



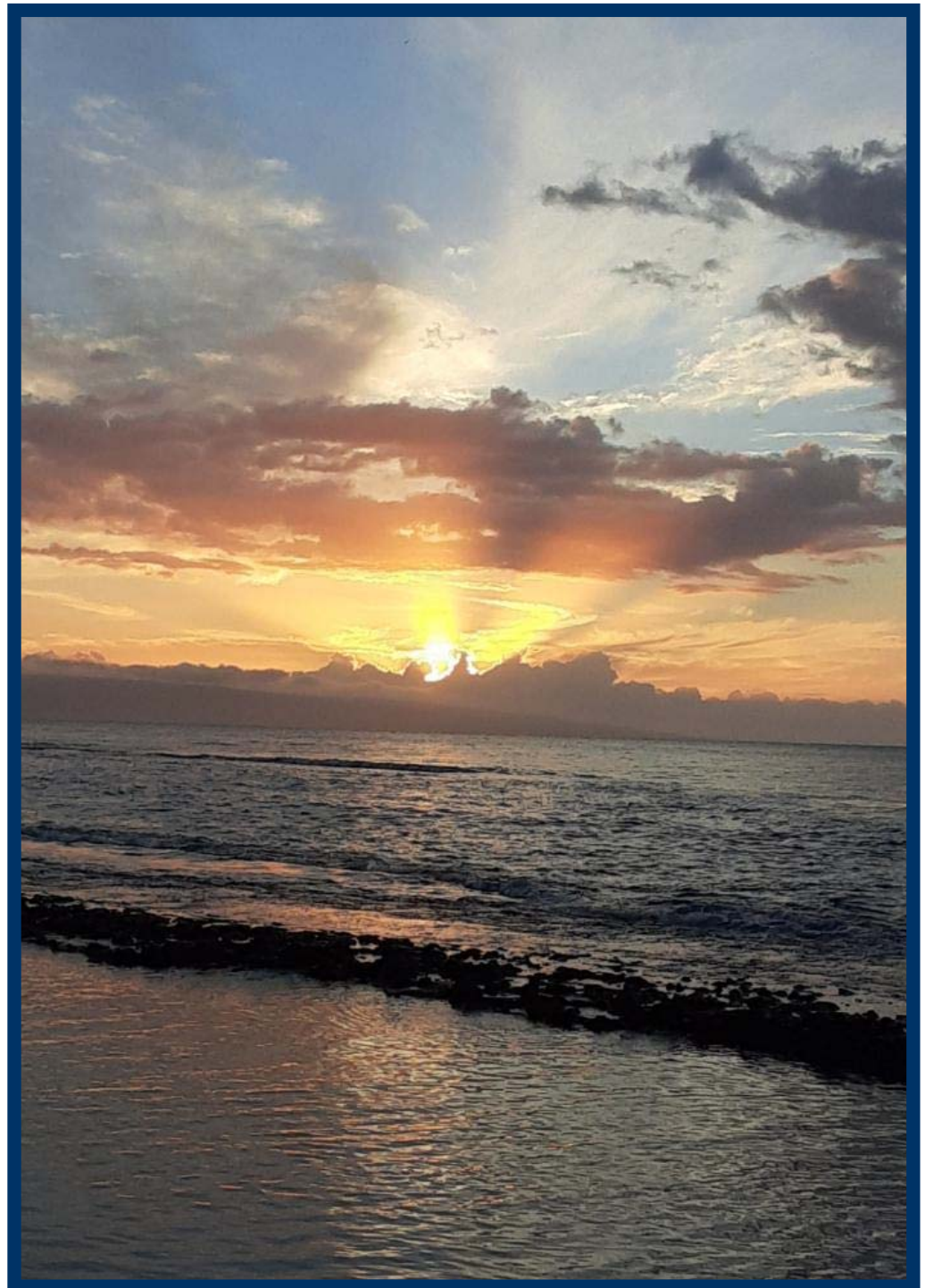
Northwest Chapter
Volume XLVIII Issue 2

NORTHWEST OUTPOST

December 2020/January 2021

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Sunset In Maui, HI



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Our Mission

The Paralyzed Veterans of America, a congressionally chartered veterans service organization founded in 1946, has developed a unique expertise on a wide variety of issues involving the special needs of our members-veterans of the armed forces who have experienced spinal cord injury or dysfunction.

PVA will use that expertise to be the leading advocate for:

- Quality health care for our members,
- Research and education addressing spinal cord injury and dysfunction,
- Benefits available as a result of our members' military service,
- Civil rights and opportunities which maximize the independence of our members.

To enable PVA to continue to honor this commitment, we must recruit and retain members who have the experience, energy, dedication, and passion necessary to manage the organization and ensure adequate resources to sustain the programs essential for PVA to achieve its mission.

The Northwest Chapter Paralyzed Veterans of America (NWPVA) a member chapter of Paralyzed Veterans of America accomplishes it's mission by coordinated efforts through programs that:

- Provide opportunities for health promotion, recreation, employment, sports and recreation, service and camaraderie for paralyzed veterans;
- Elevate society's information level about the attitudinal, physical and legal barriers that confront persons with disabilities in order to influence the removal of those barriers;
- Advocate for and monitor the delivery of high quality and appropriate health care benefits and service;
- Cooperate with and seek the support of other groups and individuals that share NWPVA's objective;
- Educate the public with the current and ongoing needs and current and past contributions of America's veterans.

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Matthew Mickunas

Our Programs



As President of the Paralyzed Veterans of America, Northwest (NWPVA), I am responsible for functional supervision and delegation of authority to create, maintain and im-

prove the NWPVA programs to serve U.S. Veterans with disabilities resulting from spinal cord injuries or spinal cord dysfunction. As members need to realize also, we as a chapter serve as an advocate for non-Veterans with severe disabilities as many of these people have the same special needs as disabled Veterans. Our programs are health care, legislation, advocacy, fundraising, research and education, and sports for the disabled Veteran. Our primary focus is health care for Veterans who qualify for General Membership in NWPVA. The PVA National Service Officer I believe has always had an issue in the forefront to find and outreach our Veterans with MS with Spinal Cord Dysfunction (MSSCD) and will remain so for the near future. But let us change this, if you know a Veteran or of a veteran with MSSCD, please have them reach out to our Regional & National Accredited PVA Service Officers. These special service officers have the tools to get them the unique type of military benefits for Veterans with MS with spinal cord dysfunction that are unknown in the regular service or healthcare community. Their contact info is by (Last number# digit in your SSN) 0-4 Call (206) 341-8210, and 5-9 Call (206) 768-5415. Or get ahold of us at the chapter, we will help the Veterans with MSSCD discover your benefits.

The members of NWPVA are fortunate to have their medical care provided by the Department of Veterans Affairs (DVA) medical facility that are sometimes within driving distance of members' homes. With the changing technology you can now stay at home and get care using the VA's virtual telehealth system of care. It's also a privilege to have our National PVA visit our SCI Centers and enhance and strengthen these facilities on behalf of our membership and those who are eligible for membership. We still meet with VA officials and with the Medical Center Director through virtual meetings to discuss health care issues that affect

our members and non-member Veterans. We also sponsor VA social functions for those inpatients that are hospitalized at Seattle's Spinal Cord Injury Unit by having hot gourmet pizza delivered to them once or twice a month. Many of us will and have spent considerable time as inpatients on this unit during our lives, so it is vital that we continue to encourage proper medical care staffing to the extent possible. Furthermore, we continue to monitor other issues as they arise to ensure our Veterans are provided quality medical care. As always, we encourage those that can make donations to NWPVA to do so through our website @www.nwpva.org. We are proud of our role as advocates and we want to continue this tradition since hospitalized Veterans are limited in the roles they can play in our quest to honor them.



Robert Clinton Just Call Bob



As I write this column today is Veterans day, and I want to wish all my fellow PVA members a happy and healthy Veteran's Day 2020. Now, on to the business of the corporation. In addition to serving as your

Vice President I am also the Volunteer Coordinator for the Northwest Chapter, in this role I have become a cheerleader, secretary, a mentor, and I'm sure some will say areal "pest," or another phrase that starts with "pain-in". But for whatever reason you, the Northwest Chapter League of Outstanding Volunteers have met the challenge and October saw the largest number of volunteers reporting hours since April when I began keeping records. I want to personally thank everyone for your efforts and putting up with my constant reminders. I also want to thank you for your efforts on the behalf of the many veterans who benefit from your efforts. Tell your friends and fellow veterans, they too can join the League of Outstanding Volunteers, "just call Bob."



On another subject. At the October Board of Directors Meeting, members agreed to make "wellness" calls to all PVA members during their birthday month. These calls will serve to update our database, reconnect with inactive members, solicit feedback on ways we can improve the *Outpost* and its articles. Well, I was the first to volunteer and chose November. Who knew so many vets were born in November, 35! Well, almost halfway through the month, and halfway through the list, I have found many disconnected

numbers, one rude hang up, several "too busy to talk," three waiting for a call back. But, despite these disappointments, I am so glad I have been making these calls because I have made new friends. Fred is an Army vet who lives in far north Idaho, he loves to hunt elk, but hunting areas close to him are closed due to grizzly bear activity.



I told him about our recent purchase of the accessible hunting blind and opportunities for hunting trips with PVA next season. He is happy with the *Outpost* and appreciates the information. I spoke to Chris and his wife Francheska. They were both upbeat and friendly and we spoke for a long time. I invited him to sit in on a BOD call. They were very complimentary about the *Outpost* saying how much they enjoyed it and asking why we did not have more general interest articles like travel and a blog, I promised to follow up. Finally, good short conversation with Caesar, he has COPD in addition to his SCI. Caesar gets treatment at Seattle VA, he is happy with *Outpost* but cannot read too long as gets tired. I will continue to continue to make my calls and fully expect to meet new friends and reconnect old ones.

I will have a fresh update at the next BOD meeting, and please look forward to your month of making calls, I believe you too will find it rewarding and an opportunity to make new friends.



Brent King

Hunting Season



I've had more than my fair share of time in and out of the Extended Inn VA hospital stays. I now know to eat healthier, exercise, get enough sleep and stay active daily. You just have to

find a balance that works right for you.

This time of year, as it's colder in Eastern Washington and Northern Idaho I transition from deer hunting to upland bird, duck and goose hunting. We still knock a few Fall turkeys down in WA and ID too. These are outdoor activities that I can participate in with the right equipment. I utilize a TrackChair or TracFab chair for upland bird hunting and a youth Cabelas blind to sit me upright for goose and duck hunting. I utilize a lighter Benelli .20-gauge shotgun for upland bird and a Remington Versa Max .12-gauge shotgun for geese and ducks to reach out a bit further with heavier loads.

I search for hunting guides that are open minded to working with a Disabled Veteran. I do not have access to a lot of ground for bird hunting and I cannot

go alone or try to set up decoys by myself, so a guide works best for me. Guides do the scouting and all the set up, you just show up and enjoy the hunt. I maintain my skills by practice shooting a lot to stay accurate. There's no point in paying for hunts if you can't knock a limit of birds down. I usually buy a package of 10 to 12 hunts at a discounted price for paying up front.

I do enjoy hunting a lot, but taking another Veteran out to hunt is even more rewarding for me. The getting up early to beat the sunrise isn't always fun, but often necessary. We do spend hours and days of sitting in blinds and there are also shooting from the vehicle permits if you qualify.

Please get out if you can and don't sit at home letting life pass you by. If you don't make time for your wellness, you will be forced to make time for your illness!



Thomas Bungert Maui on a Budget



One of our favorite places to go is Hawaii

for vacation. The Hawaiian Islands opened back up October 15, 2020 and you must get tested for Covid-19, three days prior to your flight and the negative results gets you released from quarantine status when you arrive. The best locations are CVS, Rite Aid, and Walgreens all for free with appointment. There's certain places Hawaii that will accept Covid-19 testing. Here is the website with locations to get tested. <https://hawaiicovid19.com/travel-partners/> This will prevent any quarantine during your stay.

After getting married in 2004, my wife wanted to go to Hawaii. When you're on a fixed income my first thoughts, how expensive it's going to cost with airfare, accommodation, and renting a vehicle. What I found out after doing research, made it quite easy to vacation in Hawaii. In the meantime saving a small fortune but still enjoying the full experience of Hawaii at no sacrifice. We'll look at airfare normally running \$600 or more per person for round-trip to Hawaii. We use Alaska Airlines for example. Just by signing up for Alaska Airlines credit card gives you 42,000 miles and a companion ticket once a year. The price of three round-trip tickets came to \$600 with insurance. My wife's ticket cost \$17 and 37,000 miles and my caregivers ticket only cost \$127, the cost of the companion ticket. You can use the companion ticket anywhere Alaska Airlines flies for only \$127 round-trip. Most airlines offer great deals just to sign up but some have an annual fee

each year. The way to get out of it is to use it before the years up and then cancel your card! When you cancel they will tell you that you cannot reapply which is false. This saves you the \$75 annual fee.

Whenever flying, medical bags are always free with all airlines, just let them know when checking in which bags are medical. Now you have to narrow it down when it comes to accommodation. Prices can be all over the place from \$100 up to \$500 a night. What about staying at a timeshare resort without having to be a member. They usually sell or rent in bulk weeks. Probably costs a lot less than a hotel but have everything at home. A one or two bedroom usually has a washer and dryer, full kitchen, a Murphy bed, dishwasher, and all the essentials. If you ever need more dishwasher, laundry detergent, coffee, or anything else just call the front desk. A studio sleeps two with a partial kitchen and no washer and dryer.

Transportation in Hawaii has numerous choices to get around. The first time going to the Big Island and renting a wheelchair van costed \$2000. If renting a wheelchair accessible van outside Oahu, you will get charged an extra \$200 for delivery on top of your rate from \$125 daily, and \$100 per day weekly charge. After thorough research found out if you are eligible to use the shuttle in your community then you can use paratransit or Handy Van in Oahu and Maui up to 21 days before showing proof of disability. In a way it was like our personal shuttle. The average cost is \$2 per ride and caregiver goes free or \$4 for all day pass. Make reservation one day prior or up to 5 days in advance. As I cannot find a

wheelchair accessible taxi to pick me up at the airport to our resort. Out of the 4 wheelchair accessible taxis companies 2 responded by saying their vehicles were being serviced at this time. Luckily, I was eligible to use paratransit 3 months prior to my arrival by submitting the proper documentation of my eligibility form from Pierce transit. Within 5 days prior to my arrival to Maui, it was all planned and we were picked up at the airport right on time and taken to the resort for only \$2. You can always make a deal with the taxicab driver as they're competing against each other for business. Paying with cash is the best way to go. When looking to travel somewhere look to see if you're eligible to use their shuttle system just like you can use the shuttle system where you're at. Saves a lot of money as we saved over \$1800 from renting a wheelchair accessible van.

Hawaii public transportation is absolutely one of the best in the country. They have a system installed built by Quantum on the buses. When you get onto the bus, you're on the left-hand side of the bus facing the back. An arm will come out on the side and lower down. The arm will then close in on you wheelchair to secure it. As you see in the picture. The locals are great at helping you out. With the cost of \$1 for senior citizens, \$2 per person, and \$4 for all day pass.

We use both public transportation and paratransit to get around the island. Mainly used the public transportation visiting places up-and-down Lahaina and Kaanapali. Lahaina has a lot of shopping, restaurants, and outlet center with great deals. Also a lot of activities

(Continued on page 5)

(Continued from page 4)

like dinner cruises and other activities, other times we used paratransit to take us around the island for example like to Kihei for 3 hours, and then go on to Wailel-Makena and spend another 3 hours looking around and finding a place to eat. This was a great way to find great places to visit off the beaten path. The one benefit about taking public transportation or paratransit is being able to drink a Piña Colada or Mai Tai without having to worry about driving. Hopefully, you'll be able find tips to help you have a fabulous vacation and save money like I did.

Contact in Maui: Darren Konno-County, Maui-Transportation Program Coordinator.

Address: 2145 Kaohu Street, Suite #102, Wailuku, HI 96793 Phone: 808-270-7511 Email: darren.konno@mauicounty.gov



Heading Out



Exploring Using Public Transportation



Quantum Locking System on Bus

Weldon Lee



VA Research & Development By: Dr. William Banks, MD. Associate Chief of Staff for R&D

It is important to **ALL** veterans to understand how the medicines, medical procedures and protocols are developed to help us. The purpose of the subsequent articles are to broaden your knowledge-base in order to appreciate the time and efforts of Research and Development (R&D) personnel.

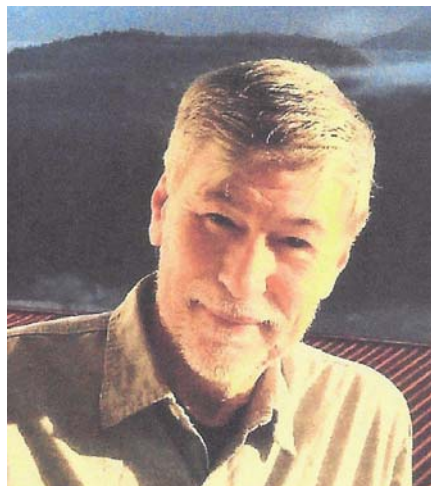
VA R&D plays a vital role in the Department of Veterans Affairs' mission and nowhere is this more evident than in the VA Puget Sound Health Care System. This program reflects the Health Care System's commitment to providing the highest quality of care to its Veterans. It is an integral part of the affiliation with the University of Washington, bringing that Institution's premier academic medicine program to the VA Health Care System and ensuring that the professional staff and quality of care here is of the highest caliber. The cohesiveness and strength of this research community is felt throughout the Northwest.

Research in the VA has always provided a valuable tool for recruitment of the best qualified physicians and scientific staff. Currently 163 of our VA Health Care System Staff are Principal Investigators (PIs), expending approximately \$26 million annually in VA intramural funding and another \$19 million in non-VA funds (including support from NIH, DOD, volunteer health organizations, academic institutions and the pharmaceutical and biotechnology industries).

There are over 700 active research projects. This strong, diversified base of support has ensured a robust, productive program, making this Health Care System a superior facility in the region. Principal Investigators represent virtually 33 major clinical departments which will be discussed in future editions of the Outlook.

Included are: Anesthesiology, Audiology/Speech, Cardiology, Dermatology, Gastroenterology, Internal Medicine, Gerontology, Hematology, Metabolism, Nephrology, Neurology, Nursing, Oncology, Orthopedics, Pathology/Lab Medicine, Psychiatry, Psychology, Pulmonary Care, Radiology, Rehabilitation Medicine, Spinal Cord Injury, Surgery, and Urology.

In Article 3, we shall reveal the eight highly visible Centers of Excellence and the National Institute of Health (NIH) funded centers.



Dr. William Banks

Giant Hornet By: Weldon Lee



A few facts to keep in mind to heed for everyone-ESPECIALLY the disabled who are physically and mentally challenged! An insect who is:

- Up to 2" in length, very temperamental, and can sting a prey many times.
- The large 1/2" stinger is heavily barbed with lancets where the venom is injected into the victim. It can penetrate beekeeper's suit or coveralls.
- The venom is extremely toxic that will require medical intervention and treatment.
- The warning for all to be concerned with is that the Asian Giant Hornet is **NOT** to be treated lightly.

- They are easily agitated and have a highly developed alert system. One Giant Hornet can bring a swarm of others within seconds that prove fatal.
- **DO NOT** agitate or disturb one if you see or encounter one. In some countries, the Giant Hornet is the most formidable insect in the world and are known as "yak-killers"!
- **DO NOT** attempt to outrun it. It is known to be able to fly at speeds 19-25 miles per hour. They are strong fliers and have the capacity of long ranges.

If stung, immediate first aid is: Monitor swelling and remove any constrictions in the swollen area(s); If possible, take an antihistamine immediately; apply ice or cold compress; monitor any severe reactions to the sting; CALL 911 or seek medical help immediately if experiencing respiratory distress or anaphylactic shock; and wash the sting site with soap and water.

Other reactions to the sting are; airway closure or cardiac arrest, necrosis (death of tissue), destruction of red blood cells, kidney failure, other organ failures, and death.

"Recently two additional hives have been discovered empty in Northern Washington. This means that the hives containing the queens have dispersed to places unknown in the area. These hornets can kill humans rapidly. Please be vigilant and report sightings immediately to the County or State Dept of Agriculture."

IF YOU SEE ONE, Call 1-800-443-6684 or 360-778-5800 immediately. Contact emails: arg.wa.gov/hornets or PestProgram@agrwa.gov

For more information on the Asian Giant Hornet, see: whatcom@wsu.edu

Tom Knoppi was a Member, Past Sports Director, and Past Board Member of the Northwest Chapter Paralyzed Veterans of America

May 15, 1937 - November 18, 2020



Tom Knoppi With His American Eagle Friend

Paralyzed Veterans
of America

WASHINGTON UPDATE

Recent news regarding legislation and regulatory actions affecting veterans and people with disabilities.

Written and produced by Paralyzed Veterans of America - Government Relations Department

November 13, 2020

Volume 26, Number 20

THE ACCESS BOARD REPORTS RESOLVED CASES IN FISCAL YEAR 2020

The Access Board is charged with enforcing the Architectural Barriers Act (ABA) of 1968. The ABA requires that buildings or facilities that were designed, built, or altered with federal dollars or leased by federal agencies after August 12, 1968, be accessible.

In Fiscal Year 2020, the Access Board resolved 55 cases through corrective action taken by the responsible federal party. The majority of cases concerned access to U.S. post offices, which is typical of the Board's yearly caseload. There are over 30,000 post offices in the U.S., many of which oc-

cupy older buildings. The U.S. Postal Service completed action to correct accessibility issues at 37 facilities under the ABA over the course of the fiscal year. Most cases concerned entrance doors and customer parking.

Other cases concerned access to parking, elevators, or restrooms at military bases and camps, shipyards, fleet readiness centers, and VA medical facilities. At the Kilauea Military Camp in Volcano, Hawaii, the Department of the Army installed compliant toilet and shower rooms in four accessible cottages and two guest buildings at the Morale, Welfare, and Recreation center.

The ABA is not limited to federal facilities and applies to other sites that received federal funding. One case concerned New York City's Rockaway Boardwalk, which was severely damaged by Super Storm Sandy in 2012. The City's Department of Parks and Recreation, which received federal grants to rebuild portions of the boardwalk, restored ramp access at two locations in response to the Board's investigation. Recipients of funding from the Department of WASHINGTON UPDATE November 13, 2020 Volume 26, Number 20 3 Transportation, including a city in North Carolina and a regional transit authority in Washington, undertook corrective action to address access to public sidewalks and parking.

"READY TO ROLL" INITIATIVE TO IMPROVE DISASTER PREPAREDNESS FOR WHEELCHAIR USERS

United Spinal has announced the launch of a comprehensive disaster prepar-

edness initiative for individuals with spinal cord injuries and disorders, designed to lessen the effects and risks associated with natural or human-caused disasters. The "Ready To Roll" Initiative at: [https://united](https://unitedspinal.org/ready-to-roll/)

[spinal.org/ready-to-roll/](https://unitedspinal.org/ready-to-roll/) will address the significant challenges wheelchair users and other individuals living with disabilities face when disasters strike.

Research Brief: “ The Extra Costs of Living with a Disability in the U.S.

National Disability Institute (NDI), in partnership with the Stony Brook University School of Social Welfare and the University of Tennessee College of Social Work, released a brief that summarizes research on out-of-pocket expenses faced by

individuals with disabilities compared to individuals without disabilities. Research indicates that a household with an adult who has a work-related disability will need an average of 28 percent more income to obtain the same standard of living as a comparable household without a member who has a disability.

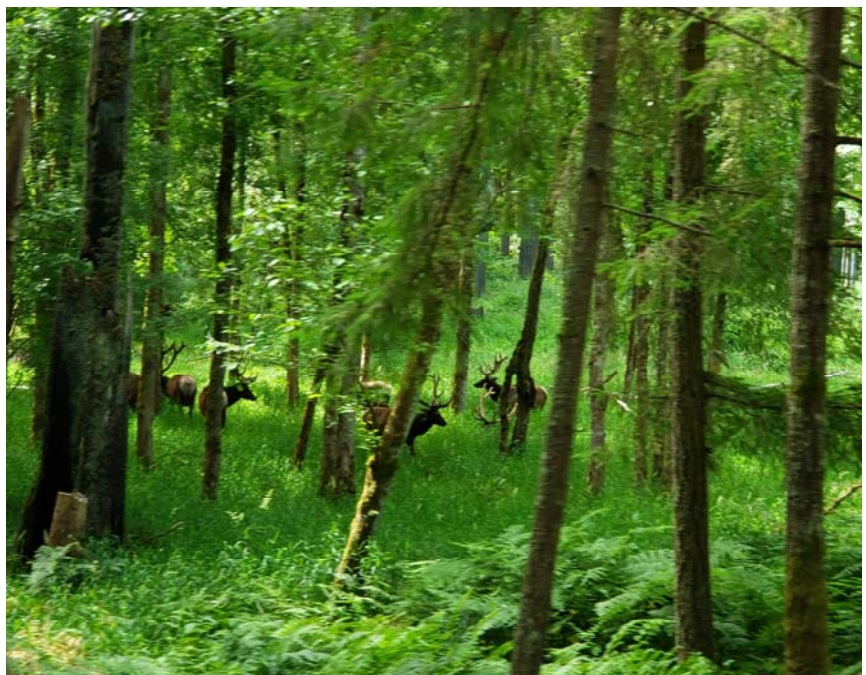
The brief recommends “resetting the policy table” for greater equity by addressing the tax code and eligibility criteria for public benefits. To review the brief, go to:

[The Extra Costs of Living with a Disability in the United States](https://nationaldisabilityinstitute.org/The-Extra-Costs-of-Living-with-a-Disability-in-the-United-States)
(nationaldisabilityinstitute.org)

FREE NATIONAL PARKS ACCESS FOR VETERANS

The U.S. Department of Interior recently announced they will be granting free entrance to national parks, wildlife refuges, and other federally-managed public lands to all U.S. military veterans and Gold Star families. Unlike previous years where fees were waived for a set period, this change is permanent—meaning entrance fees and standard amenity fees charged by the Bureau of Land Management and Bureau of Reclamation will be waived for veterans and Gold Star families from this point forward. For purposes of this program, a veteran is identified as an individual who has served in the United States Armed Forces, including the National Guard and Reserves, and is able to present one of the forms of identification listed below.

- Department of Defense Identification Card
- Veteran Health Identification Card (VHIC)
- Veteran ID Card
- Veterans designation on a state-issued U.S. driver's license or identification card



Climate Change Threat

The impact of climate change may be most visible in the Arctic, but the former commanding general of Marine Corps Recruit Depot Parris Island argued 11 NOV that it and other coastal bases face drastic threats from the warming planet. "I used to command a base that was dramatically impacted, Parris Island, and is now getting flooded routinely just in normal rainfall and sea level rise," retired Marine Corps Brig. Gen. Stephen Cheney said during a discussion on what the U.S. should do to prevent climate change from becoming a national security threat. The event was sponsored by Elected Officials to Protect America, a non-profit focused on environment and sustainability, among other policy areas.

"They are going to have to put a sea wall around parts of Parris Island, otherwise it's going to go under water," Cheney said. Parris Island sits on South Carolina's coast, just north of Hilton Head, leaving it susceptible to hurricanes. The Marine Corps is currently studying whether to close the recruit depot and build a new training facility, but that's to meet a congressional mandate to make its training bases gender-integrated, not an effort to address the effects of climate change. Cheney, who served 30 years in the Marine Corps, is now president of the American Security Project, a nonprofit, nonpartisan research institute that studies the effects of climate change.

Naval Station Norfolk, Virginia, is a poster child for those effects, he said. "The piers at Norfolk are go-

ing under water; the problem with that is the electricity is run underneath those piers," Cheney said. "As the water level rises, they don't get electricity. You cannot put ships next to those piers." The Norfolk facility also faces "flooding, literally a dozen-plus times a year, flooding to the extent that nobody can get on the base so the sailors can't get to the ships," he added. "I mean you talk about a national security concern – it is dramatic." Cheney was one of a handful of military veterans who attended the discussion to argue for a more decisive national climate plan as President-elect Joe Biden prepares to take office.

In 2017, President Donald Trump withdrew the U.S. from the Paris Agreement on climate, a move that Biden has pledged to reverse when he takes office in January, according to the Biden-Harris transition team website. Both Biden and Vice President-elect Kamala Harris mentioned climate in their victory speeches 8 NOV, highlighting their intent to focus on climate change as a key policy area. Oregon State Rep. Paul Evans – an Air Force veteran and co-chairman of EOPA – said that the national security issues posed by climate change are "so significant and so big and so impactful" that it's difficult for states to begin to address the problem on their own. "We are

looking forward to the next four years, hopefully, for a more integrated approach to ensure that we, for example, become a part of the Paris accord again," he said.

This year, the U.S. has seen devastating wildfires from California to Oregon, fueled by higher temperatures and drier seasons, Cheney said. "The more these fires burn, the more carbon dioxide is released, which contributes to the warming of the planet," he explained. "And the more climate changes, the more fires we have, the more sea ice that melts ... the more our national security is going to be threatened." Last year, the Union of Concerned Scientists, a Massachusetts-based science advocacy nonprofit, released a study warning that rising carbon emissions would likely lead to months where temperatures will reach 100 degrees or higher at Marine Corps Air Station Yuma in Arizona, as well as at Florida's MacDill Air Force Base and Homestead Air Reserve Base.

The Arctic is warming twice as fast as the rest of the planet, Cheney said. He believes the U.S. should build a stronger presence in that region to increase the Pentagon's options for projecting forces in a conflict. "There is certainly renewed great power competition in the Arctic," he said. "Russia and China continue to dramatically increase their Arctic operations." Cheney called for the U.S. to ratify the United Nations Convention on Law of the Sea, which would give America greater credibility in disputes over freedom of navigation in the Arctic, he said.



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(Continued from page 12)

"We've got to invest in the development of a deep-water port in Alaska," he said. "We need it to support greater sea-base power

projection." But overall, the U.S. has to "reduce its carbon footprint and other greenhouse gas emissions and find alternative energy sources," Cheney said. "The more carbon we emit, the hotter the

planet gets, which makes melting more rapid. We cannot afford to ignore the risks of a changing climate, and it's right here at our front door.

Covid-19 Victims: Those Most Often Hospitalized

Seniors with seven chronic conditions are especially vulnerable to ending up in the hospital due to exposure to the coronavirus, according to newly updated data from the federal Centers for Medicare & Medicaid Services (CMS). CMS says that nearly 1.2 million Medicare beneficiaries were diagnosed with COVID-19, the disease caused by the coronavirus, between the start of the year and Sept. 12. Of those beneficiaries, more than 332,000 were hospitalized with a COVID-19 diagnosis during that period. Those numbers, released 19 NOV, reflect cases and hospitalizations that CMS knew about as of Oct. 9. The federal agency notes that all data in its latest report "will continue to change as CMS processes additional claims and encounters for the reporting period."

The data reveals that seven chronic conditions were most common among the Medicare beneficiaries who had been hospitalized:

- Hypertension: 80%
- Hyperlipidemia (abnormally high levels of triglycerides and cholesterol in the blood): 62%
- Chronic kidney disease: 51%
- Diabetes: 50%
- Anemia: 48%
- Ischemic heart disease (heart muscle receives insufficient blood flow): 46%
- Rheumatoid arthritis/osteoarthritis: 46%

Of the beneficiaries who were hospitalized, 21% died and 32% were discharged to their homes. The others moved from the hospital to skilled nursing facilities (22%), home health care (14%), hospice (5%) or other health care settings, CMS says. About half of the hospital stays lasted for fewer than eight days, while 12% percent of the stays were at least 21 days.

The coronavirus appears to be affecting people of color, older adults and the poor in greater numbers, and that disparity also shows up in the Medicare data. CMS says COVID-19 hospitalization rates are especially high for:

- Black beneficiaries (1,263 hospitalizations per 100,000 beneficiaries)
- Hispanic beneficiaries (967 hospitalizations per 100,000 beneficiaries)
- Beneficiaries who are age 85 or older (1,003 hospitalizations per 100,000 beneficiaries)
- Beneficiaries who are age 75 to 84 (604 hospitalizations per 100,000 beneficiaries)
- Beneficiaries enrolled in both Medicare and Medicaid, the government insurance program for people with low incomes (1,374 hospitalizations per 100,000 beneficiaries)

Are You Making These 7 Hand-Washing Mistakes?

If you're committing any of these mistakes, your hands may not be as germ-free as you think.

Washing your hands is one of the best ways to stop the spread of germs, including the coronavirus. But are you doing it correctly?

Stopping the spread of germs is an important step each of us can take toward keeping our communities and our families safe. So, it's important to learn the correct technique for getting your hands squeaky clean.

If you're committing one of the following mistakes, your hands may not be as clean as you think. Here are hand-washing mistakes you may be making and how to correct them.

1. Using hand sanitizer when soap and water are available

Hand sanitizer is a convenient way to keep your hands clean. However, it should be just a backup if soap and water are available. While hand sanitizer can reduce how many germs you have on your hands, the Centers for Disease Control and Prevention (CDC) says it doesn't get rid of all types of germs.

Also, if your hands are visibly greasy or dirty, hand sanitizer may not be as effective. If you have harmful chemicals on your hands such as heavy metals and pesticides, hand sanitizer may not remove them.

2. Just rinsing

Make sure you are washing your hands with soap and water frequently throughout the day. Always wash them with soap and water after using the restroom and before eating.

Don't get lazy and skip the soap. According to the CDC, soap is more effective at removing germs, dirt and harmful chemicals from your skin than water alone.

If you don't have access to soap and water, you can use a hand sanitizer that contains at least 60% alcohol.

3. Using antibacterial soap

The CDC and U.S. Food and Drug Administration (FDA) recommend washing with regular soap and water to kill germs and prevent the spread of disease. There's no need to use antibacterial soap to wash your hands.

The FDA says there is not enough evidence that antibacterial soaps you find at the store are better at preventing the spread of illness than regular soap. In addition, one ingredient, triclosan, is being examined for its possible effect on health.

4. Washing your hands infrequently

While there's no need to be a germaphobe, washing your hands infrequently can leave you and those around you at risk. You want to wash your hands often with soap and water both to protect yourself and to prevent the spread of germs.

Warm water or cold, bar soap or liquid — all are fine, the CDC says.

The CDC recommends washing your hands particularly:

- During and after prepping food and before eating
 - Before and after caring for a sick person with vomiting and diarrhea, and before and after treating a wound or a cut
 - After using the toilet, helping a child use the toilet or changing a diaper
 - After coughing, sneezing or blowing your nose
 - After touching animals (they can spread disease), their food or their waste and after handling pet food and treats
- After touching trash

5. Washing your hands too quickly

Don't be in a hurry when washing your hands. Many people put soap on their hands, rub them together a few times, rinse and call them clean. This may remove some germs, but not enough to prevent the spread of disease.

The CDC recommends washing your hands for 15 to 30 seconds to remove germs. Worldwide, many countries and global organizations have adopted guidelines for washing hands for about 20 seconds.

Not sure how long 20 seconds of hand-washing is? Hum the "Happy Birthday" song twice all the way through while scrubbing.

(Continued on page 15)

(Continued from page 14)

6. Ignoring your fingernails

People often ignore their fingernails during hand-washing and focus on the palms of their hands. But your fingernails are great hiding places

for germs and bacteria. Make sure you clean well under your fingernails, especially if they are long.

7. Not drying your hands after washing

Wet hands make it easier to transfer germs, so it's important to dry them after washing. There is no consensus on the best way to dry your hands, but studies suggest that a clean towel and an air dryer are the best options.

These 5 Cleaning Products Kill the Coronavirus

1. Soap and Water

That's right: Plain ol' soap and water is not only the best way to wash your hands but also an effective way to disinfect other surfaces.

The friction that is created when you scrub with soap and water is enough to break the coronavirus's protective envelope, according to Consumer Reports. That means you must use some elbow grease along with the soap and water, though.

2. Bleach

Bleach is among the products that the CDC recommends for disinfection surfaces in households with suspected or confirmed cases of COVID-19—assuming the surface would not be damaged by bleach.

Bleach is effective against coronaviruses if its expiration date has not passed and it's diluted with water using one of these two ratios:

- 5 tablespoons (1/3 cup) of bleach per gallon of water
- 4 teaspoons of bleach per quart of water

3. Alcohol

The CDC also recommends rubbing alcohol that contains at least 70% alcohol.

Note that we're talking about rubbing alcohol itself, not alcohol-based hand sanitizer.

For cleansing your hands, a hand sanitizer with at least 60% alcohol is your next-best bet after soap and water. But to disinfect surfaces, you

need rubbing alcohol itself and a higher percentage—at least 70% alcohol.

4. Certain Clorox products

Also known as List N, this resource is dominated by professional products like those intended for use in the health care industry, but it does include some products intended for consumers.

Those consumer products include the following from Clorox:













- Clorox Disinfecting Wipes
- Clorox Clean-Up Cleaner + Bleach
- Clorox Disinfecting Bleach

5. Certain Lysol products

The EPA's list of qualified coronavirus disinfectants also includes numerous consumer products from Lysol, such as:

- Lysol Disinfectant Spray Lysol Multi-Surface Cleaner Pourable
- Lysol Multi-Purpose Cleaner with Hydrogen Peroxide
- Lysol Multi-Purpose Cleaner with Bleach
- Lysol Power Bathroom Cleaner
- Lysol Power Foam Bathroom Cleaner
- Lysol Power Toilet Bowl Cleaner

CORONAVIRUS vs. COLD vs. FLU vs. ALLERGIES

SYMPTOMS	COVID-19*	COLD	FLU	ALLERGIES
 Fever	Common (measured at 100 F or higher)	Rare	High (100-102 F), can last 3-4 days	No
 Headache	Sometimes	Rare	Intense	Sometimes
 General aches, pains	Sometimes	Slight	Common, often severe	No
 Fatigue, weakness	Sometimes	Slight	Common, often severe	Sometimes
 Extreme exhaustion	Sometimes (progresses slowly)	Never	Common (starts early)	No
 Stuffy nose	Rare	Common	Sometimes	Common
 Sneezing	Rare	Common	Sometimes	Common
 Sore throat	Rare	Common	Common	No
 Cough	Common	Mild to moderate	Common, can become severe	Sometimes
 Shortness of breath	In more serious infections	Rare	Rare	Common
 Runny nose	Rare	Common	Sometimes	Common
 Diarrhea	Sometimes	No	Sometimes**	No

December

7th Pearl Harbor Day
Rosa Parks Day
20th US Space Force Birthday
21st Winter Begins
25th Christmas

January

1st New Years Day
6th National Technology Day
9th Law Enforcement Appreciation Day
20th Martin Luther King, Jr. Day
29th National Puzzle Day



'Twas the Night Before Christmas; A Visit From St. Nicholas *Author: Clement Clarke Moore, 1779-1863 or Henry Livingston, Jr., 1748-1828*

'Twas the night before Christmas, when
all thro' the house
Not a creature was stirring, not even a mouse;
The stockings were hung by the chimney with care,
In hopes that St. Nicholas soon would be there;
The children were nestled all snug in their beds,
While visions of sugar-plums danc'd in their heads;
And Mama in her 'kerchief, and I in my cap,
Had just settled our brains for a long winter's nap —
When out on the lawn there arose such a clatter,
I sprang from the bed to see what was the matter.
Away to the window I flew like a flash,
Tore open the shutters and threw up the sash.

The moon on the breast of the new fallen snow
Gave the lustre of mid-day to objects below;
When, what to my wondering eyes should appear,
But a miniature sleigh, and eight tiny rein-deer,
With a little old driver, so lively and quick,
I knew in a moment it must be St. Nick.
More rapid than eagles his coursers they came,
And he whistled, and shouted, and called them by
name;
"Now! Dasher, now! Dancer, now! Prancer, and Vixen,
On! Comet, on! Cupid, on! Dunder and Blixem;
To the top of the porch! to the top of the wall!
Now dash away! dash away! dash away all!"
As dry leaves before the wild hurricane fly,

(Continued from page 16)

When they meet with an obstacle,
mount to the sky;
So up to the house-top the cours-
ers they flew,
With the sleigh full of Toys — and
St. Nicholas too:
And then in a twinkling, I heard on
the roof
The prancing and pawing of each
little hoof.
As I drew in my head, and was
turning around,
Down the chimney St. Nicholas
came with a bound:
He was dress'd all in fur, from his
head to his foot,
And his clothes were all tarnish'd
with ashes and soot;
A bundle of toys was flung on his
back,
And he look'd like a peddler just
opening his pack:
His eyes — how they twinkled! his

dimples how merry,
His cheeks were like roses, his
nose like a cherry;
His droll little mouth was drawn
up like a bow.
And the beard of his chin was as
white as the snow;
The stump of a pipe he held tight
in his teeth,
And the smoke it encircled his
head like a wreath.
He had a broad face, and a little
round belly
That shook when he laugh'd, like
a bowlful of jelly:
He was chubby and plump, a right
jolly old elf,
And I laugh'd when I saw him in
spite of myself;
A wink of his eye and a twist of his
head
Soon gave me to know I had noth-
ing to dread;
He spoke not a word, but went
straight to his work,

And fill'd all the stockings; then
turn'd with a jerk,
And laying his finger aside of his
nose
And giving a nod, up the chimney
he rose.
He sprung to his sleigh, to his
team gave a whistle,
And away they all flew, like the
down of a thistle:
But I heard him exclaim, ere he
drove out of sight —
"Happy Christmas to all, and to all
a good night."



New Years Resolutions-Matthew Mickunas

Resolutions for Kids:

- I won't give myself unsanctioned haircuts
- I'll color on paper and not on the walls
- I'll try to eat the occasional vegetable without bribery or cajoling
- I'll sleep in my bed all night
- I'll stop making my parents read me the same book every night

Resolutions for Adults:

- What happened to 2020???

- I will finish all the DIY projects I started and abandoned in 2020. Or, well, maybe just one of them
- I will be unashamed about the fact that I'm wearing pajamas in public
- I vow to communicate exclusively in memes

Resolutions for Senior Citizens:

- I resolve to learn how to play videogames
- I will eat dessert first
- I will make more friends

- I will not act my age
- I resolve to surprise my family

Resolutions for your Dog, Cat, or other Pet:

- I will become an internet celebrity
- I will take my human on more walks
- I will eat more
- I will learn how to change the TV channels
- I will finally catch and destroy that bird

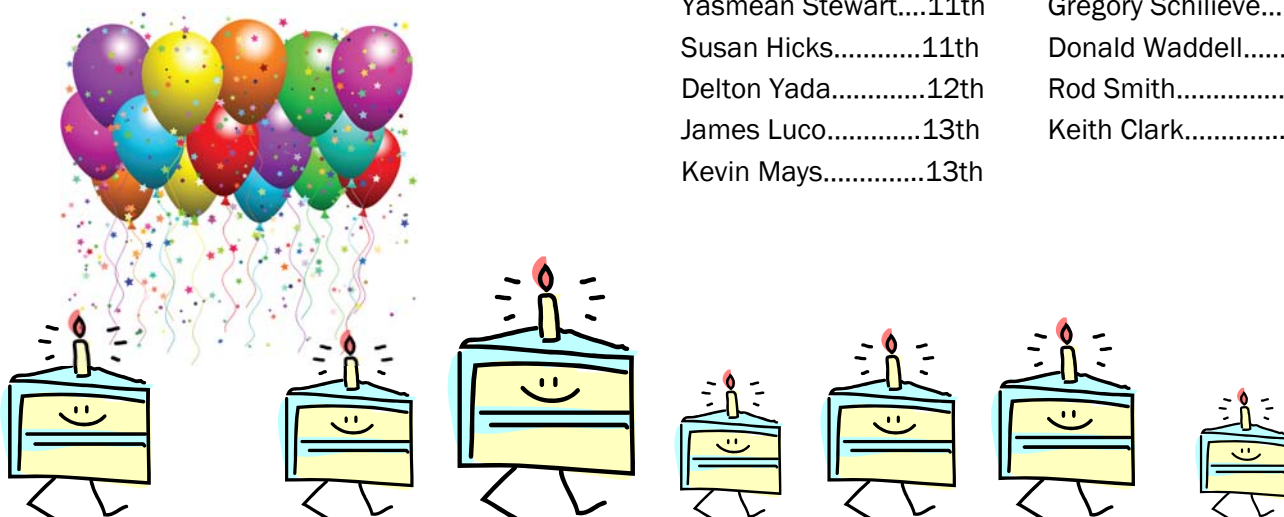
Happy Birthday!

December

Leo Perry.....3rd	Ross Ries.....21st
Jack Karnes.....5th	C. Arrow Top Knot...22nd
Terry McManus.....5th	Richard Merrick.....22nd
Craig Bollinger.....8th	William Knoppi.....23rd
Daniel Dudek.....15th	Roger VanBuren.....23rd
Sheri Pedersen.....16th	Gregory Choiniere...23rd
J. Whitlow.....17th	Kenneth West.....23rd
Kristina Sawycky..18th	Harry Parmer.....24th
C. Dotur.....19th	Tim Gardipee.....30th
Tracy Reddick.....20th	Dean Korn.....31st
Paul Chiaravalle...21st	

January

Lawrence Muckley....3rd	Jason Norton.....13th
Terry Lee.....3rd	Michael Partridge...13th
James Sternola.....3rd	Boyd Lawrence.....16th
Tracy Carroll.....3rd	Roger Sudberry.....16th
Anthony Davis.....4th	Donald Hansen.....17th
Barrie Muller.....5th	Richard Collier.....19th
John Bartle.....5th	Melvin Roberts.....20th
Charles Mitchell.....6th	Cathy Bourget.....20th
Anthony Lansing.....9th	James Prince.....22nd
Charles Gorr.....10th	Warren Collver.....23rd
Anthony Miller.....11th	Hermes Rodriquez..25th
David Lockett.....11th	Leonard Wagner.....26th
Sylvester Tucker.....11th	Keith Sekora.....27th
Yasmean Stewart....11th	Gregory Schilieve...27th
Susan Hicks.....11th	Donald Waddell.....29th
Delton Yada.....12th	Rod Smith.....30th
James Luco.....13th	Keith Clark.....30th
Kevin Mays.....13th	



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