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Rehabilitation
Patient Education
Instant PT/ INR
Anodyne Therapy
Wound-Vac
Pain Management
Home Health Aides
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Speech Therapy
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24-Hour On-Call Service

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Newsletter

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Heat-related illness can be deadly: *It could happen to you*

Statistics for the 2000s aren't in yet, but in the previous decade, an average of 371 people per year died of heat-related illnesses.

People suffer heat exhaustion or heat stroke when their bodies can't cool themselves enough by sweating. Body temperatures can rise rapidly. A very high body temperature can cause brain damage, according to Centers for Disease Control and Prevention.

In addition to heat, humidity is a factor, because sweat won't evaporate fast enough to allow the body to cool.

At highest risk for heat-related illnesses are children up to age four and the elderly. Also at risk are the obese, people with a fever, and those who have dehydration, heart disease, sunburn, poor circulation, or drinking alcoholic beverages.

Heat exhaustion can lead to

heat stroke if not treated. It causes extreme fatigue, muscle aches, nausea and fever. There may be rapid pulse, clammy skin and vomiting. Those with symptoms should move to a cooler place and drink lots of liquids. If not recovered within 30 minutes, they should go to the emergency room.



Heat stroke can be fatal. If treatment is delayed, the death rate is up to 80 percent. With treatment, only 10 percent die. Symptoms include body temperature that can reach up to 110 degrees, confusion, racing pulse, convulsions and loss of consciousness.

Symptoms can develop over several days or strike during a single burst of strenuous activity.

Call an ambulance. While waiting for it, get the person out of the heat, cool him by fanning with a towel or newspaper, sprinkle him with water, and elevate the feet to direct blood back toward the head. If the person is conscious, offer fluids.

Prevention

If you will be working or exercising in a hot environment, the CDC says:

Pace yourself. Start slowly and pick up the pace gradually.

If your heart begins to pound and you are short of breath, stop all activity. Get into a cool area or at least into the shade. Rest, especially if you are light-headed or confused and feel faint. Drink liquids.

Staying hydrated

Even though, thirst is the body's way of indicating it needs more fluids, sometimes, you're not thirsty even as dehydration begins.

Even if you don't feel thirsty, these situations increase the need for fluids:

* During exercise. For an hour of light exercise, 2 to 3 cups of fluids are recommended.

* When it's hot. You naturally lose more fluid and require higher intake.

* If you are constipated. Fluid helps your body eliminate waste.

* If you are prone to urinary tract infections or kidney stones. Adding more fluids to your diet may prevent urinary tract infections and stone formation.

* When you are sick. Fever, vomiting, and diarrhea can cause rapid dehydration, a very serious condition.

If you don't often feel thirsty, check the color of your urine.

If it's darker than usual, you need more fluids.

Researchers at Tufts University say people over age 50 need eight 6 ounce servings of liquid per day rather than 8 ounce servings.





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“Doctors at the Snoring and Apnea Center of California, Los Angeles, say snorers should sleep on their sides, not on their backs. It helps to cut back on relaxants like alcohol and some medications before bed.”



Sunscreen or vitamin D sunshine: *It doesn't have to be a trade-off*

Accolades for vitamin D keep pouring in. Luckily, it's summer now, the perfect time to build up your D levels by getting out in the sunshine.

That doesn't mean ignoring advice about using sunscreen when you will be outside for longer than 15 or 20 minutes during the day.

If you are fair-skinned and wearing shorts or a tank top, getting 10 to 15 minutes of sun exposure is enough. If your skin is darker than fair, you can stay in the sun a little longer.

After that, slather on the sunscreen and put on your hat.

Get your sunshine at least twice a week. More often is better, say doctors at the Medical College of Wisconsin.

sin.

The important factor in sunshine is its ultraviolet B. When UV-B rays hit the skin, a reaction takes place that enables skin cells to make vitamin D.

Short exposure times will not increase your risk of getting skin cancer, but they will help to prevent many other diseases. Large studies at Harvard School of Public Health and elsewhere show that death from all causes is higher in people who have low levels of vitamin D. Deaths from heart disease lead the list, but low vitamin D levels are also associated with an increased risk for cancers of the breast, prostate, colon, kidney and ovaries, according to the National

Academy of Sciences.

The role of vitamin D in bone health has been proven for some time, making the vitamin an important factor in preventing osteoporosis.

In summer, get your D from the sun. During winter, the best source is a supplement. The government set minimums are 200 IU for people to age 50, 400 IU per day for those age 51 to 70 and 600 IU for those over 70.

Avoid medicine mistakes

* Sort medicines into a weekly container. If you are taking your night pill and your morning pill is still there, you'll know you forgot to take it. In some cases, you can take them both at the same time. Ask your doctor if it's OK.

* Know what each prescription medication is and what it should do. Be able to identify it by its size, shape and color.

* Store medicines in a place that is not hot (like on a shelf over the stove), not too cold, or not too moist, as in the bathroom medicine cabinet. Store them out of the reach of children, of course.

Some teens today steal their parents' and grandparents' medications. Keep yours in a place that is not too convenient or in a basket you can take to another room when they visit.

* Don't share medicines. Only a doctor knows if what is prescribed for you will help or harm someone else.

* Always check directions on a medicine container before you take it so you won't be putting drops for your ears into your eyes, for example, advises the Food and Drug Administration.

What you can do about your snoring

Snoring can be a temporary problem brought on by a cold, allergy or sinus infection.

More often, it's an every-night occurrence caused by a vibration of the relaxed muscles and tissues in the throat. Symptoms are worse if you are overweight, or still have your tonsils.

Doctors at the Snoring and Apnea Center of California, Los Angeles, say snorers should sleep on their sides, not on their backs. It helps to cut back on relaxants like alcohol and some medications before bed.

Nasal strips are popular, but they are recommended only for people whose snoring is due to sinus blockage. Some over-the-counter sprays help, but only if you don't drink anything afterward. Mouth guards that are custom made by a dentist are expensive but help by moving the jaw forward. They allow more

room in the throat.

Two-thirds of snorers develop obstructive sleep apnea. Between snores, breathing passages get blocked and let no air in for 10 seconds or more. This can cause high blood pressure, fatigue and decreased productivity. It could also cause a heart attack or death.

Dramatic improvements are seen with the use of nighttime breathing masks, which gently force air past the obstruction.

The "pillar procedure" is a new, minimally invasive and permanent fix. Three tiny fixed rods are inserted into the soft palate. This stops the soft palate from vibrating, the cause of snoring. It takes about 15 minutes and is painless, but the \$1,500 to \$3,000 cost is usually not covered by insurance.

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ORANGE COUNTY
SOUTH ORANGE COUNTY

EXECUTIVE DIRECTOR:
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CLINICAL SUPERVISOR
JOHN MABASA, RN
TORRANCE OFFICE

CLINICAL SUPERVISOR
DONNABELLE SALONGA, RN
BSN PHN
MONTEREY PARK OFFICE

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About Our Administrator

Lilia Ramos graduated in 1966 with a Bachelor of Science degree in Nursing from Far Eastern University, located in Manila, Philippines. She left the Philippines in 1967 after a years work in Ozamis City at her aunt's hospital. She migrated to Canada and worked as a surgical nurse at University Hospital in Saskatoon, Saskatchewan until 1968 when she got married and moved to Montreal, Quebec. In Montreal, she worked at Royal Victoria Hospital and Montreal Neurological Hospital until 1970 when she moved to Manitoba to work as a delivery/ nursery nurse. After the birth of her first born son, FredoCris, Lilia and her husband moved to Calgary, Alberta in 1973 where she had her second son, Gideon and re-established her family in Montreal until they moved to California in 1977. She worked as an ICU/ CCU nurse and later on as an open-heart surgical nurse. In the 1980's she founded Philippine Outreach USA through which she got involved in charitable missions for children and livelihood projects. In the early 1990's she left acute nursing and transitioned into the home health care industry helping to establish new home health agencies (Medicare and MediCal certified) under auspices of Bellflower home health.

In 1994 she co-established Greater South Bay Home Health and in 1995 she bought out her partner and continued to build up GSBHH from a patient census of 35 to where the company is now, a multi-branch organization (the main office in Torrance, CA and another in Monterey Park, CA) with a 150-200 patient census, 30 full-time employees, and 70 part-time employees. Throughout these years, Lilia has been involved in the performing arts, medical missions, and outreach programs in the Philippines. It is her hope that in her later years she will be able to re-establish livelihood projects and hence start programs for the Philippines. At the moment, Lilia is busy with transitioning GSBHH into a fully electronic medical records system, as well as developing educational programs for nurses both here in the United States and in the Philippines. Because most of her family members have resided in the Bay Area for almost 30 years, she is looking into expanding to the Bay Area. Lilia also believes that there is an increasing need in the San Mateo County and it's surrounding counties for quality home health care.

One merely has to peruse GSBHH's mission, vision, and core values to know that Lilia's heart has always been and will always be in extending help to the poor and needy, a passion that brings her greatest joy. Lilia also adamantly supports the mentoring of young nurses with the knowledge that even after she is long gone, her heart will continue to live in those with whom she shared her passion .

About GSB Home Health

This August, we have plenty to celebrate at Greater South Bay!

Celebrating birthdays this month:

- 2 - **Joanne Salem**
- 12 - **Unice Fokwah, RN**
- 13 - **Julia Avalos, LVN**
- 23 - **Katrina Tinio, RN**

Celebrating Anniversaries this month:

7 - **Donnabelle Salonga** (3 yrs) *RN Supervisor, Monterey Park Office*

22 - **Fe Mendez** (2 years) RN

We'd also like to share that GSBHH is celebrating our Sweet 16! This month, Greater South Bay Home Health is celebrating our 16th year of service to the commu-

nity. We've experienced a tremendous amount of growth in the last 16 years, and look forward to nurturing and fostering new relationships in the years to come.

Staff news:

Congratulations to Nurse **Yce Tan, RN** who is expecting her first child in September.

Community Liaison **Jennifer Ebilane** is also expecting her third child, a baby girl, due this November.

Clinical Director **John Mabasa** and his wife **Sally** welcomed their new baby girl **Samantha Joy** to their lives this past May.

We are also delighted to have new members join our

team! On our nursing staff, we welcome **Karen Capili, RN** and **Cindy Cho, RN**. We have also added to our full time nursing team **Maria Johnston, RN** and **Julia Avalos, LVN**.

The newest additions to our Community Liaisons are **William Pol, Robert Mason**, and **Mariel Johnson**. William is servicing the Los Angeles areas as well as much of Inglewood and Marina Del Rey; Robert is servicing much of Southern Orange County; Mariel has taken on Fullerton and Northern Orange Areas. We are truly excited to have them on board!

Contact your Community Liaison today for all your home health needs!