

TAKE ONE FREE

HEALTH & WELLNESS

Relieving
Pain,
Restoring
Function

page 2

Restoring function, renewing lives

By Bindu Pathrose,
DO, Garnet Health

If you or a loved one has experienced a long hospital stay due to a traumatic injury or chronic or debilitating condition, you may be wondering, "Now what?" Once an injury, condition

or disease has stabilized, it can be a long road to recovery. But an important part of your treatment plan is just beginning; focus on improving and restoring movement and function as well as quality of life.

Physical medicine and rehabilitation (PM&R) focuses on impairments affecting the bones, joints, tendons, ligaments, muscles, nerves, brain and spinal cord. PM&R physicians take a multidisciplinary approach to treating these conditions. They work collaboratively with neurologists, orthopedists, neurosurgeons, physical therapists, occupational and speech therapists, and primary care physicians to look at the "big picture" of improving function.

Through various treatments and procedures, the goals of PM&R are to:

- Maximize independence with daily-living activities
- Decrease pain
- Enhance performance and functionality to improve quality of life without surgical intervention

Garnet Health is pleased to announce the opening of Garnet Health Doctors' new PM&R specialty practice, led by Bindu Pathrose, DO. Services include general evaluations, prescribing therapy modalities and monitoring functional progression, and prosthetic and orthotic management, as well as diagnostic testing such as electromyography (EMG) and office-based procedures such as joint injections.

Garnet Health Doctors PM&R specialists treat adult patients with acute or chronic musculoskeletal or neurological conditions. Reasons for PM&R treatment include:

The benefits of Physical Medicine and Rehabilitation



CONTRIBUTED PHOTO

Dr. Bindu Pathrose

- Stroke
- Amputation
- Traumatic brain injury (including concussion)
- Conditions requiring continued physical, occupational and speech therapy
- Continued management after being discharged from inpatient rehab
- Orthotics and prosthetics/bracing
- Musculoskeletal issues involving the spine (cervical, thoracic, lumbar, sacral)
- Large-joint and trigger-point injections
- Botox for limb spasticity and migraine management

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The PM&R practice is located on the third floor of the Outpatient Services building, on the Middletown campus of Garnet Health Medical Center. PM&R outpatient services are provided by George Chen, DO; George Gombas, MD; and Selcen Senol,

MD. Appointments can be made by calling (845) 333-7575 or visiting garnethealth.org/pmr.

Bindu Pathrose, DO, serves as the medical director for both Garnet Health Doctors PM&R practice and Garnet Health Medical Center's inpatient rehab unit.

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Choices Mental Health Counseling PLLC expands services to NE

Narrowsburg Choices Mental Health Counseling PLLC, led by licensed mental health and addiction counselor Thomas Rue, is expanding its services into the Keystone State.

This expansion will allow residents of Wayne and Pike counties, and others across both the Commonwealth and New York State, to access confidential counseling services either in-person at the Narrowsburg office or conveniently through telehealth.

Rue was notified on October 31st of his Pennsylvania license as a professional counselor, now authorizing him to offer private services to people physically located in the commonwealth.

Located at 7 Erie Avenue in Narrowsburg, Choices Mental Health Counseling PLLC has built a reputation for compassionate,

evidence-based mental health and addiction counseling for residents of Sullivan County, and beyond.

The expansion to Pennsylvania will increase access to mental health care for individuals and families seeking support across state lines. Previously based in Monticello, Rue moved his practice to Narrowsburg in August 2023.

He worked as a psychotherapist and counselor for public and private agencies in New York State from 1987 until entering private practice in 2010. Before 1987, he worked for Wayne County Children and Youth Services in Beach Lake, Pa.

Rue brings decades of experience supporting individual adults and teenagers, couples, and groups. Choices Mental Health Counseling PLLC offers individual psychotherapy generally for those

‘Our mission is to ensure that anyone who needs support, whether in New York, Pennsylvania, or elsewhere, has access to compassionate, non-judgmental, person-centered care.’

aged 12 and older, group therapy for adults, and couple therapy. Issues may include depression, anxiety, trauma, grief/loss, ADHD, or other mental health concerns, as well as recovery from addiction or alcoholism.

Rue noted that for four decades he has collaborated with allied

healthcare providers, schools, probation/parole officers, courts, attorneys, child welfare workers, and others, with clients’ consent and consistent with their unique needs and preferences.

“By reaching out to Pennsylvanians, we aim to bridge the gap and offer accessible mental health services across state lines,” Rue said. “Our mission is to ensure that anyone who needs support, whether in New York, Pennsylvania, or elsewhere, has access to compassionate, non-judgmental, person-centered care. Choices Mental Health Counseling celebrates and honors diversity.

“My office is a safe and supportive space, including for LGBTQIA+ individuals and their allies, where everyone is welcomed and valued, in-person or virtually. I am committed to providing


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compassionate care tailored to the unique needs of each client," he added.

Choices Mental Health Counseling PLLC is dedicated to accessibility and accepts Medicare as well as commercial insurance plans, including Aetna Behavioral, Allied Benefit System, Beacon Health Options, Capital District Physicians Health Plan (CDPHP), CIGNA Behavioral, Emblem Health, Anthem and other BCBS affiliates, Fidelis Care NY, Geisinger Health Plan, GHI, HealthFirst NY, Local 1199 SEIU, MVP Healthcare, MagnaCare, Quest Behavioral Health, TRICARE, ValueOptions; and several employee assistance program. Applications are currently pending with the Community Care Behavioral Health (CCBH) managed care and other Pennsylvania health plans. Self-payment is also accepted.

To learn more or to schedule an appointment, please contact Choices Mental Health Counseling PLLC at 845-513-5002 or email tom@choicesmhc.com.



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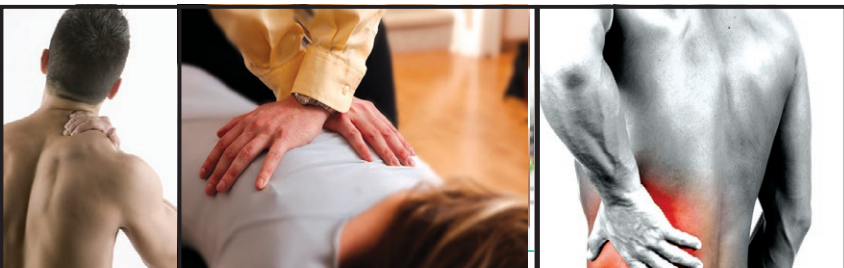
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What is a Death Doula?

BY WILLOW BAUM

Modern medicine -- and how well and often it cures and fixes us -- can lead us to sometimes think that we might just live forever.

Through life's later stages, we spend more time with doctors and in emergency departments. A consequence of medical interventions is that more of us are living longer with life-limiting illness and infirmity. Often the end sneaks up on us.

Dying isn't a medical event. It's a human experience.

End-of-life educator and author Barbara Karnes says, "Dying isn't a medical event. It's a human experience."

This mindset shift, along with volunteering for hospice and caring for my parents later in life, inspired me to seek professional training as a death doula. This

new, emerging practice -- also known as end-of-life doulas or end-of-life planners -- is a response to the desire for more compassionate, personalized end-of-life care.

For much of the last century, dying and death took place out of sight, in hospitals and care facilities. Consequently, recent generations have little to no first-hand experience with aging, illness, and death. This is where death doulas can help fill some critical gaps throughout stages of aging, illness, and planning for end-of-life.

Your life and death, your way

Dying -- and planning for it even when you are young and vital -- isn't just about the biological and clinical aspects. Death doulas provide holistic care to address the emotional, spiritual,

and practical needs of both the person dying and their loved ones.

End-of-life doulas create a safe space to discuss fears, resolve unfinished business, and explore wishes for a peaceful death with dignity and meaning that is unique to each client. They support individuals and families by offering practical advice and effort to ease the burden during a challenging time.

Model of Practice

Services and support provided by death doulas vary greatly but these principles guide the profession:

1. **Non-medical support.** End-of-life doulas do not give medical advice nor perform clinical tasks such as giving medications or wound care.
2. **Non-judgmental support.** The

Doula seeks to understand each client's goals and values and does not impose their own on the situation.

3. **Family centered approach.** The client and their client's friends and important relationships are the focus of support. The doula complements and collaborates with partners, and care providers and does not replace them.

4. **Holistic care.** The Doula recognizes all aspects of a person, the biological, psychological, social and spiritual aspects of their life. Within this understanding and context, a doula offers information, ideas, and referrals for a client to tap into complementary or alternative approaches beyond the medical model.

5. **Empowerment.** Doulas promote informed decision-making and foster maximum self determination for each client and their

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loved ones.

6. Team Approach. Doulas are collaborators. They can help provide continuity in working with each client and other professionals -- e.g. healthcare, legal, accounting, et al -- to meet client goals.

National End-of-Life Doula Alliance (NEDA) <https://www.nedalliance.org/>

To tap into Zoom-based classes and workshops related to caregiving, aging, illness, and planning for end-of-life, visit FriendForTheEnd.com.

Doulas are everywhere

To learn more about end-of-life doulas and locate one in your region, visit the

Willow Baum writes creative non-fiction and is a consultant to family caregivers and an end-of-life planner at FriendForTheEnd.com.

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National Veterans and Military Families Month: Honoring Service and Sacrifice

BY MATTHEW KLEMAN
VETERAN PEER SERVICES COORDINATOR
VET 2 VET OF SULLIVAN COUNTY

Every November, the United States observes National Veterans and Military Families Month, a time dedicated to recognizing and honoring the sacrifices made by Veterans and their families across the nation. This month serves as a poignant reminder of the courage and commitment of those who have served in the armed forces, as well as the unique challenges faced by military families.

National Veterans and Military Families Month was officially recognized in 2010, although the spirit of honoring Veterans has long been a part of American culture. The month encompasses Veterans Day on November 11, a day initially established to commemorate the end of World War I. Over the years, it has evolved into a broader celebration of all Veterans, providing an opportunity for Americans to express gratitude and support for those who have donned the uniform.

National Veterans and Military

Families Month holds a profound importance in various aspects. This observance allows us to pay tribute to the bravery and sacrifices of Veterans and their families. It's a time to reflect on their service and express gratitude for the freedoms we enjoy. The month also sheds light on issues that Veterans and military families face, such as mental health challenges, economic hardships, and the complexities of reintegra-

tion into civilian life.

Mental health is a critical aspect of the conversation surrounding Veterans and military families. The transition from military to civilian life can be challenging, and the stigma surrounding mental health issues can hinder many from seeking help. November serves as an opportunity to promote mental health resources, encouraging open

dialogue and fostering supportive environments.

Throughout November, numerous events take place across the country to honor Veterans and military families. These can range from parades and ceremonies to educational programs and community service projects. Local schools often participate by teaching students about the significance of military service, encouraging the younger generation to appreciate the freedoms afforded to them.

National Veterans and Military Families Month is more than just time for reflection; it is an opportunity for action. By honoring the sacrifices of Veterans and their families, we can foster a culture of appreciation and support. As we celebrate this month, let us commit to showing gratitude not only through words but through tangible actions that enhance the well-being of those who have served our nation.

Whether through volunteering,



November is Military Family Awareness Month



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advocating for mental health resources, or simply expressing thanks, every effort counts in cre-

ating a more supportive environment for our Veterans and their families.

Key resources for Veterans and Military Families

1. Department of Veteran Affairs (VA) – The VA offers a wealth of resources including healthcare services, mental health support, and benefits information. Their Veterans Crisis Line provides immediate assistance for Veterans in distress, available 24/7. Dial 988 then PRESS 1
www.va.gov

2. National Military Family Association (NMFA) – The NMFA advocates for military families and provides resources related to education, financial assistance, and health care. They also offer scholarships and grants to support military spouses and children.
www.militaryfamily.org

3. Military OneSource – Military

OneSource provides free resources for active duty, National Guard, and reserve members and their families. Services include counseling, financial planning, and relocation assistance.
www.militaryonesource.mil

4. Give An Hour – This nonprofit offers free mental health service to Veterans, service members, and their families. They connect those in need with trained professionals who understand the unique experiences of military life.
www.giveanhour.org

For more information about Vet 2 Vet of Sullivan County's services and programs, call 845-794-4228 and ask to speak to a Veteran Peer Advocate.

Garnet Health is honored for Digital Excellence

Garnet Health is pleased to announce that both Garnet Health Medical Center and Garnet Health Medical Center – Catskills have earned the 2024 College of Healthcare Information Management Executives (CHIME) Digital Health Most Wired recognition for the consecutive eighth year. The achievement was received in the “acute” survey selection.

The Most Wired program conducts an annual survey to assess how effectively healthcare organizations apply core and advanced technologies into their clinical and business programs to improve health and care in their communities.

“Like many other industries, healthcare systems are rapidly adapting to the fast-changing landscape of digital technology. The push to transform healthcare through innovation is accelerating,

and our organization is committed to leading the way in digital healthcare excellence,” said Craig Filippini, Chief Information Officer, Garnet Health. “The Most Wired survey program reaffirms our dedication to being a driving force in reshaping healthcare today and for the future, all while maintaining our unwavering commitment to delivering the safest and highest quality care to our patients.”

Among the nearly 48,000 facilities represented, Garnet Health ranked above peers in categories like analytics and data management, population health, infrastructure, and patient engagement. The survey assessed the adoption, integration and impact of technologies in health care organizations at all phases of development, from early stages to industry leading.

To learn more about Garnet Health, visit garnethealth.org.



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BY HEDY SCHNELLER
ILLUMIA PRODUCTS

During my professional life, I have had the privilege to help folks with a variety of illnesses and injuries, but none touched me as deeply as treating a person with an acquired brain injury. Whether as a result of illness Long Covid, stroke or trauma, an injury to one's brain is the moment in which life changes in ways not predictable.

From incredible stories of recovery to tales of chronic frustration, brain injury affects the individual, the family and their community.

Although I have retired from my life as an occupational therapist and rehabilitation director with a specialty in adult neurologic rehabilitation, I was recently asked to assess someone who sustained not only a brain insult but also orthopedic injuries. In my neck of the geographic woods, highly skilled rehabilitation professionals are a scarcity. Patient, family support and most importantly education and training is limited.

These are the circumstances that motivated me to share knowledge and provide guidance to help make the insurmountable achievable.

It is not all there is!

In spite of suffering damage, our brain can heal. It can make new connections and hard-wire new pathways which is how an individual can regain some or all of their independence. The key is to provide the individual with care-

Is that all there is?

fully curated challenges: opportunities to experience simple things like drinking from a cup to paying their bills. Start with simple tasks and provide variety and lots and lots of repetition. Expect set backs because everyone experiences them. Weather the outbursts because emotions are felt differently than before. It takes years for a brain to heal and make those important new connections.

Given the right opportunities, this will happen.

As a family member or caregiver, it is so important to ask questions. Yet here is the caveat: what are the questions you should ask. When your questions are about the week or month ahead you will likely get concrete answers.

Ask about the nursing goals for your family member for the upcoming day or two, if they are in the hospital. Ask about what medications can be weaned. Ask to see your social worker frequently; they are your connection to the medical team, who may not always be available to you.

There are many support systems available and each is appropriate at different points in the recovery journey. Seek them on Facebook, or outreach programs affiliated with your local hospital.

What else can you do?

One of the important vehicles to promote learning and recovery is to enable motion. Facilitate movement to explore and learn self (body), immediate environment (bed, toilet, meal table), then home environment. Provide quality rest with absence of stimulus (no tv noise), good hydration, consistent clear communication interspersed with periods of work (self care, exercise).

If you are now wondering if or how what you have read applies to you or your family member, then you have understood how important it is to assess each individual to determine their ability and difficulties and not categorize that person by a diagnosis. None of us are just an illness or an injury. We are whole beings with complex histories that interplay with the injury and the potential for recovery.

In the beginning

After an acquired brain injury, the individual progresses from the ICU to a rehab unit to a traumatic brain injury facility. Keep in mind that the medical team is bound by licensure,

by facility policy and most importantly bound to provide the best care possible to your family member. On occasion members of the team are not able to make independent decisions outside of the parameters I mention.

As an example, Mike, the person with a brain injury that I recently assessed, will have a virtual sitter assigned because he is restless, has poor insight and judgment and is known to pull out his catheter. This has already happened and he failed a voiding assessment, requiring his catheter to be reinserted.

Mike becomes agitated (due to his recent injuries) when the virtual voice asks him to leave the taped catheter alone. Mike spends all day in bed. He wears a hospital gown, and fortunately is able to move and touch most parts of his body. He has easy access to his catheter. Perhaps rather than the agitating virtual sitter and the disembodied voice telling him to stop what he is doing, he would benefit from single use hospital pants. These would limit his access to the catheter, remove the need for the agitating virtual sitter and improve dignity. Yet, the hospital staff, according to policy, will insist on the virtual sitter, or mitts, or a 1 to 1 sitter.

A simpler option is available, but as I stated, there are license issues, policy issues and sometimes lastly patient need issues. In my opinion, as a former therapist, access to information, support from folks who are traveling a similar road, and access to people who have the knowledge and skill to guide you appropriately, makes the recovery trip a bit easier.

Dear reader, I can cite cases and situations and report on outcomes, but that would take many pages and chapters. If you are so inclined, read any of the works of Dr. Oliver Sacks, a neurologist, who explored the brain's strangest pathways and wrote about it. Ultimately, do not be hesitant to ask, to request explanations and reasons why. Ask how you can facilitate the journey.

If, on the other hand, you are the individual whose life has been changed by a brain insult, I am here to tell you that if you continue to put in the work needed, you will improve, you will achieve many milestones and you will experience many setbacks. But, dear reader, isn't that all life is about?

Should you want to reach out, do so and I will do my best to answer or direct you to the optimal source.



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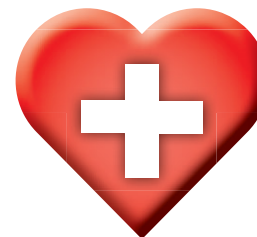
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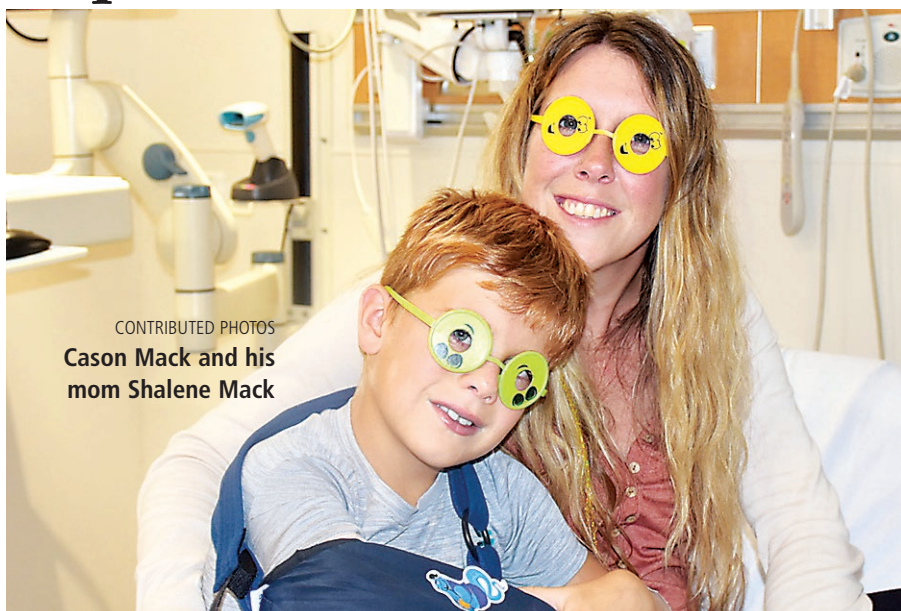
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A little fun for WMH pediatric patients with Jared Boxes



CONTRIBUTED PHOTOS
 Cason Mack and his mom Shalene Mack

Recent pediatric patients at Wayne Memorial Hospital (WMH) braved their way through surgery with a little help from Jared Boxes.

In September Cason Mack and his mom Shalene Mack donned some silly glasses to brighten their day a bit, while in pre and post op waiting.

This month, Elizabeth Canfield was treated like royalty, complete with her own princess crown. She's the daughter of Certified Nurse Aide Sarah Canfield. Elizabeth also received a handmade pillowcase to take home.

Noticing the tender moment Linda Vega, RN, gave each family a Jared Box filled with small toys and fun activities for an amusing distraction. "The stuff the community provides makes it better for children when they have to come here," she explained.

Jared Boxes are named for Jared McMullen, a central Pennsylvania boy diagnosed with an incurable brainstem tumor in 1999. He always carried a backpack with toys and games to his appointments and shared them with other children.

He died in November 2000. To honor Jared, his classmates created boxes filled with toys and games for pediatric patients and that inspired a movement of

over a million boxes to hospitals nationwide. Locally, WMH has received Jared Box donations from individuals and organizations including the Salem Community Church in Hamlin and, earlier this year, Brook Chapman's Day Care in Waymart.

It's not uncommon that a child feels a little anxious or scared while at a medical facility. Jared Boxes have become a gift of play to children in the hospital. To find out more, go online to jaredbox.org.



Elizabeth Canfield



Residents
 Ingrid and Thomas
 with their daughter Carol,
 Business Manager of
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