

ASCF Announces Scholarship Awards



Brianna Morgan



William Oliver IV

The Arkansas Spinal Cord Foundation (ASCF) has chosen two individuals with spinal cord disabilities to receive the 2014 Sandra Turner Memorial Scholarship Award. The winners this year were Brianna Morgan of Hermitage, Arkansas and William Oliver IV of Fayetteville, Arkansas. Each winner received a \$2,000 scholarship to assist with furthering their education. “The committee had to make some extremely tough decisions this year! There were some exceptional applicants and we felt like all were very deserving. Unfortunately, we were only able to provide two scholarships,” stated

Mike Cranford, ASCF Scholarship Selection Committee Chairman.

Brianna Morgan is attending South Arkansas Community College in El Dorado, Arkansas working on her associate degree in Applied Science. Upon completion of her associate degree, Brianna plans to transfer to the University of Arkansas in Magnolia to complete her Bachelors degree in Computer Information Systems. In the essay she submitted with her scholarship application Brianna state, “I want others not to see me as just a woman in a wheelchair but to see a woman

with a bright future. There are many young girls in our state growing up with a spinal cord disability and I want to be a positive role model for them”.

William Oliver IV is attending the University of Arkansas in Fayetteville. In addition to his academic abilities he is an excellent musician and accomplished pianist, and has almost completed his minor in music. William stated, “Education is very important to me and I want to find an area in which I can have a meaningful job that is realistic for me”.

The Arkansas Spinal Cord Commission and the Arkansas Spinal Cord Foundation congratulates our scholarship award winners and wish them much success in their future. Concentrating on their ability, not their disability, is demonstrated by their continued desire to succeed!

ASCC 2014 SCI/D Conference, “Healthy Minds, Healthy Bodies” Exceeds Expectations!

The ASCC Conference, which was held on Friday, September 26, at the Benton Event Center, was a tremendous success. Approximately 300 attendees visited the Expo hall and attended presentations by international, national and state experts in the field of

spinal cord disabilities. The number of attendees reflected the largest total in 24 years. Fifty Exhibitors ranging from durable medical equipment, medical supplies, non-profit organizations, human services agencies, rehabilitation hospitals, accessible vans, trucks,

motorcycles and a universal design trailer filled the Expo Hall. The conference theme, “Healthy Minds, Healthy Bodies”, centered around the concept of empowering healthcare professionals and caregivers to provide better care,

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Letter to the Editor

Instead of my regular "From the Desk of the Executive Director," I would like to share a personal insight from the ASCC Commission Chairman, Jon Wilkerson. His story is a great benefit to every individual who has a spinal cord disability.

My name is Jon Wilkerson. I am the chair of the Arkansas Spinal Cord Commission. I'm also a person who lives with a spinal cord injury. As such, physical complications come and they go and generally they can be overcome with time and potentially a trip to the physician's office. This is a pattern that's common not only to people with spinal cord injuries but also people of all different stripes. A couple of weeks ago, on the way to the annual Spinal Cord Commission Conference, I encountered one such physical complication. Unaware at the time of what this complication was or could have been, I dismissed an unfamiliar electronic beep as something coming from my immediate environment, perhaps a problem with one of my devices or my wheelchair. I actually initially blamed my mother's ill-used cell phone. This beep was infrequent but persisted throughout the day and past the point where I could blame it on my mother. I happened to briefly be awake in the middle of the night and realized this noise wasn't coming from around me, it was actually coming from within me. I use a baclofen pump, a device surgically implanted in my abdomen, to help control spasms. It took until 4:00 AM on Saturday to realize that I could be out of medicine, out of battery, or about to explode for all I knew.

One large difference between those who live with spinal cord injuries and those who live with other chronic conditions is the specificity and complexity of our physical complications and the expertise needed to diagnose and treat them. One great advantage that we have is the program that I used on that Saturday called the TRIUMPH call center. This program is funded through a contract between the ASCC Trauma Rehabilitation Program and UAMS Center for Distance Health. The program provides a 24/7 Call Center, with the support of the Physical Medicine and Rehabilitation Department at UAMS, to assist people with spinal cord injuries, and healthcare professionals who treat them with the complex physical issues associated with spinal cord injury that may not be easy to solve in a timely fashion.

The next morning, after my middle of the night realization, I chose to call the TRIUMPH call center instead of making a run to the emergency room, where I was almost certainly going to receive blank stares and shrugs from healthcare professionals who probably would have had little to no experience working with a person who has a spinal cord injury, much less the particular device that was giving me issues. I would like to point out, that is not an indictment of the people at my local emergency room or any of the other valuable employees of our state's emergency departments. They provide a great service to the majority of the population and have helped me on occasion in the past. However, this particular problem was one that was appropriate, and very convenient, to solve through the TRIUMPH program. I called the toll free number at 9:30 AM and before noon I had spoken with a nurse and a doctor who diagnosed my pump issue and electronically referred me to the appropriate healthcare provider that could fix the problem for the long term.

If I were to make a guess about how my weekend would have gone if I had not called the TRIUMPH program, I suspect that I would have driven 20 miles to my local emergency room, waited in an emergency room for a few hours before the staff determined that I would need to be transported to UAMS and most likely spend the rest of my weekend in a hospital bed in Little Rock. What I got instead was what I really wanted, great service and a weekend in front of the television enjoying football in spite of the beeping from my belly.

To contact the TRIUMPH Call Center, please call 1-855-767-6983.

New Employees Join ASCC



Ashley Lentz

Welcome the new Public Health Educator, Ashley Lentz. Ashley joined the Arkansas Trauma Rehabilitation Program on July 7, 2014. She has taken over the responsibility of the TBI Central Registry and the ATRP Disability Resource website. As ATRP grows, her role will be expanding within the program.

Ashley grew up in the Ft. Smith area and is a graduate of the University of Arkansas, Fort Smith. Her degree is in psychology. She was previously employed by BOST as a case manager. Ashley has three children; Conner, age 6; Cooper, age 5; and Calileigh, age 2. She is a razorback football fan and also enjoys live music and bow hunting.



Gaylyn Flint

We would like to welcome Gaylyn Flint to the Arkansas Spinal Cord Commission as the new Administrative Specialist for the Hot Springs Case Management Field Office. She began her duties on May 12, 2014.

Gaylyn was born and raised in Hot Springs, Arkansas. Upon graduation from high school she attended National Park Community College in Hot Springs. Gaylyn has one son, Devon, who is now 20 years old. She is also very active with her church and is organizing a Christian based foundation through the Historic Eureka Missionary Baptist Church that mentors young people and provides help in the community and city of Hot Springs.



Deanna Davis

Please welcome Deanna Davis ("Dee") to the Arkansas Spinal Cord Commission.

Dee began working on April 14, 2014 as an Administrative Specialist to the Case Manager in the Russellville office.

She previously worked in legal offices, administration of employee benefits, retirement planning and even administration of a church office.

She is a single mother of two grown children and enjoys handcrafts, with an emphasis on quilting, as a mode of therapy. She has a flock of chickens, three dogs, a horse as well as flower and vegetable gardens!

Employee of the Quarter



Shalia Delph

Our Healthy Minds, Healthy Bodies was a huge success! It takes a LOT of planning, coordination, time and effort outside of regular work duties to pull such an event off without any glitches.

We are very proud to announce Shalia Delph, who performed a catalyst role in the Conference Planning Committee, as our Employee of the Quarter. She spent many tireless hours before, during and after her normal work hours to ensure the continuing education credits were submitted and approval obtained. She was the lead staff in all signage and nametags and ordered and tracked conference items and products. She also made numerous follow-up calls to participants and vendors, and maintained and sent letters of confirmation to

participants just to name a few other duties.

She has taken on her new role as the lead Administrative Specialist with a no holds barred attitude, jumping right in feet first and running starting off with her other big project going on simultaneously to coordinate Spina Bifida Camp. She has been a tremendous support, liaison, and will continue to be a valuable asset to her ASCC co-workers and the clients we serve. Please join me in congratulating Shalia on a job well done!

ASCC 2014 SCI/D Conference, "Healthy Minds, Healthy Bodies" Exceeds Expectations!

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to do more with less and most importantly, empower individuals with SCI/D through their minds and bodies.

International keynote speaker Joanne Smith, Certified Nutritional Practitioner and co-author of *Eat Well, Live Well With Spinal Cord Injury*, captivated the audience during her presentation on nutrition and the role it plays in rehabilitation and long term health. Joanne's expertise reflects her personal experience of living with a spinal cord injury for over twenty-five years.

Other presentations included:

J. Scott Richards, PhD, a clinical psychologist who spoke on adjustment issues in his session, *Life After Spinal Cord Injury: Wheeling and Dealing*.

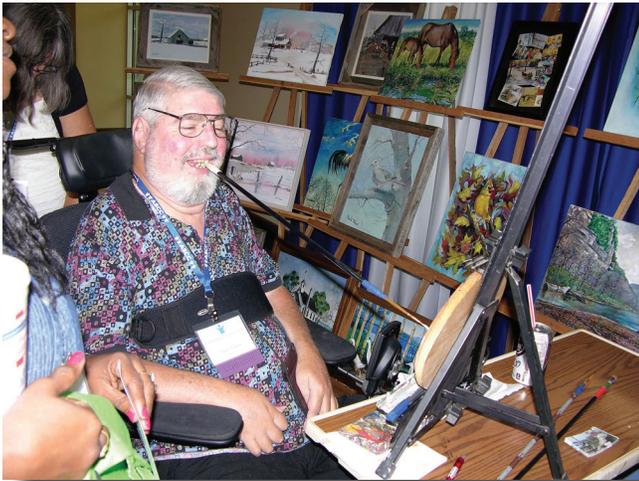
Breakout sessions provided information on pressure sore prevention and management, recreational activities, exercise for wheelchair users, eating well on a budget, challenges and opportunities for caregivers, and motor learning principles in neurorehabilitation. One of the highlights of the day was the opportunity to

watch the amazing mouth stick painter, Dale Tabor. Mr. Tabor is a renowned Arkansas artist who has been a member of the Association of Mouth and Foot Painting Artists of the World since 1987. It is always a great pleasure when Dale is able to demonstrate his skills and techniques for us.

Many thanks to our sponsors and exhibitors for their support and commitment in making this event possible.

View the conference photos to see what you missed and make plans to attend next year!





You've Got This MS Campaign Makes a Real Impact with Real People

You can't help but breathe a sigh of relief when you watch the videos submitted to Healthline's You've Got This - MS (<http://www.healthline.com/health/multiple-sclerosis/youve-got-this>). From knowing that you're not alone to hearing from others who are living well with MS, this unique campaign is about so much more than awareness.

You've Got This - MS was created to not only raise money for MS, but also to offer those touched by MS, whether through their own diagnosis or a loved one's, insight and advice that you're not likely to find at your doctor's office or in a book. The videos are recorded and submitted to the website by individuals of all ages, including couples and families, who are sharing their stories along with their own tips to make living with MS easier and to show you that you're not alone. And for each video submitted, \$10 is donated to the National MS Society.

The money donated helps to fund

programs and assistance for the estimated 400,000 people with MS in the United States, including people right here in Arkansas. If you have ever wondered where the funding goes, the following will help paint a clearer picture and show the impact of those dollars at work in your community:

- **Direct financial assistance.**

In 2013, the MS Society provided \$15,738 to 42 families living with MS in Arkansas and leveraged an additional \$10,457 for eight more families. This covered the costs of things such as medical equipment, respite care, and emergency rent and mortgage payments.

- **The National MS Society College Scholarship and Tuition Assistance Program.** The program is available to students who either have MS or have a parent with the disease. The program funded four new and seven renewal scholarships totalling \$16,500 in Arkansas for 2014.

- **Information and Referrals**

Center (IRC). With 1,041 participants in Arkansas, those with MS are able to access literature and information, along with referrals to doctors, community agencies, financial assistance and more.

The MS Society in Arkansas was also able to help 72 people in different age groups and stages of the disease participate in wellness programs, such as Journey Camp for Kids, Every Day Matters: Living Your Best Life with MS, and Celebrate Your Caregiver, just to name a few.

Whether with high tech video equipment or just your phone; recording your story will have the same powerful impact on someone who's been newly diagnosed and looking for advice or hope. Healthline (<http://www.healthline.com/>) has made the submission process easy in order to encourage people touched by MS to share their story, whether they're tech-savvy or not, so pick up a camera and record your story today.

Safari Club International Pathfinder Award



Lacy

Lacy is a 14 year old girl with Spina Bifida and an avid hunter. She recently received the Pathfinder award from Safari Club International. She and her parents were able to participate in the hunt of a lifetime in September for world-class red stag at the Lurnetian Wildlife Estate in Canada. It will be a life long memory for her and her family.

She has never let her disability slow her down. Lacy participates

in many activities other than hunting, such as dance, cheerleading, wheelchair racing in the Special Olympics, and Arkansas Angel Pageants. She is also in numerous clubs at her local high school, such as the Christian Student Union and Future Community and Career Leaders of America.

She recently volunteered for a new exercise video for people with disabilities. Lacy has many more adventures in her future.



Annual Flu and Pneumococcal Vaccination

There are two vaccinations that are important to you if you have a Spinal Cord Injury - the pneumococcal and influenza vaccinations. I recommend anyone with a spinal cord injury get an annual (once a year) influenza vaccination unless you have had some type of severe allergic reaction (shortness of breath and swelling) or suffered from severe neurologic weakness after a previous flu vaccination. Also, if you live with someone or care for someone who is at high risk of medical problems if they develop an influenza infection, you should be vaccinated to protect them. This includes the family of spinal cord patients, especially children and caregivers.

You should get your vaccination as soon as it is available, preferably by October, but you can get it throughout the flu season (usually October to May). It takes about two weeks for your immune system to build up antibodies against the virus after you get your vaccination, and protection lasts several months to a year.

There are three types of flu vaccine being offered: the Inactivated Influenza Vaccine (IIV), the Recombinant Influenza Vaccine (RIV), and the Live-Attenuated Influenza Vaccine (LAIV). The first two are shots and the last one is a nasal spray. The LAIV, the nasal spray, can be given to anyone between 2 and 49 years old. If you dislike shots and you meet the criteria this may work for you. Since it has a live virus in the formula you cannot be taking influenza antiviral drugs when using the nasal spray. You have to be off the antiviral drug for 48 hours and then cannot restart the antiviral medication for 2 weeks to allow your immune system time to respond to the attenuated virus in the nasal spray. It is okay to be on antiviral influenza medication when getting the vaccination with one of the shots, either IIV or RIV. None of the vaccinations cause influenza in recipients, but people vaccinated with LAIV can shed vaccine viruses and, rarely, these viruses can be transmitted to unvaccinated people. However, serious illnesses have not been reported

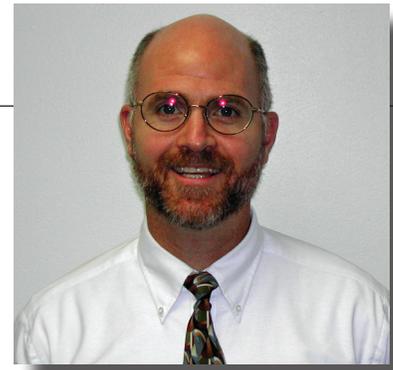
among unvaccinated people who have been infected inadvertently with vaccine viruses.

The IIV's are manufactured with eggs and can cause an allergic reaction in someone who has an egg allergy. If you are allergic to eggs, you need to discuss this with your physician. Some persons who report an allergy to egg might not be truly egg-allergic. Those who are able to eat lightly cooked egg (e.g., scrambled eggs) without reaction are unlikely to be allergic. On the other hand, people who can tolerate eggs in baked products (e.g., bread or cake) might still be allergic to eggs. An egg allergy can be confirmed by a consistent medical history of adverse reactions to eggs and egg-containing foods, plus skin and/or blood testing for antibodies to egg proteins.

The RIV is not manufactured with eggs and can be used in people ages 18-49 years old who have no other contraindications. However, a previous severe allergic reaction to an influenza vaccine, regardless of the component suspected to be responsible for the reaction, is a contraindication to future receipt of the vaccine. Just encourage all those around you to get it, so your exposure to the influenza virus this season will be limited, or consider using influenza antiviral drugs.

The pneumococcal vaccine is only needed once when you are injured and then again at age 65, although some experts argue for revaccination every 6-10 years. Pneumococcal vaccination is recommended for all children, for adults who have a condition that places them at increased risk for pneumonia or invasive pneumococcal disease, and for all adults ≥ 65 years of age.

Pneumococcal infections, including pneumonia and invasive disease such as bacteremia and meningitis, remain an important source of illness and death in adults, especially older adults and those with certain conditions, including immunocompromise (i.e. spinal cord injury) and asplenia, if the spleen was removed due to trauma.



*ASCC Medical Director
Tom Kiser, M.D.*

Two types of pneumococcal vaccines, both shots, are approved for use in the United States: a pneumococcal polysaccharide vaccine (PPSV23; Pneumovax 23, Pnu-Immune) that includes 23 purified capsular polysaccharide antigens; and a pneumococcal protein-conjugate vaccine (PCV13; Prevnar 13) that includes capsular polysaccharide antigens covalently linked to a nontoxic protein. The Pneumovax has been used in adults for decades in the United States but is not recommended for infants or toddlers under age two because it is poorly immunogenic in this age group. A 13-valent pneumococcal conjugate vaccine, Prevnar is recommended for infants and children and in selected high-risk adults.

The Pneumovax is recommended for all adults ≥ 65 years of age and in people 19 to 64 years old who have a condition that increases the risk of pneumococcal disease (i.e. SCI). The Prevnar followed eight weeks later by the Pneumovax is recommended for use in people age 19 or older without a spleen or with an immunocompromising condition (eg, SCI, HIV infection, cancer). If such adults have already received Pneumovax, at least one year should transpire before they are given the Prevnar. Both types may be administered concurrently with other vaccines, such as the influenza vaccine. However, Pneumovax and Prevnar should be administered at different times as outlined above; the schedule depends on which formulation was given first. Some experts continue to recommend administration of Pneumovax every six to seven years for asplenic individuals. Revaccination with Prevnar is not recommended.

Arkansas Spinal Cord Foundation Car Donation



Pictured above are ASCF Board Chairman John Wyrick handing keys to Charles Griffin, with Board of Directors members Tom Farley and James Clark.

The Arkansas Spinal Cord Foundation was generously donated a car to be given to an ASCC client who demonstrated a significant need and would greatly benefit from the gift of a car.

On July 18th, 2014, a recipient was chosen and the

red Ford Taurus was on its way to its proud new owner, Mr. Charles "Jesse" Griffin.

Jesse is 26-years old and lives in White County. He was injured in 2006, at the age of 18, but still went on to graduate high school and get his driver's license utilizing hand controls. As many ASCC clients are aware, transportation is often a major barrier to independence especially in rural Arkansas. Jesse is an active and independently-driven young man who longed to be able to navigate his community without asking friends and family for rides or assistance. Jesse stated that, "...having my own vehicle helps me be more confident about my spinal cord injury, and being more independent boosts my self-esteem."

Jesse's goals include attending college and becoming more involved in his community, which is now much more achievable with a new set of wheels! Congratulations, Jesse!

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