

S O U T H W E S T F L O R I D A ' S

Health & Wellness[®] MAGAZINE

June 2016

Charlotte/South Sarasota Edition - Monthly

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FREE



Being an Effective Bystander

Hearing vs. Vision

**Eat Smart
for Healthy Teeth
and Gums**

Legends of the Fall

**Facial Spider Veins?
Cherry Hemangiomas?
Unsightly Moles?**

VeinGogh Is The Solution

**Did You Know:
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Southwest Florida's Health & Wellness Magazine can be found in over 600 Southwest Florida medical facilities including, hospitals', doctors', chiropractors' and dentist offices. Find a copy of your FREE Southwest Florida's Health&Wellness Magazine in most grocery and convenience stores as well.

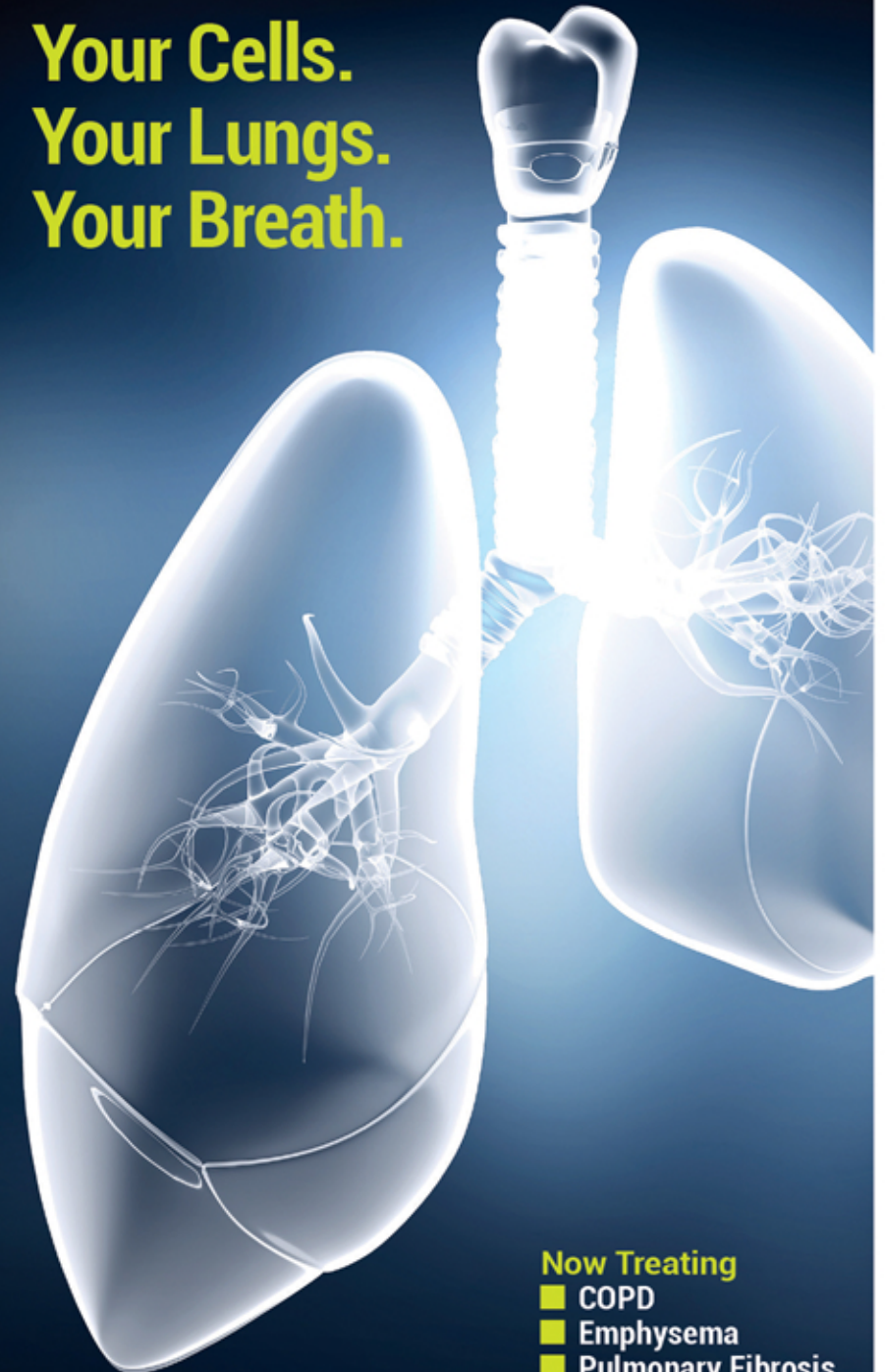
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Did You Know: Eighty Percent of Shoulder Problems Do Not Require Surgery!

I have been in practice for seventeen years as a general orthopaedic surgeon with a sub-specialty in foot and ankle. As a general orthopaedic surgeon, I take care of all types of injuries ranging from fractures to degenerative joint disease, acute traumatic injuries sustained in accidents from slips and falls to car crashes, chronic problems in feet, ankles, knees, knee replacements, hips, hip replacements, elbows, wrists, hands, shoulders, crush injuries, sports injuries, and nerve damage in extremities just to name a few. In the last several years as my practice has continued to diversify I have been taking care of a greater number of people who have shoulder problems. I have had literally hundreds of patients come to me with surgical recommendations. I have treated most of these people conservatively back to great shoulder health without surgery.

Often I am scratching my head trying to figure out why surgery was recommended in the first place because these people have minor problems that 80% of the time could get better with a cortisone shot, physical therapy, and activity modification. In fact over the years I have kept a log of these patients who were strongly recommended for surgery who were very intrigued to hear there were conservative measures that could work. With the list several hundred patients and growing; simple conservative remedies have gotten them completely better. No surgery had to be entertained and no surgeries were performed.

I can only remember the teachings of Dr. Hubert Pearlman my mentor and the chairman of my orthopaedic surgery residency. He was a guru of all things orthopaedic in Brooklyn, NY. In fact he was the doctor that brought joint replacements to Brooklyn, NY. He always lectured us that sleazy, shady, unnecessary selling is something that fits in very well with owning a used car lot. If that's what you want to do when you grow up, it's your right to do it, but then you should work or own a used car lot. He always told us as physicians and surgeons to do the right thing. We did take a Hippocratic Oath to attempt never to do harm, to always be on the right side of medical treatment, to do your best. Even in spite of your best, sometimes bad things happen to people. And at least if you tried to do your best you can feel good about your treatment. He warned us that even in a busy practice there could be weeks or months where our offices could be near empty and we would be wondering if we would ever get a new patient again. With a reputation for doing the right thing, trying your hardest and best for patients, patients will continue to come.



To err is human. But, I have always tried to live by those words of wisdom from my old chairman, may he rest in peace, and those words have never failed me. Do the right thing, do only the treatments that are necessary. There will always be enough people with real medical problems that you don't have to make them up and do unnecessary things. Treat each patient the same way you would treat a family member. These are words to live by and I try my best.

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Facial Spider Veins? Cherry Hemangiomas? Unsightly Moles? VeinGogh is the Solution!

Veins be gone with Veingogh!

By Joseph Magnant, MD, FACS, RPVI

Have you ever wondered what causes those pesky broken capillaries on your facial skin? There are a number of causes that can damage these facial veins such as extreme sun exposure, rubbing or scrubbing your face too forceful or even skin conditions such as rosacea. In extreme cases, a possible cause for these facial veins could be alcoholism or liver damage. The tiny veins are right under the surface of the skin, making them very delicate and easy to enlarge and break. Once the veins are damaged, because of the fragility, they are unable to repair back to normal thickness and size. The medical term for broken facial capillaries is telangiectasia. The treatments for telangiectasia are laser therapies or facial aesthetic surgery. Have you also ever wondered what causes those red freckles? The medical term for these red freckles is cherry angiomas. We do know the exact cause for cherry angiomas but age, climate and sun exposure could increase the cause.

Fortunately, there is an easy and affordable laser treatment therapy called VeinGogh Ohmic Thermolysis System. According to the VeinGogh analysis, this laser generates a tiny, regulated, high frequency current delivered to the vessel via a hair-thin probe. A "micro-burst" of energy selectively heats the vein, coagulating the blood and collapsing the vessel wall, which is quickly absorbed into the body. All this is accomplished without affecting the outer layers of the skin resulting in a quick return to normal daily activities.



Frequently asked questions according to VeinGogh: The Art of Vein Treatment

Does the treatment hurt?

“On a pain scale of 1-10, with some laser treatments being an 8-9, VeinGogh is a 2-3. Since the procedure uses a hair-thin probe inserted into the vessel, there can be a slight “pinch”. Patients report it feels similar to a hair being removed.

Is there any downtime?

The precise nature of VeinGogh treatment limits the risk of over-treating, so there is little to no trauma to the skin. Following treatment, there will be some mild redness that usually lasts about 2-3 hours.

Will the veins come back?

Veins that have been properly treated will not return. However, new veins may develop over time and require retreatment. Follow-up visits are recommended.

Does VeinGogh only work on veins?

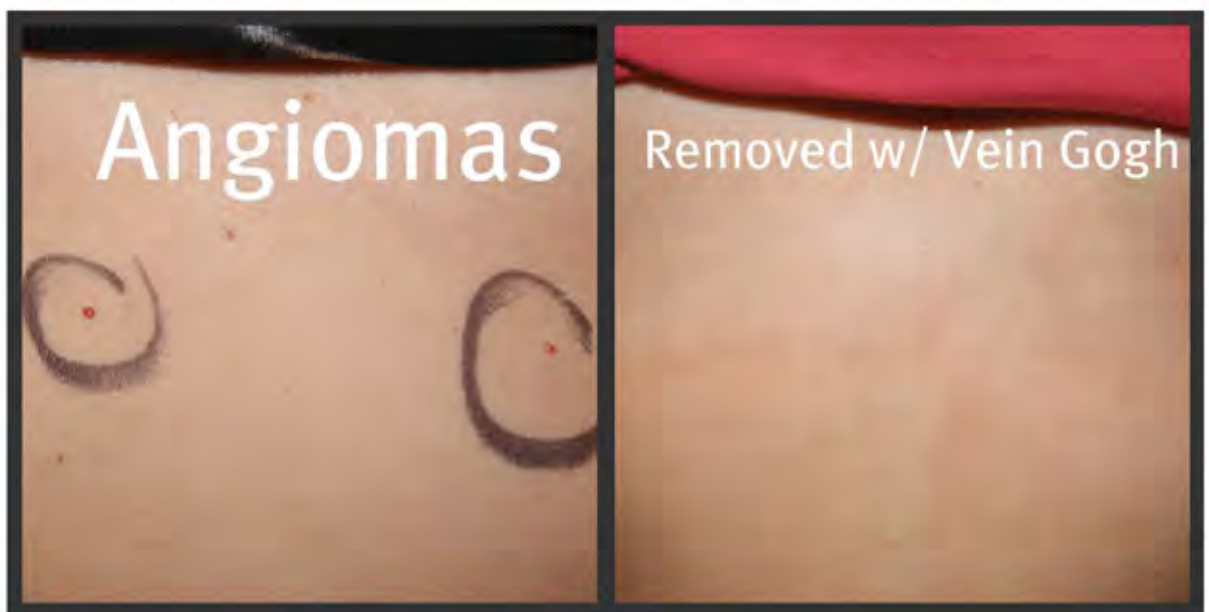
No! VeinGogh can also be used to eliminate cherry angiomas (raised red freckles or moles), small hemangiomas (raised freckle or mole), skin tags, spider nevi (cluster of small veins), and even the redness of rosacea.

When will I see results?

Immediately! You will see continuous improvement over several weeks as the treated vessels are reabsorbed.

Does VeinGogh only work on veins?

No! VeinGogh can also be used to eliminate cherry angiomas (raised red freckles or moles), small hemangiomas (raised freckle or mole), skin tags, spider nevi (cluster of small veins), and even the redness of rosacea.



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Legends of the Fall

Many people assume that falling is just a part of getting older. But the reality is that falls are never normal—and there are steps you can take to prevent them from happening.

STEP 1: BUILD YOUR STRENGTH

Exercise can boost strength in muscles that help you stay balanced, such as those in your legs and core. Physical activities such as yoga and tai chi are great ways to build strength in these crucial muscles.

STEP 2: MANAGE YOUR MEDICATIONS

A number of drugs, including antidepressants, antihistamines, blood pressure medicines, pain relievers and sleep aids, have adverse reactions that can compromise your balance, whether by causing dizziness and lightheadedness or making you drowsy. Discuss new medications with a doctor or pharmacist to learn about potential interactions or side effects that could lead to falls. Follow dosage instructions closely to make sure you're taking medications correctly.

STEP 3: STAY WELL

A healthy, well-rounded diet can help you reduce your risk of high blood pressure, diabetes and stroke, all of which can lead to falls.

In addition, regular doctor visits can help you identify vision problems and conditions such as vitamin D deficiency that may make you prone to falls. According to the National Council on Aging, poor vision can make you twice as likely to fall than if you didn't have vision problems. Annual checkups also help you stay up-to-date on immunizations. Ear infections and upper respiratory infections, such as the flu, can cause inflammation of the inner ear, which can make you feel dizzy or off balance.

STEP 4: CREATE A SAFE ENVIRONMENT

Make your home easier to navigate. Remove trip hazards, such as throw rugs and clutter. Install good lighting throughout your home and handrails along staircases and next to bathtubs and toilets. Also, outfit your bathtubs with anti-slip mats or treads.

Don't take your balance for granted. The Center for Balance Disorders at Bayfront Health Port Charlotte is offering free individualized assessments with tips on ways you can improve balance. Call **877-686-CARE (877-686-2273)** to register for an upcoming session.



WAYS TO EAT FOR BETTER BALANCE

1. Avoid high-salt foods. This reduces high blood pressure, a risk factor for falls. Salt can also exacerbate symptoms of Ménière's disease, which causes balance problems.

2. Drink more water. Low blood pressure is just as much a culprit in balance problems as high blood pressure. Counteract it by drinking plenty of water.

3. Cut down on alcohol and caffeine. Both can contribute to problems with blood pressure and, as with salt, they can worsen symptoms of Ménière's disease.

4. Boost calcium and protein intake. Calcium helps maintain bone density, while protein aids in muscle growth.

5. Eat the rainbow. Including a variety of fruits and vegetables helps maintain healthy blood pressure levels, and a healthy diet improves blood flow, which can improve your balance.



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Eat Smart for Healthy Teeth and Gums

By Dr. Alexander Gaukhman

If you are what you eat, then it's particularly true for your teeth and gums. When you drink sugary beverages and eat starchy foods, you're not only feeding yourself—you're feeding the plaque that can cause problems in your mouth.

Plaque is a naturally occurring, thin, invisible film of sticky bacteria and other materials that covers the surfaces of your teeth. When sugars or starches in your mouth come in contact with plaque, the acids that result can attack teeth for 20 minutes or more after you finish eating. Repeated attacks can break down the hard enamel on the surface of teeth, leading to tooth decay. Plaque may harden into tartar, which makes brushing and flossing less effective and can lead to periodontal (gum) disease.

While some foods invite tooth decay, others help combat plaque buildup. Here are some foods to seek out—and some to avoid.



These foods and drinks promote good oral health:

Sugarless chewing gum. Gum is a great saliva generator that helps remove food particles from your mouth. Just be sure to choose a sugar-free variety. Research has shown that chewing gum for about 20 minutes after you eat helps your saliva neutralize the acids that attack your teeth. And because saliva contains traces of calcium and phosphate, it also helps strengthen tooth enamel.



Cheese, milk, plain yogurt, and other dairy products. Cheese is another saliva generator that may protect your teeth from decay. The calcium in cheese, as well as the calcium and phosphates in milk and other dairy products, help put back minerals your teeth might have lost due to other foods.

Green and black teas. Tea contains polyphenols that interact with plaque bacteria. These substances either kill or suppress bacteria, preventing them from growing or producing tooth-attacking acid. And depending on the type of water you use to brew your tea, a cup of tea can also be a source of fluoride.

Water with fluoride. Fluoridated drinking water, or any product you make with fluoridated water, helps your teeth. This includes powdered juices (as long as they don't contain a lot of sugar) and dehydrated soups. But watch out for bottled drinking water, which may not contain as much fluoride as water from the tap.

Limit your intake of these foods and drinks:

Sugary candies and sweets that stick in your mouth. If you eat sweets, go for those that clear out of your mouth quickly. So thumbs down for sticky lollipops, caramels, and cough drops that contain refined sugar.

Starchy foods that can get stuck in your mouth. Starches made from white flour, are simple carbohydrates and can linger in your mouth. For example, bread or potato chip bits may get trapped between your teeth. When you get these stuck in your mouth or at the back of your teeth, bacteria love to feed on the carbs.

Carbonated soft drinks, fruit juices, and more. Besides being laden with sugar, most colas and other soft drinks contain phosphoric and citric acids that erode tooth enamel. Fruit juices, energy drinks, and iced teas and lemonades may also contain high amounts of sugar.

Items that dry out your mouth. These include many medications, including some painkillers, antihistamines, and oral asthma inhalers. Try stimulating saliva flow with sugar-free gum or candies. If medications may be the cause, talk with your doctor.

Lemons and other citrus fruits. It's OK to eat them, but don't suck on them. The very acidic juice can erode the enamel of your teeth.

You don't have to avoid healthy foods that may contribute to tooth decay. Just remember to gently brush at least twice a day using a fluoride toothpaste, paying special attention to your gum line, and floss between your teeth at least once every day. And note this rule of thumb: The longer food that promotes plaque bacteria stays in your mouth, the worse it is. So to protect your teeth, eating fewer sweets is not as important as limiting how often you eat them.



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Need an Alternative to the Emergency Department? Visit Millennium Physician Group's Walk-in Medical Center

By Kara Sabatino

Feeling sick during the week and can't get in to see your primary care doctor? There's a new alternative to the busy Emergency Department!

Millennium Physician Group's Venice Walk-in Medical Center is a wonderful alternative to a busy Emergency Department for life's minor health problems.

The Venice Walk-in recently opened in February 2016 and is open weekdays, 7 a.m. – 5 p.m., with plans to extend hours into the evenings and weekends. The Venice Walk-in Center, near the corner of Center Road and the U.S. 41 Bypass, will be available for your minor health emergencies all week long.

There are no appointments necessary and wait times are much shorter than a typical Emergency Department. The Walk-in is now accepting new patients, and you don't have to be an established Millennium Physician Group patient to utilize the convenient services. Most insurance plans are accepted and self-pay patients are always welcome.

Millennium's family-friendly Walk-in Medical Center provides treatment for all of your urgent care needs, such as colds, sore throats, flu, rashes and earaches. Our physicians also treat non-life threatening emergencies like sprains, abrasions, and burns.

Drs. Constantine Georgiadis, D.O. and Manoj Dhariwal, M.D., will be on staff to care for residents of Sarasota County. Our Walk-in Medical Center team knows that when you visit our Center, you want to feel better quickly and without a lot of hassle.

No need to wait in an emergency room or wait to schedule an appointment with your physician, the Walk-in Medical Center can see you today.

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What Every Woman Should Know About Breast MRI

By Ryan Polselli, M.D., Breast Imaging Radiologist

Breast MRI is a specialized form of MRI specifically designed to detect breast cancer. Although there is no radiation and it does not require the firm type of compression as with mammography, it does require intravenous contrast and you must lie on your stomach in an MRI scanner for approximately 20 minutes.

Breast MRI can detect cancer that may not necessarily be seen with mammography, particularly if you have dense breast tissue. In general, the denser the breast tissue, the more difficult it is to detect cancer with mammography. Studies have repeatedly proven that women with dense breast tissue may benefit from adding breast MRI into their breast cancer screening routine, a fact of which many patients are unaware.

As a result, approximately half of all states have enacted legislation (Florida has introduced a bill) requiring notification of this fact to patients with dense breast tissue. Some states now require insurance companies to mandatorily cover the cost of breast cancer screening with breast MRI. All mammograms currently classify the density of breast tissue and if your report uses the words "heterogeneously dense" or "extremely dense" you may want to discuss the value of breast MRI with your doctor.

Studies have also proven that annual screening with breast MRI can aid in the early detection of breast cancer in patients that have a high lifetime risk for developing breast cancer. The American Cancer Society now recommends yearly breast MRI, in addition to annual screening mammography, for anyone that is considered to have greater than 20% lifetime risk for developing breast cancer.



While there are many factors that may put you at high risk of developing breast cancer, some of the most important factors to consider are whether there is a history of any first degree relatives in your family that have had breast cancer, a personal history of breast cancer or abnormal cells from biopsies, if you are a carrier of certain genes linked to breast cancer, if you have never had children or if your first child was after the age of 30, radiation therapy to the chest, estrogen exposure and hormone replacement therapy, and your ethnic background (caucasian women are at slightly higher risk than other ethnicities).

If you think you may have a high risk, one of the most useful tools available to accurately quantify your risk is the Tyrer-Cuzick risk assessment tool which is available online at <http://www.ems-trials.org/riskevaluator/>. If after completing the survey you have greater than a 20% lifetime risk, you should consider adding annual breast MRI to

your breast cancer screening routine. Most of the time, this is done by alternating annual breast MRI with annual mammogram at 6 month intervals.

Although breast MRI is extremely sensitive and useful in detecting breast cancer, it can often be more difficult to interpret than mammogram or ultrasound and sometimes differentiating cancer from benign tissue can pose diagnostic challenges that may require biopsy or additional follow-up studies. This can be minimized by ensuring your study is read by either a fellowship trained breast imaging radiologist or a radiologist with special training and expertise in breast MRI.

For more information about breast MRI, call Advanced Imaging at 941-235-4646 today.





Hearing vs. Vision

There is a common misconception that if you can buy a pair of readers from the drugstore for your vision, why can't it be that simple for your hearing?

By Dr. Noël Crosby, Au.D.

Hearing and vision are both very important senses; however, losing your hearing is very different from losing your vision. The main difference between these two types of sensory loss is that vision can often be repaired or completely restored; sensorineural hearing loss can't be repaired or restored.

Vision loss can often be corrected to a normal level with eyeglasses while hearing devices cannot restore hearing to normal. You can't expect to have "20/20" hearing from wearing hearing aids like you can with your vision from wearing eyeglasses.

According to the CDC, nearsightedness, farsightedness and astigmatism are the most frequent eye problems in the United States, affecting as many as 11 million Americans aged 12 years and older. The good news in these cases is that eyesight can be corrected back to normal vision with the correct prescription eyeglasses, contact lenses or corrective eye surgery. There are two types of hearing loss sensory-neural and conductive. In some cases, a conductive hearing loss can be restored. Conductive hearing loss is a condition that is typically associated with an obstruction in the ear — such as excess earwax, an ear infection or damage to the bones of the middle ear. Restoring hearing is not the same for those with sensorineural hearing loss, which accounts for as much as 90 percent of all hearing loss. Those who experience this type of hearing loss have damage to the inner ear or the nerve that runs from the ear to the brain, or even the brain itself.

Hearing device technology has improved substantially in the last 10 years; however, hearing aids can't repair the damage to the hair cells of the inner ear. These hair cells do not regenerate and can't be repaired, so when they die or are damaged, the brain has a more difficult time interpreting the signals they send. Hearing devices are great at amplifying the sound coming into your auditory system; however, it is much more difficult for hearing aids to pick out the signal of interest than it is for your brain. Digital hearing aids have made



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great improvements in this area. Today's hearing aids are very good at processing complex sounds to pick out the most useful; however, it is unfortunate that on average, most people will wait much too long to get their first hearing aids; thereby, reducing the stimulation of the auditory portion of the brain during this time. First time hearing aid users need to literally retrain their brain to become accustomed to the wide range of sound stimulation they are experiencing once again.

Both your vision and your hearing are important senses which should be evaluated on a regular basis. Eye care professionals recommend that adults have their vision tested every two years, Hearing healthcare professionals recommend having a baseline hearing test at age 50, with follow up exams every two years after the age of 55. If you are experiencing any difficulty with either your hearing or your vision, you should seek medical treatment immediately.

PROFESSIONAL BIO

Dr. Noël Crosby, Au.D., owner and audiologist at Advanced Hearing Solutions in Englewood, FL is a licensed professional whose 26 year career has been devoted to helping people of all ages hear and understand more clearly. Dr. Crosby received her BS and MS degrees from FSU and her Doctorate in Audiology from UF. Her credibility as an authority grew during her tenure as the Director of Audiology at the Silverstein Institute in Sarasota, FL from 1991-1998. Today, in addition to managing a successful audiology practice, Dr. Crosby is involved in creating hearing loss awareness through her jewelry and accessory company AuDBling.com. She has served and is serving on various professional boards and committees and was president of the Florida Academy of Audiology in 2000 and 2010. She has been married to Michael for 23 years and has one daughter.

Advanced Hearing Solutions
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Benefits of Aquatic Therapy

Aquatic therapy offers various benefits for patients who can have trouble moving or exercising because of pain. One of the greatest benefits of aquatic therapy is buoyancy. When the body is submerged in water, buoyancy assists in supporting the weight of the patient, making movement possible.

Decreasing the amount of weight the joints bear reduces the force of stress the joints feel. This aspect of aquatic therapy is especially useful for patients with arthritis, healing fractured bones, or who are overweight. It is much easier and less painful to perform exercises when you decrease the amount of stress put on the joints.

A second property of water that is beneficial for aquatic therapy patients is viscosity. The viscosity of water provides an excellent source of resistance that can be easily incorporated into an aquatic therapy exercise program. This resistance allows for muscle strengthening without the need of weights. Using resistance coupled with the water's buoyancy allows a person to strengthen muscle groups with decreased joint stress.

To decrease swelling and improve joint position awareness, aquatic therapy also utilizes hydrostatic pressure. This pressure produces forces perpendicular to the body's surface and allows that patient to become more aware of their joint positions.

Ultimately, as a result of aquatic therapy, patient proprioception is improved. This is important for patients who have experienced joint sprains, as when ligaments are torn, our proprioception becomes decreased. The hydrostatic pressure also assists in decreasing joint and soft tissue swelling that occur after injury or with arthritic disorders.

The warmth of the water experience during aquatic therapy assists in relaxing muscles and vasodilates vessels, increasing blood flow to injured areas. Patients find this aspect of aquatic therapy therapeutic, especially those with muscle spasms, back pain, and fibromyalgia.

Limitations of Aquatic Therapy

Although aquatic therapy offers various benefits, it may have some limitations. First, the gains that you make while exercising in the water may not equate



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to functional gains outside of the water. Walking in water may be easy due to the buoyancy created, but once you exit the pool, you still may have difficulty walking on dry land.

The overall effect of the aquatic therapy may not equal functional and strength gains that you hope for. For some patients, aquatic therapy simply feels good. You should understand the specific goals that you are looking to achieve when you participate in aquatic therapy.

Some Folks Should Not Perform Aquatic Therapy

It is important to know, however, that aquatic therapy is not for everyone.

Cardiovascular Stress: Exercise in water produces training effects with less cardiovascular stress than the identical exercise (or exercise intensity) performed on land. This reduction in stress creates a

training environment without compromising safety. Those who have fevers, infections, or bowel/bladder incontinence are also not candidates for aquatic therapy. Always discuss your health and concerns with your physician before beginning an aquatic therapy program, or any exercise program for that matter.

If you cannot swim, you should not participate in pool therapy unless your occupational therapist is aware of your lack of swimming knowledge and can provide you with full assistance 100% of the time.

Do you have an injury or illness that causes a limitation in functional mobility? If so, you may benefit from the skilled services of an occupational therapist to help you recover fully. You may also find that aquatic therapy to be beneficial to your full return to your baseline mobility and to get back to your normal activity level sooner than you thought possible.

Aphasia, There's Help for That!

June is National Aphasia Awareness Month, according to the National Aphasia Association, aphasia is a language disorder usually initiated by a stroke causing one to begin having difficulty remembering words, losing the ability to speak, read and write. Aphasia is most common among elderly individuals but can also affect people of all ages and gender. Aphasia is often mistaken as the inability to talk, this is a misconception. Aphasia can be as severe as to cause one to lose the ability to communicate, or as mild as the inability to remember or articulate certain words. Common causes of aphasia are stroke, brain injury or other neurological disorders such as dementia or Parkinson's. The National Aphasia Association claims that 25% to 40% of people who survive a stroke get aphasia. A full recovery from aphasia is possible in some cases, though if the symptoms last longer than 2 months after the initial stroke a complete recovery is unlikely.

Aphasia is usually diagnosed through an evaluation from a speech-language pathologist (SLP) with a variety of tools and screenings to determine the type and severity of aphasia. According to Nurse On Call Home Healthcare's regional rehab director, Megan Minor, some of the assessment used are:

- **Auditory Comprehension:** understanding words, questions, directions, and stories that are spoken
- **Verbal Expression:** producing automatic sequences, naming objects, describing pictures, responding to questions, and having conversations
- **Reading and Writing:** understanding or producing letters, words, sentences, and paragraphs
- **Functional Communication:** using gestures, drawing, pointing, for the purpose of communicating



a·pha·sia (uh-fay-zuh) n. An impairment of the ability to use or comprehend words, usually acquired as a result of a stroke or other brain injury.



"Aphasia is affecting more and more Americans and is devastating to their family and friends. We need to continue to educate others about its effects and how to communicate with those that live with it," said Megan Minor. Due to the fact that aphasia affects mostly the senior population they have many options in the setting in which they can be treated. One setting that is growing in need is the home health setting. The home health setting provides many benefits to an SLP and to the clients receiving services.

According to the National Association for Home Care and Hospice, approximately 7.6 million individuals currently receive care in their homes from 17,000 providers, (National Association of Home Care and Hospice, 2012; U.S. Census, 2012). According to ASHA (2012), the top areas of intervention for adult clients seen by home care SLPs include swallowing disorders (35%), aphasia (26%), cognitive-communication disorders (16%), and motor speech difficulties (9%). Strokes are overwhelmingly at the top medical diagnosis (63%) seen by SLPs in this setting.

Speech therapy is intended to help an aphasic patient utilize their remaining skills and learn complementary means of communication. The silver lining in all of this is, with appropriate treatment, a skilled speech therapist and a great deal of support and constant hard work, an aphasic patient can indeed live a normal life, and Nurse On Call Home Healthcare has a speech therapist for that.



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The Air in Florida: Good for Those with COPD?

By David Ebner - Staff Writer

Each year, the American Lung Association releases the State of the Air Report, accounting for the air quality of major counties in the United States. It's probably not news that metropolitan areas throughout the state received varying results in air quality. It may be surprising that not a single Florida city made the top 25 list for most polluted in the country. Ocala, Sebring and the Fort Myers-Cape Coral metropolitan area ranked among the cleanest cities for ozone pollution, a comforting statistic for the 1 million permanent Florida residents who have COPD.

People with COPD suffer from symptom flare-ups often brought on by anxiety, dust, mildew, chemical fumes, excessively warm or cold air, smoke or other types of airborne pollution. Symptom flare-ups include coughing, wheezing, sputum, shortness of breath and fatigue. These facts raise the question of whether Florida air quality helps its 1 million residents fare better against progressive lung disease than residents of other states.

Sweeping changes to further improve Florida air quality may be years ahead, but progressive, more immediate help for those with COPD in Florida is available now. A specialty clinic in Tampa, the Lung Institute (lunginstitute.com), treats patients with lung diseases such as COPD, emphysema, chronic bronchitis and pulmonary fibrosis. Rather than using supplemental oxygen or a variety of medications to treat symptoms, they treat lung disease directly using stem cells from the patient's body.

Stem cells act as the body's healing system. The body alerts these cells, and they flow to the area that needs repair. Under normal circumstances, this process takes time. Stem cells react slowly, even more slowly in the body of someone who is chronically ill. The physicians at the Lung Institute realized this and developed a process to help stem cells do what they naturally do, only more quickly.

The physicians extract a patient's own stem cells from blood or bone marrow tissue, separate the cells and return them intravenously to the patient. Stem cells



A recent air quality report has prompted questions concerning lung disease and air pollution.

then travel through the heart to the lungs, where they are trapped in what the Lung Institute calls the pulmonary trap, where stem cells congregate, and where they can help promote healing of the lungs, potentially improving lung function.

A recent Lung Institute research study indicates that 82 percent of patients report an increase in quality of life after treatment, and 60 percent of those who took a pulmonary function test saw an increase in lung function.

Since the Lung Institute was founded, the Tampa clinic has treated over 800 patients locally. Nationwide, the company operates 5 clinics in Tampa, FL; Nashville, TN; Pittsburgh, PA; Scottsdale, AZ and Dallas, TX, and has treated over 2000 patients.

In Florida, the air quality removes residents from the discussion the rest of the country is having about developing alternative solutions to air pollution problems. It's obvious that what the rest of the country is doing isn't working, which is how those suffering from COPD have felt for years. They've been told the same thing, given the same medications and little has been done to improve their care until now. An alternative treatment is now available for those with COPD in Florida through stem cell therapy. Maybe the rest of the country should take a page from Lung Institute's book and look at their air quality in the same way.

If you or a loved one suffer from a chronic lung disease, the specialists at the Lung Institute may be able to help. You can contact the Lung Institute at 800-921-4631 or visit lunginstitute.com/health to find out if you qualify for these new treatments.



Being an Effective Bystander

By Jana K. Sabo
Coordinator/Equity Officer - Florida SouthWestern State College

One of the most effective ways to prevent a sexual assault from occurring is to be an effective bystander. Most people have heard of the Bystander Effect (or Bystander Apathy) which is the theory that the likelihood of someone intervening to offer assistance to a victim greatly decreases when others are present. Typically, the more people present, the less likely it is that someone will intervene to help. To teach someone to be an effective bystander takes time and effort. A skillset must be built for effective bystanders so they are able to be effective at diffusing situations while keeping themselves safe. Notalone.gov states the basic keys of being an effective bystander as being:

- **Awareness** - A key first step is to strengthen awareness so individuals and groups are better able to identify instances of sexual violence.
- **Sense of responsibility** - A sense of responsibility gives the bystander motivation to step in and take action. Bystanders are much more likely to help friends than strangers and are more likely to help strangers if they see them as part of a group they identify with (like supporting the same sports team).
- **Perceptions of norms** - Perceptions of peer norms about helping (whether you think your friends are likely to help) and perceptions of authorities' (like teachers') attitudes are related to bystander attitudes. People often mistakenly think others are less supportive of doing something to address sexual violence than they actually are. Studies show links between willingness to take action as a bystander and perceptions of helping, trust, and commitment among community members and trust in campus authorities. Weighing the pros and cons - People weigh the costs and benefits of getting involved in a risky situation. These include threats to their own safety, negative consequences for their relationships with others, and the potential to change the outcome of a risky situation or to help a victim.
- **Confidence** - People who feel more confident in their ability to help are more likely to take action. Research consistently finds that prevention programs, particularly in-person educational and skill workshops, increase an individual's confidence in his/her ability to take effective action.



- **Building skills** - Population survey data shows that many people are at a loss for specific ways to help. Survivors tell us that friends and family do not always do things that are useful or supportive, and these negative or unhelpful responses make coping with, and recovering from, abuse much harder. Bystander intervention training can give motivated community members skills to intervene in ways that protect their own safety and be truly supportive to victims.

- **Context** - Bystanders also need safety nets for themselves – resources they can call upon and community policies that support intervention (www.notalone.gov/assets/bystander-summary.pdf).

It can be difficult to think of how to intervene in a safe way that is not obvious. Some ways to effectively intervene in a potential situation are:

- Ask the potential victim where the bathroom is.
- Constantly call or text the potential victim.
- Ask the potential victim if they are ok.
- Cause a distraction, drop something, or spill a drink.
- Tell a funny joke or do a silly dance.
- Tell the potential victim their friend needs to talk to them right away.

- Tell them you think you hear their car alarm.
- Tell the potential victim you feel sick and need them to take you home.

Effective bystanders are not only instrumental in preventing sexual assaults. The same principles can be applied to preventing bullying, harassment, and discrimination. Teaching bystanders to effectively intervene in situations can start as young as elementary school and reinforce efforts already in place to prevent bullying. These can be lifelong skills that the effective bystander can use to help many potential victims throughout their lifetime.



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Smoking Damages More Than Your Lungs

You probably know about the relationship between smoking and lung cancer, but did you know smoking is also linked to heart disease, stroke and other chronic lung diseases? Smoking can also increase your risk for cancer of the bladder, throat and mouth, kidneys, cervix and pancreas. Thinking about quitting? Look at the facts!

Why should you quit?

- Smoking is the most preventable cause of death in the United States.
- Almost one third of deaths from coronary heart disease are attributable to smoking and secondhand smoke.
- Smoking is linked to about 90% of lung cancer cases in the United States.
- About 20 percent of adult men and about 16 percent of adult women smoke.
- The highest percentage of people who smoke are between the ages of 21 and 34.
- About 54 percent of American children ages 3-11 are exposed to secondhand smoke.
- On average, smokers die more than 10 years earlier than nonsmokers.
- You can be one of the millions of people who successfully quit every year.

What makes cigarettes so toxic and dangerous?

There are more than 5,000 chemical components found in cigarette smoke and hundreds of them are harmful to human health, according to the Centers for Disease Control and Prevention.

Here are a few examples:

- 1,3-Butadiene is a chemical used to manufacture rubber. It is considered to be a carcinogenic chemical that can cause certain blood cancers.
- Arsenic is used to preserve wood. Some arsenic compounds have been linked to cancer of the lung, skin, liver, and bladder.
- Benzene is used to manufacture other chemicals. It can cause cancer, particularly leukemia, in humans.
- Cadmium is a metal used to make batteries. Cadmium and cadmium compounds can cause lung cancer and have been associated with kidney and prostate cancer.
- Chromium VI is used to make alloy metals, paint and dyes. Chromium VI compounds cause lung cancer and have been associated with cancer of the nose and nasal sinuses.
- Formaldehyde is used to make other chemicals and resins. It is also used as a preservative. Formaldehyde causes leukemia and cancer in respiratory tissues.
- Polonium-210 is a radioactive element that has been shown to cause cancer in animals.
- Tar is not one single chemical, instead it describes several chemicals that are in tobacco smoke. It leaves a sticky, brown residue on your lungs, teeth and fingernails.



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Carbon monoxide & nicotine: A dangerous duo

Carbon monoxide is a harmful gas you inhale when you smoke. Once in your lungs, it's transferred to your bloodstream. Carbon monoxide decreases the amount of oxygen that is carried in the red blood cells. It also increases the amount of cholesterol that is deposited into the inner lining of the arteries which, over time, can cause the arteries to harden. This leads to heart disease, artery disease and possibly heart attack.

Nicotine is a dangerous and highly addictive chemical. It can cause an increase in blood pressure, heart rate, flow of blood to the heart and a narrowing of the arteries (vessels that carry blood). Nicotine may also contribute to the hardening of the arterial walls, which in turn, may lead to a heart attack. This chemical can stay in your body for six to eight hours depending on how often you smoke. Also, as with most addictive substances, there are some side effects of withdrawal.

Second-Hand Smoke

Smokers aren't the only ones affected by tobacco smoke. Secondhand smoke is a serious health hazard for nonsmokers, especially children. Nonsmokers who have high blood pressure or high blood cholesterol have an even greater risk of developing heart diseases when they're exposed to secondhand smoke.

Secondhand tobacco smoke contributes to about 34,000 premature heart disease deaths and 7,300 lung cancer deaths. Studies show that the risk of developing heart disease is about 25-30 percent higher among people exposed to environmental tobacco smoke at home or work. Secondhand smoke promotes illness, too. Children of smokers have many more respiratory infections than do children of nonsmokers. Excerpted and adapted from "When Risk Factors Unite," appearing in the Stroke Connection Magazine January/February 2005 (Science update May 2008)

These are just a few of the dangerous chemicals found in cigarettes; there are many more. But you do not have to spend the rest of your life giving in to your addiction! Thousands of people kick the habit every year, and you can be one of them. It may not be easy, but you can do it!

*Courtesy American Heart Association



Compression Devices: Effective Treatment for Limb Swelling

By Alyssa Parker

Many individuals attempt to manage their limb swelling through various treatments such as compression stockings, exercise, diuretics, and elevation with little or no results. Limb swelling, also known as edema, may be a symptom of an underlying medical condition. Some of the most common conditions where limb swelling is the first symptom include venous insufficiency, post operative trauma, infection, and lymphedema. Clinicians may overlook the cause of your swelling; Lymphedema or venous insufficiency is not always evident in their earliest stages. It's important to seek treatment early on to prevent further complications. These conditions can be easily misdiagnosed as acute and minor swelling followed with minimal treatment. Pneumatic compression devices are one of the most highly recommended treatments for these conditions and are recognized by Medicare.



Lymphedema and Chronic Venous Insufficiency

After having a surgical procedure cancer or non-cancer related (example hysterectomy or gallbladder removal) it may take months or years for Lymphedema to manifest because of its slow progression. It is imperative that Lymphedema is treated quick and effectively, regardless of the severity. Complications dramatically decrease when treatment is started in the earliest stage of Lymphedema. When left untreated common complications include cellulitis or lymphangitis, skin changes such as skin thickening, restricted movement of a limb, or chronic wounds. Aside from surgical procedures and radiotherapy for cancer other known triggers include vein stripping, peripheral vascular surgery, trauma, inflammation, infection, and insect bites.

Chronic venous insufficiency is another condition that causes swelling in the legs along with open wounds. CVI occurs when the valves in the veins that normally channel the blood



to the heart become damaged which then leads to pooling of the blood in the lower extremities. Discoloration of the skin, referred to as hemosiderin staining, is identified by a reddish staining of the lower limb. From poor circulation shallow wounds may develop due to the stagnant blood that would normally return to the heart. Symptoms vary but may include swelling, aching, itching or burning, varicose veins, infection, chronic venous ulcer, and decreased mobility.

Treatment

A widely recognized and highly effective treatment is using a compression pump. This is a safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility. The compression pump is a gentle massaging technique that compresses in a rhythmic cycle, similar to that of a normally functioning lymphatic system that has



not been damaged. This is a great treatment option for patients who have tried compression stocking, elevation, diuretics, or massage with little or no relief. This is a safe and effective way to assist your body's circulatory system in moving the excess fluid which has accumulated in the limb and can cause painful swelling, non-healing wounds, heaviness, and discomfort decreasing your mobility.

This is where choosing a physician experienced in recognizing and treating Lymphedema or CVI is critical. Some good questions to ask your physician include:

- Does my family have a history of swelling (Hereditary Lymphedema)?
- Stemmer's sign present?
- Pitting (push your finger into your skin and count how long it takes to return) or skin hardening?
- Hemosiderin staining (port wine skin stains or "red socks") appear from the ankles down
- Traumatic injury or surgery potentially damaging Lymph nodes (Hip replacements, etc)?
- Radiation to Lymph areas?

Remember ANY swelling is an indication of an overloaded Lymphatic system.

The compression pump is recognized by Medicare and covered by many commercial insurers; Actual coverage varies with individual plans. Acute Wound Care, LLC is a highly focused local provider of wound products and compression pumps working with select area physicians highly versed in this condition.

ACUTE WOUND CARE

For more information and articles on this topic, Google "Acute Wound Care" or visit www.AcuteWoundCare.com or call

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and speak with a specialist.

Are All Acupuncture Providers Created Equal?

Many of you have been thinking about trying acupuncture for that nagging back or neck pain. You have done the research, and now you are ready to schedule an appointment. You google acupuncture and a variety of different type of providers come up in the search results. Acupuncture, in Florida, is currently being provided by a variety of different health care practitioners, including Acupuncture Physicians, Chiropractors, Medical Doctors, and Doctor's of Osteopathy. Physical therapists are currently pushing hard to incorporate "dry needling" into their scope of practice as well. So who do you choose? This article will assist you in sorting out the different acupuncture credentials so you can make the most informed health care decision.

Most states in the US require the National Certification Commission for Acupuncture and Oriental Medicine (NCCAOM) exam or NCCAOM certification as a prerequisite for a license to practice acupuncture. The Florida Board of Acupuncture (<http://www.doh.state.fl.us/mqa/acupunct/>) also requires this, but only for Acupuncture Physician's (AP), not providers with certificates to practice acupuncture. So, although Florida has stringent standards for licensure, it also has enormous discrepancy in the training required among the different providers.

In Florida, licensed acupuncturists are given the title Acupuncture Physician, or AP. An Acupuncture Physician has met the following requirements to be able to practice in Florida:

- 60 undergraduate college credits from an accredited postsecondary school prior to enrolling in an approved course of study in acupuncture and oriental medicine
- Successful completion of an Accreditation Commission for Acupuncture and Oriental Medicine candidate or accredited four-year master's level program
- Completion of an approved training program that includes supervised clinical experience
- The successful passage of the NCCAOM exam
- Completion of a National Certification Process
- Two hours of prevention of medical errors continuing education and before the first license renewal, three hours of HIV/AIDS continuing education.



An Acupuncture Physician is also required to take 30 credit hours of continuing education every two years to maintain an active license to practice. The requirements for continuing education are a two credit course in the prevention of medical errors, two credits of Florida laws and rules, five credits of biomedical sciences, and 21 credits of general continuing education every two years.

Now, let's compare the above requirements to some of the other health care providers that now offer acupuncture services. Chiropractors can receive acupuncture certification after completing a mere 100 hour course in acupuncture and successfully passing the National Board of Chiropractic Examiners (NBCE) Acupuncture Examination. The American Board of Medical Acupuncture requires medical doctors to complete 300 hours of acupuncture course work, but the state of Florida has no clear cut requirements. This means that in the state of Florida, medical doctors and osteopaths can offer acupuncture services without any specific additional acupuncture training.

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Why does this matter? The differences in acupuncture training is vital to the results that patients receive from treatment. Without a fundamental understanding of the traditional Chinese medicine diagnostic criteria, pulse and tongue diagnostic skills, oriental medicine philosophy, needle placement, safety, and other related knowledge, a medical doctor cannot offer the same benefits and successful outcomes as a Florida Acupuncture Physician that has almost 3,000 hours of education.

Many insurance companies are starting to offer benefits for acupuncture treatment with the stipulation that a medical doctor or osteopathic physician provides the service. This is unfortunate, as the "cook book" style acupuncture offered by these other providers often have hit or miss results. When a patient receives subpar treatment it reduces the likelihood that they will continue to seek out acupuncture treatment and take advantage of its proven benefits. Soon, the insurance companies will deem that acupuncture is not a viable treatment option due to poor treatment outcomes and will stop providing coverage.

You wouldn't go to a podiatrist for gall bladder surgery, nor should you go to an undertrained practitioner for acupuncture treatment. Going to an undertrained acupuncture provider benefits no one and undermines the value of an acupuncture license. Florida continues to increase acupuncture licensure requirements, so why doesn't this hold true for those providers with only a certification? Acupuncture is acupuncture and the requirements for anyone providing it should be equal.

If you are thinking about giving acupuncture a try, seek out the best acupuncture treatment available performed by a rigorously trained Acupuncture Physician. Go to the acupuncture national association website, <http://www.nccaom.org/fap>, to search for highly trained Acupuncture Physicians in your area.



Frantz Cosmetic Center Offers New Laser Treatment for **SKIN REJUVENATION**

By William Ehrlich, MD, FAACS *Oculofacial & Cosmetic Surgeon*

The Frantz Cosmetic Center at Frantz EyeCare now offers the MiXto SX Micro-Fractional CO2 Laser, the most advanced laser used for skin rejuvenation. This new laser makes it possible for patients to have healthy, younger looking skin with minimal post-treatment down time. The laser delivers a therapeutic matrix of tiny beams of light energy to the top and mid layers of the skin with minimal discomfort resulting in:

- immediate shrinkage of damaged skin,
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- removal of age and sun spots, and
- amazing results on acne scars.

Fractional means that only a fraction of the skin surface is exposed to the laser beam, leaving untreated skin around each treated micro spot. The beneficial effects of the laser beam expands under the skin surface to stimulate new collagen production across the entire area. Patients will see continued reduction of fine lines and wrinkles over the next six months as new collagen is formed.

In most cases, the micro-fractional laser treatment can be safely performed on the face, neck, chest, arms and hands. A topical anesthetic is applied to



the treatment area prior to the procedure and treatment time for a full face is approximately 45 minutes. Although you will start seeing improvement within a matter of days, you will see continued reduction of fine lines and wrinkles over the next six months as new collagen is formed.

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Dr. Ehrlich will discuss the new laser and several other procedures he offers at a free seminar in his Fort Myers office on Monday, June 6, and in his Naples office on Wednesday, June 15.

To schedule a complimentary consultation with Dr. Ehrlich or make a reservation for one of his seminars, contact Frantz EyeCare's Punta Gorda office at 941.505.2020 or visit the practice's cosmetic website at www.FrantzCosmeticCenter.com.



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WHAT YOUR ORTHOPEDIC SURGEON DOES NOT WANT YOU TO KNOW...

An FDA Approved Treatment For Osteoarthritis That May Eliminate The Need For Total Knee Replacement Surgery

By Physicians Rehabilitation

Osteoarthritis is one of the ten most disabling diseases in developed countries (WHO, 2012). Worldwide estimates are that 10% of men and 18% of women aged over 60 years have symptomatic osteoarthritis, including moderate and severe forms. It is estimated by the year 2030, 72 million Americans will be at high risk for osteoarthritis.

As the general population ages, more and more baby boomers are opting for knee replacement surgery earlier in life. The reason being that boomers are more active than any previous generation. They want to continue playing their favorite sports, run and dance with the same level of intensity as they are used to.

Previously, knee replacement surgeries were only performed on very old patients who were crippled with osteoarthritis and severely hindering their daily activities. "Now patients in their 40s and 50s are experiencing an earlier onset of osteoarthritis that affects their daily lives," says J. David Blaha, M.D., an orthopedic surgeon at the University of Michigan Health System. In fact, the number of boomers opting to go under the knife for early knee replacement is growing at an alarming rate.

One major concern for orthopedic surgeons is the longevity of the knee implant. Due to the fact that most joint replacements have been performed primarily on older patients, there isn't a lot of data to show how these implants hold up in younger people, who will engage in more activities and have them over longer periods of time.

Even though orthopedic surgeons are using newer and better materials and techniques, they remain dubious about their improvement in durability. They are uncertain how the knee replacements will hold up over time, especially since some plastics used have only been out there for several years.

What Are The Long Term Effects, Years After Surgery?

The following are some facts that you should consider before undergoing knee replacement surgery:

- Kneeling may be problematic. It can hurt to put weight on metal knees, even on a cushion, making activities like gardening a challenge.
- Falling or banging an artificial knee can hurt a lot more and last far longer than you might expect.
- Going down steep steps can be difficult and may require using a sideways, one-foot approach. This is because a normal knee bends at an angle of 145 degrees, but replaced knees often achieve only 120 degrees, if that. Sitting on the floor cross-legged may be impossible.
- Despite months of physical therapy and the passage of time, residual discomfort may still be experienced.
- Since most artificial knees are metal, they may set off the security alarm at airports, requiring a personal scan with a wand.
- Some patients require a surgical revision within two years of a replacement because of technical problems like instability or poor alignment of the new joint.

What Are The Disadvantages Of Surgery?

- **Infection:** An infection can occur a few weeks after the surgery or even a few years later. Infections are serious complications that may require the implants to be removed followed by weeks of antibiotic treatment.
- **Stiffness:** After surgery, your body naturally produces a scar. When the ligaments around the knee contract, the tissues around the knee joint begin to tighten up. This makes it extremely difficult for you to do things that requires you to bend your knee, such as, sitting down and using stairs. If the stiffness continues for prolonged periods of time, your doctor may have to place you under anesthesia again to break up the scar tissue.
- **Blood Clots:** Blood clots are the most common complication of this type of surgery. The clots can form in the veins in your leg and pelvis after surgery. If they remain there, it is usually not much of a problem, but it is possible for them to travel through the heart and to the lungs. This leads to a condition known as pulmonary embolism, which is potentially fatal if not treated promptly.
- **Loosening:** Some implants last longer than others, but all of them eventually wear out and loosen. This is a common problem experienced by younger patients because they live longer and usually stress the implanted joints more. The follow-up surgery to repair the implant is more complicated and will further decrease the lifespan of the implant.

*"It appears that surgeons are more satisfied than patients after total knee replacements."
In a United States study, a third of patients were dissatisfied with their operation 6 to 12 months later.*

Younger knee replacement patients may need to get a new replacement in as little as 5 to 10 years, which is a concern. "It gets more complicated with each revision," says Michael R. Baumgaertner, M.D., professor of orthopedic surgery at Yale University School of Medicine. "Every time it has to be redone, there is more bone loss."



What Is Knee Replacement Surgery?

A total knee replacement surgery is a medical procedure designed to replace weight-bearing surfaces of a knee joint. The surgeon cuts away bone, cartilage and ligaments of a diseased knee-joint, and replaces them with an artificial joint made of an alloy of cobalt, chrome or titanium, and a plastic compound called polyethylene. The entire surgery typically takes 2 to 3 hours without any complications. However, recovery from total knee replacement surgery is bound to take much longer.

How Long Is Recovery From Surgery?

There are several factors that influence your recovery, such as, your age, medical history, level of fitness and the severity of the problem. Once the surgery is complete, your doctor will keep you under observation in the hospital for around 3 days.

Most patients experience severe pain after knee replacement surgery. In fact, for the next two weeks or so, you'll need to use a cane or a walker in order to move about. Your activities will be kept to a minimum during this time since you cannot exert too much force on your knee. Many still experience pain during this time, and must resort to using painkillers in order to find relief. The duration of pain differs for each person but doctors claim you will find natural relief within 3 months of surgery with ongoing physical therapy.

How Much Does Surgery Cost?

The United States has among the highest costs in the world for knee replacement surgery. An American with no health insurance can expect to pay \$45,000 - \$70,000 at a typical hospital. Even with insurance, there are still costly deductible and co-pays that must be paid.

It's about MORE than JUST Knee Pain.

"I have had two knee replacements with no results! I still have pain on the knee and it is always swollen. It is difficult to even go down a stair because I can't bend my knee properly. It's been almost 5 years since my last surgery, and I am still having problems with my knee to the point that I went back to my orthopedic surgeon and he said there was nothing he could do. I don't think any one should live with pain! I am 52 years old and am disabled due to the horrible knee pain." - Nora B.

Knee replacement surgery is not a quick fix, and it is not without risks. Serious complications such as blood clots and infections can occur. In addition, the road to recovery can be difficult and time consuming, particularly with joint replacement surgery.



If you or a loved one are considering or scheduled for knee replacement surgery, all you have to do is call (941) 467-1666 right now and ask for your "NO-COST, NO-OBLIGATION Knee Pain Screening." During this consultation you can get all of your questions answered in a warm and friendly environment. Once complete, you will know exactly what your treatment options are and if Visco-supplementation, pain treatment, and our specialized physical therapy program is right for you.



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MEN... GET IT CHECKED!

June is Men's Health Month! The purpose of Men's Health Month is to heighten the awareness of preventable health problems and encourage early detection and treatment of disease among men and boys. Follow this maintenance schedule as a reminder of your need to take responsibility for your health. Regular checkups and age-appropriate screenings CAN improve your health and reduce premature death and disability. You should consult your healthcare provider to discuss if this screening schedule is appropriate for you. Also ask about the benefits of earlier screenings, especially if you are a member of a high risk group or have a family history of disease.



MEN'S HEALTH CHECKLIST

CHECKUPS AND SCREENINGS	WHEN?	AGES		
		20-39	40-49	50+
PHYSICAL EXAM: Review overall health status, perform a thorough physical exam and discuss health related topics.	Every 3 years Every 2 years Every year	✓	✓	✓
BLOOD PRESSURE: High blood pressure (Hypertension) has no symptoms, but can cause permanent damage to body organs.	Every year	✓	✓	✓
TB SKIN TEST: Should be done on occasion of exposure or suggestive symptoms at direction of healthcare provider. Some occupations may require more frequent testing for public health indications.	Every 5 years	✓	✓	✓
BLOOD TESTS & URINALYSIS: Screens for various illnesses and diseases (such as cholesterol, diabetes, kidney or thyroid dysfunction) before symptoms occur.	Every 3 years Every 2 years Every year	✓	✓	✓
EKG: Electrocardiogram screens for heart abnormalities.	Baseline Every 2 years Every year	Age 30	✓	✓
TETANUS BOOSTER: Prevents lockjaw.	Every 10 years	✓	✓	✓
RECTAL EXAM: Screens for hemorrhoids, lower rectal problems, colon and prostate cancer.	Every year	✓	✓	✓
PSA BLOOD TEST: Prostate Specific Antigen is produced by the prostate. Levels rise when there is an abnormality such as an infection, enlargement or cancer. Testing should be done in collaboration with your healthcare provider.	Every year		*	✓

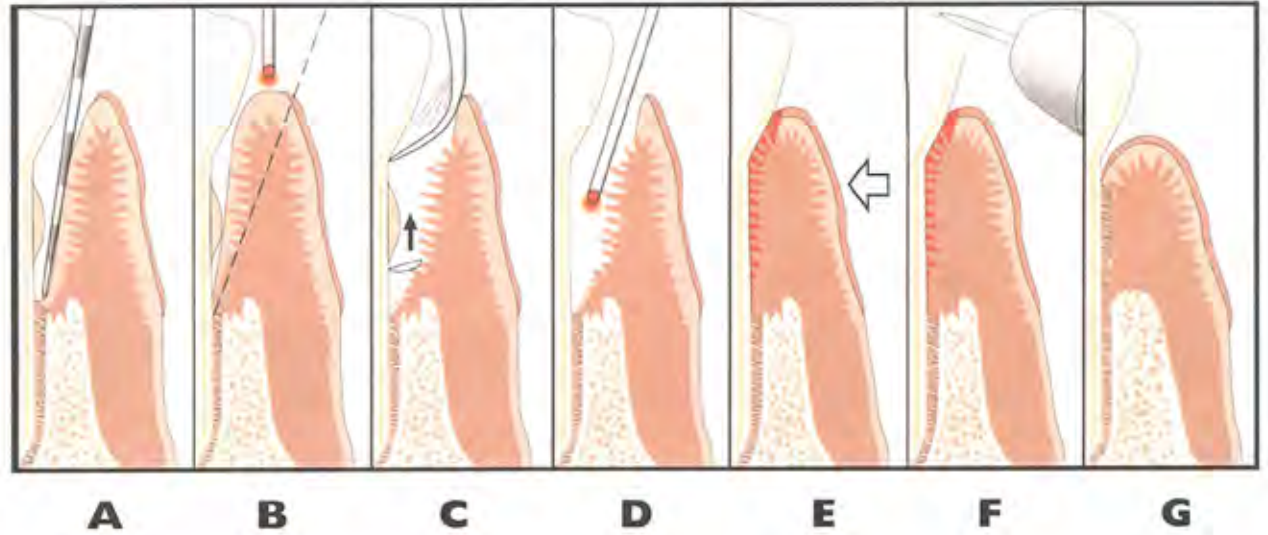
CHECKUPS AND SCREENINGS	WHEN?	AGES		
		20-39	40-49	50+
HEMOCCULT: Screens the stool for microscopic amounts of blood that can be the first indication of polyps or colon cancer.	Every year		✓	✓
COLORECTAL HEALTH: A flexible scope examines the rectum, sigmoid and descending colon for cancer at its earliest and treatable stages. It also detects polyps, which are benign growths that can progress to cancer if not found early.	Every 3-4 years			✓
CHEST X-RAY: Should be considered in smokers over the age of 45. The usefulness of this test on a yearly basis is debatable due to poor cure rates of lung cancer.	Discuss with a physician		✓	✓
SELF-EXAMS: Testicle: To find lumps in their earliest stages. Skin: To look for signs of changing moles, freckles, or early skin cancer. Oral: To look for signs of cancerous lesions in the mouth. Breast: To find abnormal lumps in their earliest stages.	Monthly by self	✓	✓	✓
BONE HEALTH: Bone mineral density test. Testing is best done under the supervision of your healthcare provider	Discuss with a physician			Age 60
TESTOSTERONE SCREENING: Low testosterone symptoms include low sex drive, erectile dysfunction, fatigue and depression. Initial screening for symptoms with a questionnaire followed by a simple blood test.	Discuss with a physician		✓	✓
SEXUALLY TRANSMITTED DISEASES (STDs): Sexually active adults who consider themselves at risk for STDs should be screened for syphilis, chlamydia, gonorrhea, herpes and other STDs.	Under physician supervision	✓	Discuss	

*African-American men and men with a family history of prostate cancer may wish to begin prostate screening at age 40, or earlier.

What is Laser Periodontal Therapy?

By Dr. Joseph Farag

Finally, there's good news for those of you who suffer from gum disease (gingivitis and periodontitis). We now offer an exciting laser based technique for treatment of periodontal disease called Laser Periodontal Therapy™. Through the use of Millenium Dental Technologies, Inc., PerioLase® Laser, designed especially for Laser Periodontal Therapy™, we can treat your moderate to severe gum disease and you can quickly return to your normal routine! There's no incision (scalpel) and no stitches (sutures). You heal naturally with full retention of your gums. If you suffer from tender, red, swollen, or bleeding gums, call us today for an appointment to evaluate your condition.



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- Ultrasonic instruments are used to "scrub" root surfaces below the gum line and remove tartar and plaque.
- Laser is reinserted into clean pocket and used to disinfect and sanitize the pocket, a fibrin "bandage" is formed in the pocket.
- Healthy connective tissue is readapted to the root and the healing process begins.
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- After teeth have been stabilized and approximately 3-4 months after treatment, new attachment of the gum tissue to the tooth and regeneration of the bone is evident.



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DON'T FORGET THE PRENEED GUARDIANSHIP DOCUMENT

By James W. Mallonee

If you are concerned about what might happen to you or your child in the event you are no longer able to care for yourself or your child, then you should consider having a Pre-need Guardianship document prepared in the event a catastrophic condition affects your person and property. Moreover, with the recent press concerning some of the abuses of the guardianship process, it only makes sense to include it in your estate planning repertoire.

A Pre-need Guardianship gives you the ability to name a third party to become the guardian over your affairs or that of your child in the event of your incapacity or death. It is important to remember that the individual you select is someone that is aware of your needs and willing to step into your shoes in the event you are no longer capable of managing your person or property. The selection of a competent guardian becomes even more important when a parent dies leaving minor children.

By naming a party as your guardian (in the event you need one) you essentially are removing the incentive of outsiders to impose a guardianship over you because they either don't like your behavior patterns or want to control your assets.

When preparing a Pre-need Guardianship for an adult, it must identify you and the guardian you desire to act in such role. The Pre-need Guardianship document must be signed by two witnesses at the time of your execution of the same document. The author strongly suggests that you include the addresses of both you and the named guardian along with a named successor in the event your initial guardian selection is unable, unqualified or unwilling to serve. Although not required, it is also suggested that you have your signature acknowledged by a notary public upon your execution of the Pre-need Guardianship document while in the presence of the two witnesses.



When preparing a Pre-need Guardianship for a minor, it must identify you as the parent (natural or adoptive) and the nominated guardian that you desire to take control of your children. The declaration must state the minor's full name as it is found on their birth certificate along with his or her date of birth and social security number. If there are multiple children, the same information must be supplied for each child named in the Pre-need Guardianship document. The procedure for signing is the same as that for a Pre-need Guardianship involving an adult. The declaration must be signed by two witnesses at the same time that you are signing. The author also suggests that you have your signature acknowledged by a notary public while executing in the presence of the two witnesses.

Although not required, once you have completed the Pre-need Guardianship declaration for an adult you can file it with the clerk of court. However, in the case of a Pre-need Guardianship for a minor, the declaration must be filed with the clerk of court. The clerk may or may not (depending on the clerk's policy) record the document as part of the public record.

Assuming that the Pre-need Guardianship is filed with the clerk of court, upon the filing of a petition for incapacity in a guardianship proceeding, the clerk of court must produce the declaration. Once the declaration is delivered to the Court, the named Pre-need Guardian will be entitled to serve as guardian; however, the Court is not bound to appoint the nominated individual but will likely do so unless the nominated person is unqualified to serve in such role.

To serve as a guardian, the following general qualifications must be met,

1. The nominee must be at least 18 years of age and a resident of the State of Florida;
2. No judge may serve unless related by blood or marriage or has a close relationship with the Ward or family and serves without compensation;
3. If a non-resident of Florida, the nominated person must be related by lineal consanguinity to the incapacitated person;
4. The nominee must not be a convicted felon or incapacitated individual;
5. The nominee must not have been judicially determined to have committed abuse, abandonment, or neglect against a child;
6. The nominee must not possess a professional or business conflict of interest with the incapacitated person; or,
7. Any health care provider may not serve as a guardian unless the Court specifically finds that there is no conflict of interest with the incapacitated person.

If the above qualifications are met, the Court will then take into consideration the following when appointing the guardian:

1. Is the nominee related by blood or marriage;
2. Does the nominee possess special education, professional or business experience relevant to the incapacitated person's needs;
3. Does the nominee have the capacity to manage financial resources;
4. Does the nominee have the capacity to meet the unique needs of the individual; and,
5. The Court will take into consideration the wishes expressed by the incapacitated person (e.g. Pre-need Guardian declaration).

An interesting side note is that once the Court rules that the person who executed the Pre-need Guardianship is incapacitated, the nominated Pre-need Guardian can assume his or her duties immediately. However, to execute on such duties, the Pre-Need Guardian will ordinarily need Letters of Guardianship. Letters of Guardianship can only be provided by the Court. Letters of Guardianship are usually signed following a hearing concerning a person's incapacity. In the event the Court does not immediately rule on the appointment of a Guardian following an incapacity hearing, the named Pre-need Guardian must petition the Court for confirmation of his or her appointment within 20 days after the adjudication of incapacitation. Assuming the named Pre-need Guardian is qualified to serve, the Court must confirm the appointment.

If you are a parent or an elderly person who is concerned about identifying a person to manage your affairs in the event you cannot, consider having a Pre-need Guardian document prepared along with a Durable Power of Attorney and Health Care Surrogate. The attorney of your choice can prepare such document and make certain that it is properly filed. By having a Pre-need Guardian declaration prepared you will ultimately save intra-family conflicts about who will act for you and remove incentives to seek a guardianship proceeding.

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This article is intended for informational use only and is not for purposes of providing legal advice or association of a lawyer-client relationship.

About the Author:

James W. Mallonee (Jim Mallonee) is a graduate with a B.A. degree from the University of South Florida and a Master of Science degree from Rollins College in Winter Park, Florida. He obtained his Juris Doctorate from the University of the Pacific, McGeorge School of Law in Sacramento, California. Prior to returning to Florida to practice law, Mr. Mallonee was employed by Intel Corporation for 22 years in such locations as New Jersey, Florida and California.

In addition to being a member of the Florida Bar since 2003, Mr. Mallonee serves on the Charlotte Community Foundation Committee for asset allocation and teaches Business Law at State College of Florida. Mr. Mallonee is also on the Board of Directors for the Military Heritage Museum located in Charlotte County, Florida.

His firm practices law in the following areas: Probate, Wills & Trusts, Guardianships, and Litigation in the areas of Real Estate, Guardianships and Estates. The firm has two locations in Venice and Port Charlotte, Florida.

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\$3,000 Per Hour

By Alex Anderson, Senior Associate Pastor at Bayside Community Church

Every so often I'll do a bit of executive coaching. I'll spend a day with a medical, business or non-profit executive. We will end the day with very clear "take-aways" (actionable steps for an area of their life—business, family, or personal). It's a lot of fun for me, but can be very uncomfortable for the client. They hate me in the short-term, but love me in the long run.

Most of the time they are just stuck and need an objective sounding board with over thirty years of wonderful, life-giving leadership questions to ask to get them unstuck; that's me. I know, I know...I'm beating my chest a little (sorry about that—couldn't help myself).

During a recent "One Day," my client had just finished what I call a *brain-dump* and we were sorting through it looking for clues as to why he was stuck, even though he was very successful financially.

One of the things I noticed was the amount of time he spent actually at his business compared to his income. With his help we did the math and he was averaging about \$3,000 per hour every month. Not too shabby.

So I asked him if he thought he deserved to make \$3,000 per hour. As he was thinking about it, I could tell he was having doubts, so I told him not to answer—we would get back to it.

Then I asked if he were to lose everything he had (financially), would he be able to get it back again. He thought for a moment and then said, "Yes, I believe so." I asked, "How long would it take?" He said, without any arrogance that I noticed, "It would take a couple of years, maybe three."

I believed him—not just because I know him to be honest or because of his skills and business acumen—but because of a powerful principle that is constantly working in his life and all our lives whether we are aware of it or not.



It's the same principle working in the lives of lottery winners who lose their winnings and find themselves more broke than before they won the lottery. I call it the *I am Principle*.

To dig into this, let's travel back a few thousand years to a guy named Abraham. Abraham and his wife Sarai had tried for many years to have children to no avail. But something amazing happened. God showed up and made Abraham a promise that he would have a child. And that he would become the father of many nations.

Ever had someone to make you a promise so wild that you struggled to believe it? I know I have. I had someone tell me once that they were going to buy a house and give it to my family free and clear. Still waiting. Not saying it won't happen, but still waiting.

Abraham thought this promise so ridiculous that he did the following,

"Abraham fell facedown; he laughed and said to himself, 'Will a son be born to a man a hundred years old? Will Sarah bear a child at the age of ninety?'" (Genesis 17:17)

Now before we give Abraham such a hard time for his unbelief...think about this.

Psychologist Dr. Robert B. Cialdini at Arizona State University, who studies what he calls "compliance psychology," says that the best way to change someone's behavior is to change their self-image. He goes on to say, "It appears that commitments are most effective in changing a person's self-image."

Abraham had not committed in his heart to agree with God's promise. I don't believe Abraham saw himself as "the father of many nations" which is why God changed his name to Abraham (father of a multitude) from Abram (father of height).

The reason this is important is that "Without faith it is impossible to please God." And apparently our faith can be affected by our self-image.

It's the *I am Principle* at work. Once Abraham's *I am* or self-image became that of "the father of many nations" he received the answer to God's promise.

Now back to my client. I told him that he truly deserved the \$3,000 per hour. His *I am* was that of someone who could manifest \$3,000 per hour and as long as his *I am* stayed at that level he would always be able to manifest that income.

It's very interesting to note that just some thirteen years before this, my client was a common laborer barely making minimum wage. He was broke—that was his *I am* then, now it is different.

How about you? What does your *I am* look like? If you are curious just take a look around your life. Your marriage reflects your *I am* about marriage. Your money reflects your *I am* about money. I believe to a certain degree your health will reflect your *I am* about your health. If you gained a million dollars could you keep it?

For me, the *I am Principle* was a hard pill to swallow. I wanted anything other than more responsibility to deal with in my life. But over the years my *I am* has, with effort, prayer, and a lot of meditation, changed for the better.

I hope yours will as well, if you think it needs it.

To your spiritual health,

Alex E. Anderson

Senior Associate Pastor at
Bayside Community Church

Author, *Dangerous Prayers*

alex.anderson@alexanderson.org

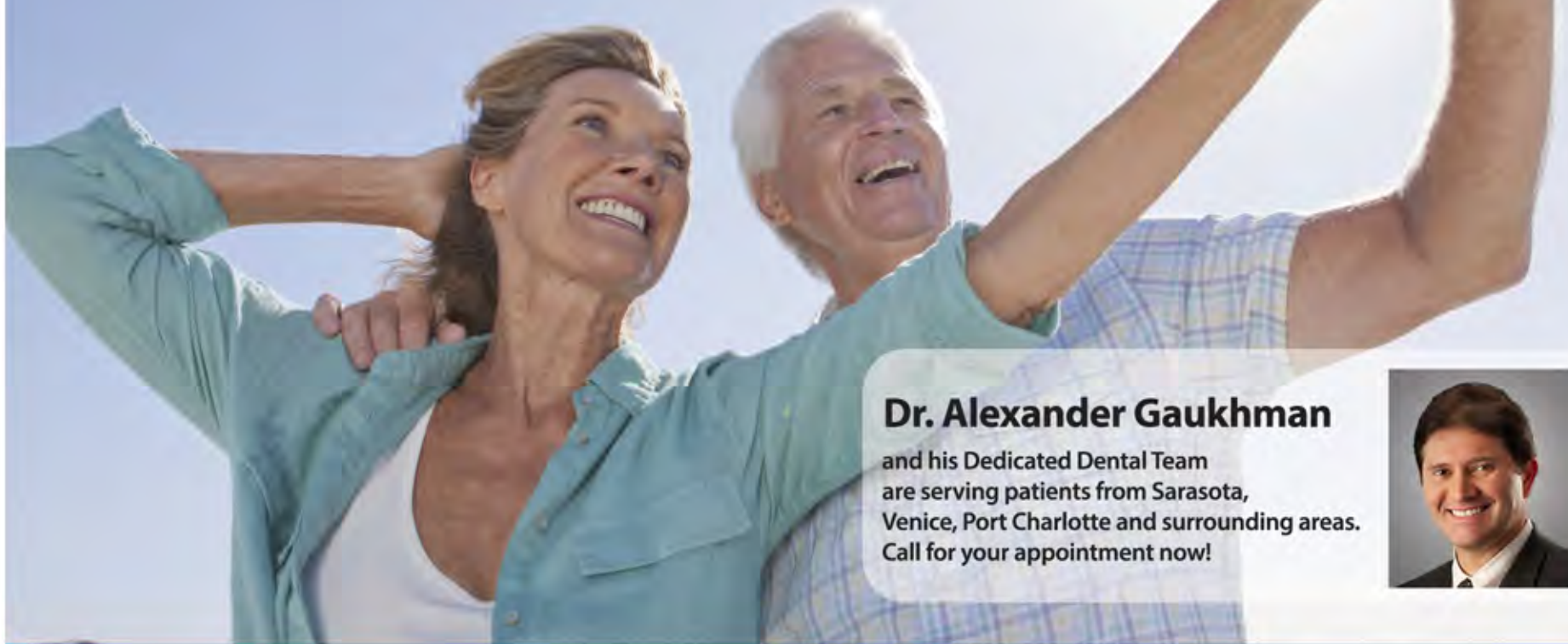
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