspot.com



Exceptional Dentistry Exceptional Dentist

Dr. Michael K. Reece focuses on whole-mouth oral health using general, restorative and cosmetic dentistry to keep his patients healthy for life.



Michael K. Reece D.D.S.
EXCEPTIONAL DENTISTRY

In every occupation, there are those that stand out and rise above the rest. In dentistry, one name that continually stands out, year after year, is **Dr. Michael K. Reece**. The secrets to his success are the combination of a great team and a constant commitment to improvement.

For years, Dr. Michael Reece and his team have had unified goals - to be the best at what they do and to always strive for excellence. These ideas are put into practice daily.

Each morning, prior to seeing patients, the entire Reece team gathers to review the days' cases and discuss treatment approaches. The discussions are robust, the mood light but serious and everybody gives their input. By the time the first patient arrives, everyone on the team will have been briefed on each and every appointment for the day.

These meetings, fondly known to the team as 'huddles,' also dedicate time to discussing how to improve the overall patient experience. Patient comfort, communication, treatment, follow-up, convenience - all of these are considered and discussed. The best ideas are put into practice immediately. The Reece team is committed to constant improvement which, in turn, leads to happy, healthy patients with successful treatment outcomes.

Patients seeing Dr. Reece for the first time are in for an experience in superior service. Even before the first visit, patients are assigned a treatment coordinator. This coordinator becomes the single contact point for all questions from the first call to post-treatment follow-up. Their complete focus is on the patient's satisfaction and comfort.

Nothing is left to chance. Friendly reminders about appointments are sent by the patient's choice of

text message, emails, phone calls, or even a combination of the three. All of the necessary forms are conveniently available on line at drreece.com.

Patients who go to Dr. Reece's office enjoy the easily accessible location and convenient parking. Upon entering the office, patients are enveloped by beautiful interior design that is warm and inviting.

The office manager, Kimm, greets patients by name with her welcoming voice and beautiful trademark smile. She has also perfected the timing of patients so that wait times are kept to an absolute minimum. Kimm's easy demeanor instantly engages patients and makes them feel welcome and at ease.

When a patient meets Dr. Reece for the first time, it becomes quickly apparent that he loves what he does and to an even greater degree, loves working with his patients. This shows in his smile and enthusiasm, and most of all, it shows in the exceptional quality of his dentistry.

For Dr. Reece, the source of his enthusiasm is patient health. His approach is to provide long-term oral and dental health to each of his patients. To achieve this, he takes into account each patient's health history. He listens, evaluates, and then recommends a course of action that will provide the best outcome for better overall health.

Dr. Reece sees each patient as unique and different. His patients' needs are very important to him. Listening to them helps him treat his patients in the best possible way. Each patients needs are unique and Dr. Reece can help them achieve a healthy bite; address a lifetime pattern of headaches; create dental implants to replace missing teeth; or solve problems common to regular dentures. For other patients, Dr. Reece gets the opportunity to design the smile of their dreams. *continued on the next page*



Dr. Michael Reece and his exceptional team.
Top: Kimberly, Dr. Reece, Connie, Bottom: Nanette and Kimm



Dr. Michael Reece has helped create many famous smiles -- including those of Tiffany Thornton (star of The Disney Channel's hit show *Sonny With a Chance*, and KBTX's own Meredith Stancik.

Dr. Reece invests the time to listen to what his patients want and incorporate these wants with the best techniques and resources available.

His energy level is unmatched, as is his constant quest to keep abreast of the latest technology and techniques in dentistry. Dr. Reece's commitment to patients, and education combined with the latest techniques and research has earned him the respect and admiration of an ever-growing list of patients and colleagues.

One of the things few patients know however, is Dr. Reece is also widely recognized and respected outside of the Bryan-College Station area. The prestigious Las Vegas Institute (LVI) is considered the pinnacle of advanced dental training. For several years, Dr. Reece has been sought out to share his expertise. He teaches dentists from all across the U.S., who travel to LVI, how to perform advanced techniques. Dr. Reece feels this combination of teaching and attending advanced training himself, helps him provide the very best dentistry possible to patients in the Brazos Valley.

In addition to educating his colleagues, Dr. Reece has been refining his skills in several key areas. Complete oral and dental health, adult cosmetic braces (or Six Month Smiles), cosmetic dentistry, headache treatment (TMJ) through dentistry, and advance treatment for denture wearers (providing them with a more permanent 'locked in' solution to removable dentures).

When someone asks Dr. Reece about his success with patients, it is interesting that he doesn't mention himself. He gives all the credit to his wonderful, loyal team. Connie, Nanette, Kimm, and Kimberly complete a team that most dentists would call a "dream team." Experience, and the highest quality of care are their priorities along with their positive attitudes towards patient care.

Long ago, Dr. Reece made a commitment to ensure his team was as well-trained and patient-centered as he was. This commitment has had a great impact on building relationships with his patients. People like the stability of his team, and look forward to visits at his office -- likening it to visiting good friends.

The field of dentistry is constantly changing and Dr. Reece isn't only changing to stay abreast of those changes, but in many cases, he is leading the way. He is growing in his reputation as a gifted speaker at dental symposiums and meetings. He communicates well with patients and his peers through Facebook and his blog has given him an expanded readership that count on Dr. Reece to keep them informed and current on the subjects of dental and oral health. Many consider him an integral part of their health care team and consult with Dr. Reece regularly on how he can help guide their dental and oral health for optimum long-term function.

Many recent studies have linked dental health to overall heart, stress, muscular, and dietary health that the role of the dentist has expanded greatly. Dentists now identify and guide patients in many other areas previously not treated just two years ago.

This comprehensive approach to health through dentistry has allowed Dr. Reece's patients to experience a better quality of life under his care.

Dentistry requires ongoing training to stay on top. Dr. Reece devotes approximately half of each month to continuing education, lecturing, research, and teaching to keep his skills and knowledge optimum for his patients. Many dentists would call him a "dentist's dentist" in recognition of his drive and devotion to advancing dentistry.

The best part of Dr. Reece's practice is that he is right here in our community and available for all of us to access.

Indeed, it is a unique culture and a testament to how dedication to craft and attention to patients has built Michael K. Reece, DDS into the respected practice it has become. Give them a try and see if your experience surpasses your expectation.

To sample a little of what Dr. Reece's world is like, try out his latest passion, blogging, by going to www.drreeceblog.com or visit his main website at www.drreece.com. For appointments, call (979) 846-6515

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Above: Martha Teke receives congratulations from Nancy W. Dickey, M.D., president of the Texas A&M Health Science Center and vice chancellor for health affairs for The Texas A&M University System.

AN Unconventional PATH

The extraordinary story of 17-year-old Martha Teke, a recent graduate from the Texas A&M Health Science Center College of Nursing



BRAZOS WELLNESS FEATURE

article | *Melissa McIlhaney*
photos | *Jim Lyle*

AT FIRST GLANCE, **MARTHA TEKE** appears to be a typical graduate from the Texas A&M Health Science Center (HSC) College of Nursing. She has bright eyes full of excitement and sports a huge smile as she looks to the future and what life has to offer.

As you talk with Martha, you find she is far from typical and, in fact, quite extraordinary – she’s only 17.

A Gifted Child

Born to immigrants from Cameroon, Africa – Mathias and Martha Teke – Martha lived in the Dallas area for most of her early childhood. She did well in school and from first through third grades consistently tested five to six grade levels above her peers.

“From the day she was born, I knew she was special,” says her mother, Martha. “I just prayed God would give me the knowledge and strength to help her along the path He has for her.”

The path Martha has been down is unconventional, but it would be hard to argue it has led her astray.

Mrs. Teke had always dreamed of sending her daughter to Saker Baptist College, a faith-based, all-girls, secondary boarding school with a robust curriculum in Cameroon. When Martha expressed interest in promoting to a higher grade level so she could be challenged, the family was faced with a difficult decision: Should they take a leap of faith and send their 9-year-old daughter to Cameroon or forsake their dream of sending her to Saker?

After prayerful consideration, Mr. and Mrs. Teke decided to send Martha to

Cameroon, where she attended Saker for almost five years and completed her high school education.

“In the end, I had faith God would take care of my child and knew Saker was the place for Martha,” Mrs. Teke said.

College Bound

At 13, Martha returned home a high school graduate. Her parents were not quite ready to allow Martha to attend a large college or university on her own, so she completed her first two years of higher education at Collin County Community College near her home in North Texas.

Martha then moved to College Station to attend the HSC-College of Nursing at 15. For the first time, she was living on her own and found managing cooking, laundry and other daily tasks even more daunting than her 17-hour course load.

“For the first few months I was here, my mom came up every two weeks to make sure I was eating and my laundry was taken care of,” Martha says. “It was a good thing she did or I would have lived on Honey Nut Cheerios!”

Martha’s friend and fellow nursing graduate, Savannah Johnston, laughs easily as she remembers Martha’s first months.

“It took Martha a while to figure out laundry,” Johnston says. “She was once quite upset when it didn’t come out. It was because she used fabric softener instead of laundry detergent!”

Eventually, Martha got a handle on everyday living and settled into a routine that involved class, church, lots of studying and membership in the African Student Association.

continued on the next page



Left: Martha with friend and fellow nursing graduate, Savannah Johnston



Center: More than 60 family members and friends attended Martha's graduation from the Texas A&M Health Science Center College of Nursing.



Right: The Teke Family – Martha Teke with her parents, Mathias and Martha Teke, along with younger brother, Mathias

Life as a Nursing Student

The first semester of school came easily for Martha. "It was mostly book learning and more facts I could easily remember," she says.

During the second semester of nursing school, clinical work begins. Students spend a considerable amount of time in hospital settings working with patients. They start applying the knowledge they have learned in the classroom.

Martha found this process challenging.

"For the first time, I had to translate everything I had learned into something I could use to help people," Martha says. "I had real trouble using all of the information in my head. It was beyond overwhelming for me."

The HSC-College of Nursing emphasizes critical thinking throughout its entire curriculum, and during her second semester, Martha was not sure she would ever get it.

"I would go to my clinical site every morning smiling and come home every night crying," Martha says. "If it weren't for Professor (Jack) Moreland, I am not sure I would have finished the program."

Moreland, one of Martha's clinical nursing professors, was impressed with Martha but also knew she was struggling. One afternoon, they sat down, and he simply told her, "You can do this."

"Martha had the skills and also the ability," Moreland says. "It took a while for that to manifest in her fingers and enable her to deliver patient care. Nursing students are thrust into many challenging situations and interact with patients on a very personal level. It takes confidence and maturity to analyze and act appropriately in each situation."

Following that conversation, things turned around for Martha. It was slow going, but by her third semester, she was really enjoying her clinical experiences.

"I finally got it!" she says. "Nursing is about people, not just a bunch of facts."

Mission Accomplished

Martha did get it, and she proudly walked the stage on May 21 to claim her Bachelor of Science in Nursing (B.S.N.) degree as a graduate with honors. Joining her in the celebration were more than 60 members of her "family."

"In the African tradition, it takes a village to raise a child," Mrs. Teke explains. "Everyone in attendance played a critical role in getting Martha to where she is today. I am so grateful God placed the right people in her path, enabling her to achieve her goals by offering her emotional balance and by quietly cultivating the attributes of discipline and service to others already innate in Martha."

When asked what makes her special, Martha is very quick to respond: "I have never considered myself more special or smarter than anyone else."

"Nursing is about people, not just a bunch of facts."

Really, I just study very hard, and I am driven to be a good steward of the resources both God and my family have entrusted to me."

Bright Future

Ever the planner, Martha has carefully set goals for herself through 2013. This summer, she will fulfill a perennial teenage dream by getting her driver's license. In the fall, she will begin taking prerequisites for medical school while working as a nurse at St. Joseph Regional Health Center. It is her dream to attend Harvard Medical School.

"Eventually, I want to be a doctor, but for now, I am very in love with nursing," Martha says. "My experience as a nurse can only make me a better physician."

For more information on the Texas A&M Health Science Center College of Nursing, visit nursing.tamhsc.edu.



TEXAS A&M
HEALTH SCIENCE CENTER
COLLEGE OF NURSING

Alicia's addict parents neglected her.
She was placed in a group home.
No one detected depression.
She attempted suicide.
ALICIA HAS A REASON TO SMILE AGAIN.

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BE THE DIFFERENCE.

Long-term weight loss is a choice -- not a diet

Studio Fit's Sharon Johnson talks about deciding to change your lifestyle and habits -- to be the person you want to be.

As I prepared to write this article, my initial goal was to give advice and tips on how to grocery shop for healthy foods - how to read labels and find the best choices among the vast array of food products on grocery store shelves. As I was writing, it occurred to me - there is so much information available about healthy foods and what to eat and what not to eat, do I really need to write another column on the subject? I devote my life's work to coaching and helping people learn healthier habits and take better care of their bodies. However, the one thing I've recently come to realize is that changing to a healthier lifestyle has less to do with the foods we eat and the exercises in which we participate, but everything to do with our mind set and the reasons for wanting to make these changes in our lives.



changes for the better. It's easy to revert back to what's comfortable, and this cycle can be endless. However, once a person gets the vision for where they want to go and can actually themselves getting there, they will have everything necessary to reach the finish line. The mind is incredibly powerful—if a person thinks they can't accomplish something—they'll prove themselves right.

The steps people begin to take as they start on a healthier path seem easy enough—make better food choices, drink more water, and exercise each day. Simple? Yes. Easy? No. These are the things I talk endlessly about with my clients. In order for a person to make any lasting long-term change, they must dig deep and figure out the “why” of wanting to take these steps. A person must ask themselves, “Why do I want to do each of these things? What’s my purpose for wanting to be healthy?” Once they are able to define that purpose, nothing will deter them from reaching their goal.

So many times, a person has a desire to get healthy, lose weight, whatever the case may be, but doesn't have that deep and definite purpose for embarking on the journey. Sure, they may want to fit into a new dress or look good at an upcoming event. However, time and time again, they will end up back in old habits, stuck in that same cycle that they were trying to get out of to start with. This is because vanity alone is not a powerful enough reason to change. The desire is still there (that never goes away), but the problem is that they have not dug deep enough to figure out a purpose and doesn't believe they can make

A purpose that is undefined, a reason that isn't clear—will keep a person from making lasting changes. As soon as there is any discomfort or feeling of deprivation, they'll be right back to the old habits. The funny thing is that they know the old way doesn't work. The old way got them to the spot where they are today. And where they are today is not where they want to be, right?

The person who is devoted to the reason “why” they want to change and be healthier will make the change a priority. Vacations won't get in the way, week-end activities won't get in the way, and friends and family won't get in the way. This person is determined and mindful of the reasons to feel better and live a better life. What people are willing to tolerate will not change. In order to live a healthier life and develop better habits, people must make a concerted effort to create better habits and incorporate them in their lives. This comes by planning ahead and knowing where they are going to end up. Most important of all, is seeing themselves at the finish line.



For more information on starting your lifestyle change, visit www.studiofitbcs.com. Sharon Johnson, ACE - CPT is a certified personal trainer and nutrition expert who can help you start your journey of life-long weight loss. She is the owner of StudioFit in College Station.



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your time is now!

“Dancing for the Health of It” raises over \$50,000 benefiting Health for All

21 local celebrity dance teams competed to raise over \$50,000 to help Health For All

On Friday, April 30th, Health For All hosted the inaugural “DANCING FOR THE HEALTH OF IT!” event at the Brazos County Expo Center.

Health For All's first celebrity dance competition included 21 celebrity dance teams that competed for bragging rights and, in the process, raised over \$50,000 to help provide basic health care for uninsured and low-income residents of the Brazos Valley. Among those competing, a few were given special awards:

Clay & Stacy Riebe – Health For All Champion (for most money raised)
Eddie Coulson & Lauren Osborne – Best Technique
Ron & Katie Fox – Most Entertaining
Donnis Baggett & Beverly Brown – Best Costume

Other participating dance teams included:

David & Catherine Childers; Allison & Jordan Meserole; Eddie Coulson & Lauren Osborne; Nkrumah Dixon & Danny Ballard; Shawn & Nicole Ponzio; Jeff & Amanda Mann; Celia Goode-Haddock & Bill Haddock; Gene & Kathy Joyce; Todd & Sally Matthews; Stephen & Allyson Wright; Shane McAuliffe & Meredith Stancik; Jerrod Johnson & Christen Haney; Mary & David

Stasny; David and Julia Gardner; Clayton & Jana Rhoades; Cal & Beth McNeill; Barry & Angie Solcher; and Saysha Kovacevich & Marty Cangelose.

The judges who participated were Mike Cargill, Janna Joerns, and K. O. & Dee (from Mix 104.7FM). The Master of Ceremonies was Rick Hill.

Health For All is a nonprofit clinic in Bryan that serves thousands of low income, medically uninsured patients every year. Our clinic provides free doctor visits, pharmaceuticals, lab tests, X-rays, education and counseling to low income residents of the Brazos Valley who do not have health insurance and do not qualify for government programs such as Medicaid, Medicare or county indigent funds. By providing an alternative to expensive emergency room visits by the uninsured, Health for All saves area hospitals and taxpayers over \$116,000 per week (more than \$6,000,000 per year).

For more information about Health For All, call Derek Dictson at 979-575-4496 or e-mail at ED@hlth4all.org.



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 Tech Bundle • The Bank & Trust • Thrive Home Health Care
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 • Watercrest at Bryan •

Mail-in ballots available at sponsor locations while supplies last.

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BRAZOS VALLEY

Vote for your favorite businesses in over 160 categories from Best Accessories to Best Women's Clothing Boutique and many more!

Ballots are accepted until July 10th, so make your vote count!

Results will be released in the 2010 Best of the Brazos Valley magazine which will hit newstands and sponsor locations in September!

VOTE ONLINE AT
BestoftheBrazos.com



Green Living

Energy Efficient Living in the Brazos Valley

Healthy living and energy-efficient home products can work together to help you live “greener” (and save some green).



article | Jen Zweacker, REALTOR at Keller Williams Brazos Valley
photos | VJ Arizpe



The phrases “green living” and “energy-efficient home” often bring to mind outrageous and somewhat unattractive images such as a home out in the desert built with recycled tires; flanked by wind turbines and reflective solar panels angled up toward the sun. Dr. Leonardo Lombardini, an Assistant Professor in Horticultural Sciences & Dr. Sonia Garcia, Director of Recruitment in the Department of Geosciences at Texas A&M University demonstrated for us this week that “green” living in the Brazos Valley is anything but unattractive.

The Lombardini-Garcia home is nestled on a quiet street in South College Station. Passersby may stop to admire the attractive architecture of their stunning home. However, it is unlikely that anyone with an untrained eye would realize that the home is a shining example of green living here in the Brazos Valley.

Those who think wind turbines and large solar panels are necessary to create a greener home may be surprised to find all of the small (and relatively inexpensive) green features of this home that lead to reduced energy costs and environmental wellness. Simply utilizing rainfall and sunlight can help save you a bundle and help out the environment. The Lombardini-Garcia home utilizes solar tube lighting, fluorescent bulbs, dual-flush toilets, rain water collection, and a solar water heater. Each of these items can be easily installed in your home and help cut back the usage of both electricity and water.

RAINWATER COLLECTION

A 2,000 square-foot home can harvest about 1,000 gallons of water

from only 1 inch of rain. In order to fully utilize this precious resource, you must have a container large enough to store the runoff water and keep the container sealed to prevent evaporation and contamination. Gutters empty the fresh rain water into a rain barrel or cistern, which can be tapped for hand watering of landscaping. More advanced systems (and larger cisterns) can even be connected to a sprinkler system to automatically water your lawn. Of course, this only lasts as long as rainwater is available to keep the collection container full. Simple plastic water containers cost as little as \$30 and are a great way to start saving money on your water bill. More advanced cisterns and rainwater collection systems help reduce contaminants and allow the water to be stored for longer periods of time by reducing bacterial breeding.



Gutters empty fresh rain water into a rain barrel or cistern. Water then can be tapped for landscaping an hand watering.

DUAL FLUSH TOILETS

Conserve water and cash with easy-to-install **dual flush toilets** which can be found for under \$300. According to the EPA, “if you replace older, existing toilets with WaterSense labeled models, you can save 4,000 gallons per year with this simpler, greener choice.” Using dual flush toilets conserves an additional 40% of daily water usage (10 flushes a day, 8 partial, 2 full flushes).

continued on the next page

SOLAR HOT WATER HEATERS

Use **solar panels** to utilize the sun's natural radiant heat. Water is heated by solar panels which use thermal energy to heat water for your home. There are many kinds of solar water heaters and most are used in conjunction with a traditional or tankless water heater. While tankless water heaters help save on costs, solar heating takes conservation to another level and in conjunction with a tankless heater can significantly lower your monthly energy bill. Heating water accounts for a large portion of the electrical bill, so this is a great way to see financial return while making an environmentally friendly choice.



Solar panels use the sun's natural heat to produce thermal energy for your home. Thermal powered water heaters will help significantly lower your monthly energy bill.

is correctly oriented to prevent overexposure to sunlight through the windows.

- **Quality insulation** can help keep your home cool in the summer and warm in the winter. Select soy based insulation instead of petroleum based foam insulation to utilize renewable resources.

- **Fluorescent lighting** is a simple way to reduce lighting costs. Fluorescent lights last longer and use up 70% less energy.

- **Photovoltaic technology** converts solar energy to usable electrical energy but it is not the most efficient electrical energy source.

- **Wind turbines**, although more costly, are more efficient than solar energy and are a great way to dramatically reduce electrical costs.

- **Smartsense water products** are not limited to toilets, you can also reduce water usage in faucets and shower heads.

- **Radiant barrier windows** can help keep your home cooler while bringing in the natural light.

REBATES

Incentives for creating a greener home do not stop at environmental wellness. The city provides monetary incentives and reimbursements to encourage the use of water and electricity-saving devices. You can learn more about the reimbursement programs at www.cstx.gov

or www.btutilities.com and start saving money on your monthly utility bill.

Jen Zweacker and Ashley Ralph are REALTORS on the Zweacker & Associates team at Keller Williams in College Station. Jen and her husband Greg, head up the Z&A team. For more information about green living or questions about real estate, visit www.zarealestate.com or call them at (979) 693-9100.

SOLAR TUBE LIGHTING

A great alternative to skylights, **solar tube lighting** increases natural light and reduces the amount of artificial light needed to illuminate your living spaces. The rooftop domes range from 1-2' in diameter and capture sunlight. The tubes reject overpowering midday light that can overheat your home and redirect low-angle light to provide consistent lighting throughout the day. Reflective materials inside the tube help to bend the light from low angles and create functional interior lighting. The lens adjusts the light and brightens the room while diffusing the light to provide quality natural sunlight which has been shown to promote both physical and mental well-being. The initial cost is relatively low (they average about \$300-\$350 per light) and each can be installed by a professional within a couple of hours. The small size and easy installation make them usable in even the smallest areas such as pantries, closets, and restrooms. Solar tube lighting quickly pays for itself by almost entirely cutting the daytime use of interior lighting.



Solar Tube lighting increases natural light and reduces the amount of artificial light needed to illuminate your living spaces.

There are many ways to help create an energy efficient home, so you may also want to consider:

- **House orientation** is something to think about when building or purchasing a new home and it costs absolutely nothing! Keep electricity costs low by making certain that your home

Book Delivery for Home-Bound Seniors

Brazos Valley RSVP and the Clara B. Mounce Library in Bryan are sponsoring a new program to deliver books to home-bound senior citizens.

Registration is under way for "Books to Go," and the first deliveries were made on April 27. Deliveries occur every two weeks. Participants can renew books by phone if they want to keep them longer than two weeks.

Call (979) 209-5611 to request registration materials to be sent to your home.

Volunteers also are needed to deliver books on Tuesdays. To volunteer, call RSVP at (979) 595-2800 ext. 2026.



CITY OF BRYAN
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College Station Residents! Register online at www.cstx.gov for Curbside Recycling

Looking for an easy way to start going Green? Start with your trash! Residents in College Station are offered convenient curbside recycling pickup!

Visit www.cstx.gov to sign up for the program, to request more bags, and for more information.

Drop off Recycling City of Bryan offers easy drop-off location for recyclables.

Bryan Drive-In Recycling Center is located in the parking lot of the Bryan Wal-Mart at 2202 Briarcrest Drive.

For more information on what items are acceptable, visit the city programs at BeGreenInBryan.com or cstx.gov/recycle.



The TROUBLE with SNORING

Snoring can be a symptom of a bigger health problem than just a partner's loss of sleep.

Dr. Craig Scasta, DDS answers your questions about snoring and how your dentist (*yes, your dentist!*) can help you and your partner sleep better at night, and feel better in the morning.

ARTICLE | Craig Scasta, DDS

WHEN SHOULD I BE CONCERNED ABOUT SNORING?

Snoring is the sound of partially obstructed breathing during sleep. While snoring can be harmless, it can also be a sign of a more serious medical condition known as **OSA** (*obstructive sleep apnea*), which occurs when the tongue and soft tissues fall back into the throat during sleep, blocking the airway.

People suffering from OSA stop breathing for 10 to 30 seconds, sometimes for one minute or longer, hundreds of times a night. Untreated OSA can contribute to excessive daytime sleepiness as well as an increased risk for high blood pressure, heart attack, stroke, diabetes, depression, memory and concentration problems, obesity and driving accidents.

WHAT CAUSES SLEEP APNEA?

When people are awake (and normally during sleep), the throat muscles keep the throat open and air flows into the lungs. However, with OSA (*obstructive sleep apnea*), the throat briefly collapses, causing pauses in breathing.

This happens when:

- The throat muscles and tongue relax more than is normal
- Tonsils and adenoids are large
- Extra soft tissue in the throat makes it harder to keep the throat area open in people who are overweight or obese
- The shape of the head and neck (bony structure) results in somewhat smaller airway size in the mouth and throat area

WHAT ARE THE SIGNS & SYMPTOMS OF SLEEP APNEA?

The most common signs of sleep apnea are:

- Loud snoring
- Choking or gasping during sleep
- Fighting sleepiness during the day (this occurs even at work or while driving)

Other signs of sleep apnea may include:

- Morning headaches
- Memory or learning problems
- Feeling irritable
- Not being able to concentrate on your work
- Mood swings, personality changes, depression
- Dry throat upon awakening
- Frequent urination at night

HOW IS SLEEP APNEA DIAGNOSED?

Some of the findings that help physicians and dentists assess the risk for sleep apnea include:

- **A medical history** that includes asking you and your family questions about how you sleep and how you function during the day
- **Checking your mouth, nose, and throat for extra or large tissues**, for example tonsils, uvula (the tissue that hangs from the middle of the back of the mouth), and soft palate (roof of your mouth in the back of your throat)
- **A sleep recording** (*polysomnogram*) of your breathing while you sleep
- **A dental evaluation** of the sizes of the dental arches and of the tongue, and whether there is adequate volume within the dental space for the tongue.

continued on the next page



Quick Facts about Snoring and OSA

Habitual snoring affects an estimated **24% of adult women and 40% of adult men.**

Approximately 1/2 of people who snore loudly have OSA (*obstructive sleep apnea*).

An estimated 18 million Americans suffer from OSA.

80-90% of these people remain undiagnosed and untreated which can increase risk of high blood pressure, heart disease, stroke, depression, diabetes, obesity, and TMJ.

25-50% of sleep apnea patients cannot tolerate or comply with a CPAP (*Continuous Positive Airway Pressure*) mask.

Even after a thorough evaluation by the dentist and the physician, a definitive diagnosis of OSA can only be accomplished by a sleep test called a *polysomnogram*. This test is generally performed while the patient spends the night in a sleep lab. The information recorded on a polysomnogram follows: brain activity; eye movement; muscle activity; breathing and heart rate; how much air moves in and out of the lungs during sleep; and the percent of oxygen in the blood.

**HOW IS SLEEP APNEA TREATED?
WHY IS A DENTIST INVOLVED?**

Once a patient has been diagnosed as a sleep center, obstructive sleep apnea can be treated with Continuous Positive Airway Pressure (CPAP), oral appliances, surgery, behavior therapy, or by a combination of these approaches.

According to the American Academy of Sleep Medicine, twenty-five to fifty percent of sleep apnea patients cannot tolerate or comply with CPAP. Oral appliances are especially effective for those patients who cannot tolerate CPAP. The improved compliance rates provided by dental appliances make the dentist an integral member of the sleep medicine team.

WHAT IS ORAL APPLIANCE THERAPY?

Oral appliance therapy involves the selection, design, fitting, and follow-up care of a specially designed oral appliance (similar to a mouthguard).

This appliance is worn during sleep and maintains an opened and unobstructed airway in the throat. Dental management of patients with oral appliances should be overseen by practitioners who have undertaken special training in sleep medicine and/or sleep-related breathing disorders.

WHAT DENTAL CONDITIONS ARE AFFECTED BY SLEEP APNEA?

Sleep studies have shown that during obstructive apnea episodes, the brain shows signs of increased activity known as *arousals*. These central nervous system arousals often lead to increased respiratory effort in an attempt to breathe. This causes a heightened tone of the sympathetic nervous system (the fight or flight response). The up regulation of the nervous system causes repeated contraction of the jaw muscles during the night. This causes jaw clenching, which in turn loads the TM joints. The clenching occurs during the day as well, and eventually loads the joints beyond their adaptive capacity. Dentists who have studied sleep medicine now know that this is a major contributor to TMJ (jaw joint) pain.

The above mentioned arousals also can lead to fragmented sleep. Patients do not obtain deep sleep, resulting in poor sleep quality. Orofacial pain clinics have documented that poor sleep lowers the body's healing capacity and increases the perception of pain. Sleep disorders compound the pain symptoms seen in many jaw, head and neck pain patients. Dentists with special

training in sleep medicine can help recognize the signs of sleep disorders in patients who present with TMJ pain complaints. This enables the dentist to treat the underlying problem and offer more relief for the patient's pain.



Dr. Craig Scasta practices dentistry in Bryan, Texas. He is an active member of the American Academy of Dental Sleep Medicine, and recently completed a Dental Sleep Medicine Mini-Residency at the U.C.L.A. School of Dentistry in Los Angeles, California. This program provided comprehensive and serious training in sleep medicine in accordance with guidelines set by the American Academy of Sleep Medicine.

Dr. Scasta has completed over one thousand hours of extensive training in the areas of TMJ disorders, functional jaw orthopedics, and dental sleep medicine.

Dr. Scasta is active member of the Brazos Valley Dental Society and served as President of the society in 2008. He currently serves as President of the Brazos Valley Academy of General Dentistry. He is a Fellow in the Academy of General Dentistry.

He is Texas A&M Class of '92. He has been married to his wife, Tracey, for fifteen years, and they have two children.

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Are you tired of being tired?

Do you or your partner suffer from:

- Frequent cessation of breathing (*apnea*) during sleep
- Excessive daytime sleepiness
- Loud snoring
- Insomnia
- Headaches, sore throat or dry mouth after waking up
- Elevated blood pressure
- Weight gain

These symptoms are warning signs **OSA** (*obstructive sleep apnea*), a serious medical condition that affects an estimated 18 million people in the United States. Many patients who suffer from TMJ disorder also have sleep apnea. Let **Dr. Craig Scasta** help you sleep better and feel better! Call to schedule your consultation.

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Travel Wellness

INJURY & ILLNESS

Your Survival Guide to Safe and Healthy Travel

article | courtesy of the Centers for Disease Control & Prevention

Every year more and more Americans are traveling internationally — for vacation, business, and volunteerism, and to visit friends and family. Whatever your reason for traveling, this article will help you **Be Proactive, Prepared, and Protected** when it comes to your health—and the health of others—while you are traveling.

BE PROACTIVE!

Take steps to anticipate any issues that could arise during your trip. Learn about your destination before your travel – check for **Travel Health Notices** for your destination. The CDC and World Health Organization (WHO) post country-specific travel notices and warnings on their websites. Information is updated regularly. It is a good idea to be aware of any weather or health concerns before you leave.

Safety & Security Concerns

- Check the current Travel Warnings (long-term conditions that make a country dangerous or unstable) to see if your destination is listed.
- Check to see if your destination has a current Travel Alert (short-term conditions that are risks to the security of U.S. citizens, such as natural disasters, terrorist attacks, violence, or high-profile events).

See a doctor before you travel

It is important that you visit with your family physician before you travel. Let them know where you are going on your trip so they can give you necessary vaccinations or information about your destination. Recommendations for vaccines and medicines depend on many factors that are specific to each person. Be sure to give your doctor all the information needed to make recommendations. Examples of these factors include:

- Where you are traveling within a country,
- The length of your trip,
- What types of activities you might do,
- Other personal matters such as your age, medical and vaccine history, and current medical state.

Think about your health status

Consider whether or not you are healthy enough for long-distance travel, and the accommodations you or your loved ones will need. Think about recent illnesses, injuries, or surgeries.

Do you have any special health needs? In your travel party, will there be any babies or small children, pregnant women, people with disabilities,

people with weakened immune systems?

BE PREPARED!

No one wants to think about getting sick or hurt during a trip, but sometimes these things happen. You may not be able to prevent every illness or injury, but you can plan ahead to be able to deal with them.

Pack smart.

The following items, in addition to a basic first aid kit, will be useful on your trip:

- Copies of your passport and travel documents. (Make sure to make a copy for a friend or family member at home as well)
- Prescription medicines in your carry-on luggage (in their original bottles with identification)
- Pack copies of your prescriptions including generics.
- Medicines to prevent malaria, if needed
- Antibiotic prescribed by doctor for self treatment of diarrhea
- Antidiarrheal medication and mild laxative
- Antihistamine and/or decongestant, hydrocortisone cream
- Anti-motion sickness medication
- Medicine for pain relief or fever
- Sleep aid or sedative
- Cough suppressant or expectorant, cough drops
- Antifungal & Antibacterial ointments/creams
- Insect repellent, sunscreen, hand sanitizer
- Health Insurance Card and Identification
- Water purification tablets & oral rehydration solution packets

Know What To Do If....

If you become sick or injured while traveling, you'll want to see a doctor right away if you: have a high fever (over 102 F) and diarrhea; have bloody diarrhea; visit a malaria-risk area and become sick with flu-like illness; are bitten or scratched by an animal; are in a car accident; are sexually assaulted. If you become ill, be sure to drink plenty of clean water or other fluids. Contact the US Embassy or Consulate if you need assistance.

If you are sick on an airplane, be sure to tell a crew member as soon as possible. Wear a mask to cover your mouth and nose if you are coughing. If your illness is serious, the crew may move you to a different part of the plane or if necessary redirect the plane to land for your immediate care.

continued on the page 22

Selecting the Eye Care Physician that's Right for You

Is this one better, or is this one better -- choosing the right physician is crucial to your vision and eye health.

A child returns home from school with a letter from the school nurse stating that he has failed his vision screening. A construction worker has a piece of metal fly into his eye, and now his eye is red, painful, and won't open. A visitor from out-of-town happens to rip his only contact lens, and doesn't have a pair of glasses. What do these three people have in common? That's right – each person needs to visit an eye doctor. *But how do you choose the right eye doctor?*

OPTOMETRIST VS. OPHTHALMOLOGIST

The first decision you need to make is whether to see an optometrist or ophthalmologist. Optometrists attend four years of optometry school after receiving their undergraduate degree. During optometry school, they complete doctorate-level coursework in the eye, vision, and associated systemic diseases and complete clinical rotations in primary care, ocular disease, cornea and contacts lens, pediatrics/vision therapy, low vision, and neuro-ophthalmology, earning them the designation of Doctor of Optometry. Ophthalmologists go to medical school after completing their undergraduate degree, then complete a one year internship with an ophthalmologist, and then complete a three year residency program. Both are doctors, and both can examine, diagnose, and treat conditions related the eye and visual system. The main difference is that ophthalmologists are licensed to perform major surgical procedures like cataract surgery or LASIK, but optometrists are not. Another difference is that many ophthalmologists delegate the refraction (the determination of the glasses prescription) to a certified technician lacks the undergraduate level education, whereas many optometrists will perform the refraction themselves. However, this depends upon the particular practice. Ultimately, whether you choose an optometrist or ophthalmologist is up to you.

INSURANCE

Another factor to consider is whether or not the eye doctor is on your insurance panel. Just because a doctor is not on your insurance panel does not mean that s/he isn't a good doctor. It simply means that s/he has chosen not to provide services at your insurance's discounted rate. Choosing a doctor on your panel has the potential to save you a lot of money. However, it should not be the only factor that you consider.

You also want to find out how and when the doctor schedules patients. For example, is a patient seen every fifteen minutes? If so, the doctor is more likely to spend less face time with each patient. This means less time for you and the doctor to discuss your concerns, conditions, and treatment options. However, this may be ideal for patients who have busy schedules and require shorter appointments. Is the doctor accessible? What are the office hours? Is

the doctor available evenings or weekends? Do you have to schedule weeks in advance? If you have a medical concern, will the doctor work you in even if s/he's already booked? These are all questions you should ask.

CONTACT LENS AND GLASSES

Contact lens wearers should find out what's involved in the contact lens fitting. For example, if you have a contact lens exam, will you also be given a prescription for glasses or does the doctor require a separate exam? Does the doctor actually have you try on a trial lens, or does s/he write the contact lens fitting without evaluating it on your eye? Does the doctor require that you return for a contact lens follow up before releasing the contact lens prescription, or is the prescription released on the same day as the exam? While some people prefer the convenience of a same-day prescription, other people like trying out the lens for one week because they may discover that the lens they thought was comfortable in the office dries out to quickly or is uncomfortable to wear. This is especially important because most contact lens retailers will not allow patients to return a box of contacts once they've been opened.

LICENSING AND REPUTATION

You should verify that the doctor has an active license and find out if any disciplinary action has been taken against the eye doctor. To check the license and disciplinary status of an optometrist, visit the Texas Optometry board website at <http://www.tob.state.tx.us>. Likewise, to check an ophthalmologist, visit the Texas Medical Board website at <http://www.tmb.state.tx.us>.

REFERRALS

Ask friends or family who they see and about their experiences. Specifically, ask them to rate the staff's friendliness and helpfulness, the doctor's bedside manner, the thoroughness of the exam, the overall professionalism of the office, and selection in the optical. All of these things contribute to overall experience and are difficult to ascertain unless you know someone who has already been there.

Take the time to research your eye doctor. This isn't a one-stop purchase to be taken lightly. This is a situation where you are building a long-term relationship with the individual to whom you are entrusting the care of one of your most important assets – your eyes.



Lisa Januskey, OD is the owner and practitioner of Precision Eye Care in College Station. For more information, contact her at (979) 985-5305 or visit www.bcseyes.com.



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Dr. Lisa Januskey, O.D.

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DENTAL EMERGENCIES

(And how to treat them)



BRAZOS WELLNESS FEATURE

article | American Dental Association

photos | Getty Images

Pain is one of the main reasons people call their dentist. A painful tooth can be triggered by hot or cold foods and drinks. Heavy biting or grinding may break a tooth and cause it to hurt when you chew. Sometimes, when a filling falls out, you may have a throbbing ache. Sports injuries can knock a tooth out completely.

Today, dentists have many options for dealing with dental emergencies. There are advances in pain management and ways to restore teeth. Teeth can be repaired with synthetic materials that are strong and look as good as your natural teeth. Your dentist has the training and skills to identify what the problem is and how serious it is. He or she almost always can reduce or eliminate your pain within a few minutes.

Swelling within the Mouth

NON EMERGENCY - MAKE APPOINTMENT WITH DENTIST

Swelling is potentially the most serious dental emergencies. Swelling within the mouth (intra-orally) is usually due to infection. However, cancer, cysts, injuries, and blocked salivary ducts can also cause swelling. Treatment of intra-oral swelling can wait for a day or two unless the patient has a fever, trouble swallowing or trouble breathing. If any of these conditions exist, and you cannot see your dentist immediately, go to a hospital emergency room as soon as possible.

Knocked Out Tooth (Adult & Child)

EMERGENCY - SEE DENTIST NOW

The accidental loss of an adult tooth or avulsion requires immediate treatment. That tooth must be put back into its socket as quickly as possible. Teeth that are reimplanted within 30 minutes have a high rate of recovery. After 30 minutes, the success of re-implantation falls off dramatically.

Many dentists recommend that lay people on the scene of the accident attempt to reimplant the tooth to save time. Rinse the tooth gently with milk, the patient's

saliva, saline solution (the medical term for salt water) or water. Do not rub the tooth to clean it. Press the tooth firmly into the socket. Ask the patient to hold the tooth in place. Don't worry about lining it up perfectly. Even a front tooth that is reimplanted backwards can be fixed later with a crown.

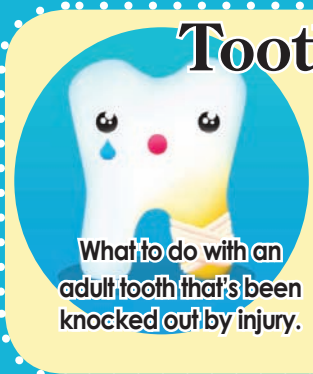
Children with a knocked out baby tooth, should see a dentist right away, but in most cases the dentist will not reinsert the tooth.

Teeth that are forced out of position, but not knocked out also need to be attended to quickly. Dentists will try to numb the area and press the tooth back into its original position. The repositioned tooth may become discolored or develop a root canal infection, but repositioned teeth usually have a good prognosis.

Falling out of Fillings, Crowns & Bridges

NON EMERGENCY - MAKE APPOINTMENT WITH DENTIST

Fillings, crowns and bridges fall out for various reasons. Cement can wash out. Part of the tooth might break. There may be tooth decay. These problems may be a nuisance, unaesthetic, uncomfortable, bad tasting, and even odiferous. However, loose crowns, bridges and fillings do not require immediate treatment. Call your dentist, explain the problem and make an appointment for a time that is convenient for you both. If there is an uncomfortable hole or sharp area, you can fill or cover it temporarily with sugar free chewing gum.



Tooth Saver Techniques

1. Find the tooth and any broken pieces.
2. Hold the tooth by the crown (chewing surface), not the root and rinse the roots of any debris with water.
3. Try to put the tooth back into the socket right away and hold it there.
3. If the tooth cannot be put back, put the tooth in a small baggie or cup with cold milk, NOT tap water!
4. Call the dentist right away for help -- and don't forget the tooth!

What to do with an adult tooth that's been knocked out by injury.

continued from page 8

Broken Tooth (Adult or Child)

NON EMERGENCY - MAKE APPOINTMENT WITH DENTIST

A broken adult or baby tooth usually does not require emergency treatment. Teeth are formed in three layers. The inside of the tooth is the **pulp**. The pulp is composed of nerves, blood vessels. If this layer is penetrated when the tooth breaks, then the tooth will need root canal treatment. The middle layer is the **dentin**. Dentin can be sensitive, but a break through dentin need not be treated right away. Chips and broken pieces of **enamel**, the outermost tooth layer, are sometimes left untreated. For a broken tooth, call the dentist for a convenient appointment. Cover the tooth with soft, sugar free gum if it is uncomfortable.

Broken Denture OR Broken Braces

NON EMERGENCY - MAKE APPOINTMENT WITH DENTIST

While a broken denture or braces are not an emergency, it can be a serious cosmetic and functional problem. Sometimes, broken dentures can be repaired while you wait. That depends on what broke, what caused the break and what the denture is made of. The wearer must take the denture to a dentist. The dentist will examine the condition of the patient's denture, teeth and gums to try to determine why the denture broke. Then, the fit of the denture is checked. If the denture no longer fits well, the denture could break again or cause other problems.

With braces; brackets, bands or wires sometimes become loose, break or fall off. Usually this is caused by chewing hard or sticky foods, putting unreasonable pressure on the appliances. More often, one of the parts will come loose or pop off. This can cause some discomfort but isn't an emergency. Call your orthodontist for an appointment to repair the braces.

Soft Tissue Damage (Lip, Tongue, Gums, & Cheeks)

EMERGENCY - GO TO THE ER

The soft tissues in the mouth are delicate, sensitive and easily hurt. They also

contain a lot of nerves. When they are hurt, it can be very painful. Soft-tissue injuries usually bleed quite a lot because the tissues in the mouth contain many very small blood vessels. Because there is a lot of blood involved, the injury can often seem worse than it is. However, the bleeding usually stops within a few minutes. If it does not stop within 10 minutes with applied pressure, visit the ER, stitches may be needed.



A mouthguard like the one shown above can help prevent tooth injuries during sports, and prevent tooth grinding during sleep.

Prevention

There are a number of simple precautions you can take to avoid accident and injury to your teeth. One way to reduce the chances of damage to your teeth, lips, cheek and tongue is to wear a mouthguard when participating in sports or recreational activities that may pose a risk. Another preventative measure is to avoid chewing ice, popcorn kernels and hard candy -- all of which can crack a tooth. Cut tape using scissors rather than your teeth.

Accidents do happen, and knowing what to do when one occurs can mean the difference between saving and losing a tooth. Any injury to teeth or gums should not be ignored. Nerves or blood vessels could be damaged. There is also a risk of getting an infection. If an infection is not treated it can spread to other parts of the head and neck and cause serious health problems. In rare cases it can even become life threatening. It is very important to always seek treatment for a dental injury. Getting injured teeth repaired and treated as soon as possible after an injury is the best thing to do.

Most dentists reserve time in their daily schedules for emergency patients. Call your dentist and pediatric dentist (for children) to see what their procedures are for emergencies or after-hours treatment.

Wishing you and your family a happy, healthy summer!

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New AOA Report Reveals High Number of Infants with Untreated Eye and Vision Problems

Data shows one-in-six affected overall; higher rates among minority and underprivileged



A new report released by the American Optometric Association (AOA) identifies surprising new insights into the vision and eye health of infants across the U.S. The findings from last year's InfantSEE® Weeks pilot program, a year-long, federally-funded public health initiative, revealed a higher-than-expected number of infants with undiagnosed and untreated vision and eye health problems.

During the 2009 InfantSEE® Weeks, more than 1,000 comprehensive eye and vision assessments were conducted in eight states. Data from the assessments showed that one-in-six infants exhibited an overall cause for concern requiring follow-up care from an eye care professional.

The data also revealed one-in-four premature or minority infants displayed higher rates of cause for concern than other infants assessed during the pilot project. Additionally, one-in-four infants had a cause for concern in households with annual incomes below \$25,000, and one-in-three infants had a cause for concern in households with incomes less than \$15,000.

InfantSEE® provides a one-time, comprehensive eye assessment to infants in their first year of life, typically between the ages of six and 12 months. These assessments are provided at no cost to all families, regardless of ability to pay or access to insurance coverage.

Because healthy eyes and vision are critical to normal development in infants and children, the AOA established the nationwide InfantSEE® program in 2005 to provide comprehensive eye and vision assessments to babies. Participating doctors of optometry, who assessed infants' vision during the program's first four years, observed rates of cause for concern to be between one-in-fourteen and one-in-nine.

Those troubling rates highlighted the need for federal funding to educate more parents and caregivers and increase access to infant eye assessments. Federal recognition and funding was secured in 2008 and the InfantSEE® Weeks pilot program was launched in January of 2009.

"During the past five years, the InfantSEE® program has provided considerable insight into the overall visual health of infants in this country," said AOA president Dr. Randolph E. Brooks. "If not properly diagnosed and treated early, a number of eye and vision conditions can impair an infant's ability to reach important developmental milestones, create lifelong learning and social problems and threaten sight."

Many eye and vision conditions diagnosed during the 2009 InfantSEE® Weeks were those for which early treatment is both very effective and critical for normal development, including farsightedness, nearsightedness, amblyopia (lazy eye) and strabismus (crossed eyes). In addition, two infants assessed were diagnosed with retinoblastoma - the seventh most common pediatric cancer.

InfantSEE® assessments complement a pediatrician's routine well-care visit. However, comprehensive eye and vision assessments like those given through InfantSEE® are more thorough than typical childhood vision screenings, utilizing specialized instruments and procedures, which are not available to routine early childhood vision screening programs.

The AOA recommends that infants have an InfantSEE® assessment before their first birthday and young children have comprehensive eye exams at age three, before starting school and then every two years thereafter.

For information and to find a local InfantSEE® provider, visit www.infantsee.org.

Healthy travel continued from page 18

If you are sick on an cruise ship, tell a crew member as soon as possible. Cruise ships usually have a small medical facility on board, and in most cases can treat illnesses there. If your illness is serious, the medical staff may stabilize your condition and move you to a hospital on land for further treatment.

If you are involved in a disaster while traveling, and are injured, seek medical attention right away. Clean any wound or rash immediately with soap and clean water to reduce risk of infection. Follow the instructions of emergency responders and monitor the US Embassy and news broadcasts for information or announcements. Contact the US Embassy or Consulate for help. Contact family, friends, colleagues and employer as soon as possible to keep them informed of your location and health status.

BE PROTECTED!

It is important to practice healthy behaviors during your trip and after you return home. Here is how you can protect yourself and others from illness during your trip.

- Pay attention to your luggage at the airport and use the safe to lock valuables and identification.
- Pay attention to your health during your trip.
- Use sunscreen and insect repellent as directed.
- Be careful about food and water. Drink only clean or bottled water.
- Try not to take risks with your health and safety.
- Limit alcohol intake, and do not drink and drive.
- Always wear a seat belt.
- Wear protective gear when doing adventure activities.
- Respect your host country and its people by following local laws and customs. Ignorance of the law may not get you out of trouble.
- Pay attention to your health when you come home.

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8:00-10:00am - **Dr. Laura**

10:00-10:30am - **Family Talk** with Dr. James Dobson

10:30-11:00am - **Focus On The Family** with Jim Daly

11:00-11:30am - **Family Life Today** with Dennis Rainey

12-12:30pm - **Mid Day Show & Community Calendar**

12:30-1:00pm - **Insights for Living** with Chuck Swindoll

1:00-3:00pm - **The Janet Mefferd Show**

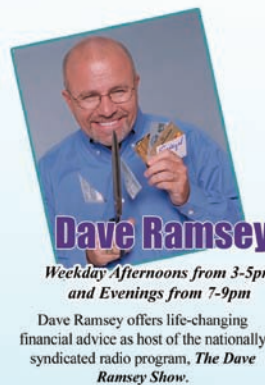
3:00-5:00pm - **The Dave Ramsey Show**

5:00-6:00pm - **Drive Time Show & Community Calendar**

6:00-7:00pm - **Dr. Laura**

7:00-9:00pm - **The Dave Ramsey Show**

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Happy Memories or Household Hazards?

How family members can help seniors clear potentially dangerous clutter from their homes

Local senior care experts are encouraging families to take the opportunity to help aging loved ones clear potentially dangerous clutter from their homes.

“A lifetime accumulation of possessions combined with an influx of daily junk mail, bills, newspapers and magazines can quickly overwhelm seniors who are struggling physically, mentally or emotionally,” said David Gest, owner of the local Home Instead Senior Care franchise office serving the Bryan/College Station area.

Experts say even seniors who simply don’t know how to part with their possessions are vulnerable. The risks are many from slipping on loose papers to the threat of fire to the health effects of mold and mildew. Clutter can also interfere with family relationships and leave adult children wondering if the only inheritance awaiting them is a big mess.

in a senior’s home that indicate clutter creep could become a problem including piles of mail and unpaid bills, difficulty walking safely through a home and frustration on the part of a senior trying to organize.



“Family caregivers can become just as overwhelmed as seniors,” said Home Instead Senior Care’s Gest. “We suggest a three-step plan where the family caregiver brings three bins – one for the stuff the senior wants to keep, one for donations and the other for trash. Sometimes seniors just need a little help.”



“National Home Safety Month presents a great opportunity for family caregivers to help seniors de-clutter for their own health and well-being,” Gest said.

In order to identify potential trouble, the Home Instead Senior Care network is alerting family caregivers to watch for the signs



Founded in 1994, the Home Instead Senior Care® network is the world’s largest provider of non-medical in-home care services for seniors, with more than 875 independently owned and operated franchises in 15 countries and 16 markets, spanning four continents. Home Instead Senior Care local offices employ 65,000+ CARE-Givers who provide more than 40 million hours of client service each year through activities including companionship, meal preparation, medication reminders, light housekeeping, errands and shopping.

Home Instead Senior Care founders Paul and Lori Hogan pioneered franchising in the non-medical senior care industry and are leading advocates for senior issues in America. At Home Instead Senior Care, it’s relationship before task, while continuing to provide superior quality service that enhances the lives of seniors everywhere.



Whether you are looking for someone to help an aging parent a few hours a week or need more comprehensive assistance, Home Instead can help.



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