From The President
Submitted by Blanche Smithers

HEART AWARENESS MONTH
February is Heart Awareness Month. Several ladies and one fellow attended A Woman's Heart event, a fundraiser for CRMC, at Leslie Town Center on February 2nd. We had 18 Mended Hearts members to attend. This was a night for everyone to relax and enjoy some heart healthy dining, beverages, silent auction, fashion show and heart education information with Dr. Matthew Sample speaking on TAVR, a new procedure to begin on February 21st at CRMC. You will be hearing more on this procedure a little later. Mended Hearts had two very nice baskets in the silent auction. Thanks to all who bid on these baskets to help the CRMC Foundation.

February is also the time to celebrate Valentine's Day on February 14. Don't forget your sweetheart.

UPCOMING EVENT
On July 3, 4, 5 & 6 the National Mended Hearts will have a convention at Opryland Hotel. Chapter 127 has been asked to help host this convention. Come on 127 members, we must let our light shine and let other chapters know who we are! If you would like to help, check with me.

NEW VEST
We are going to order new vest for all Mended Hearts accredited visitors. Please contact Richard or Glee Miller (261-2170) for sizing.

MENDED HEARTS WAITING ROOM
We are in the process of updating our MH waiting room. This is where family members come to wait to visit their loved one in the CVICU. These people are in a lot of stress and this room needs to be a bright cheerful place for them. Please see me (Blanche) if you can help or have ideas. Thank you in advance.

ELECTION
Election of officers will be coming up soon! Please think about how you can help serve.

NEXT MEETING
Our next meeting will be February 16th at 6:00 pm at CRMC education rooms 2, 3 & 4. Potluck will be served. Our speaker will be Dr. Mark Wathen. Dr. Wathen comes to us from the Electrophysiology Lab at CRMC. There was miscommunication about speaking last month. Sorry about that.

THOUGHT FOR THE DAY
Save your Achy breaky heart, take care of it, don't let it fall apart.
Bell Peppers

Before buying a bell pepper, flip it over. The ones with 4 bumps are females, which are full of seeds but sweeter and better for eating raw. The ones with 3 bumps are male, which are better for cooking.

Raspberry Chocolate Truffles

Ingredients:
- ½ cup oats
- ½ cup raw cashews
- ½ cup semi-frozen raspberries
- ½ tbsp. honey
- ½ tsp. vanilla extract
- 7 oz. dark chocolate
- Optional: chopped nuts

Directions:
1. In a food processor grind up the cashews and oats. Add the raspberries, honey and vanilla extract. Blend for a few minutes until you get a smooth pink mixture.
2. With your hands roll the mixture into rough small balls (it’s easier if your hands are wet, it won’t feel that sticky). Don’t try to make them perfect, you can shape the balls after. Place them on a parchment paper sheet and then leave them in the freezer for 15-20 minutes until they are firm.
3. Once they are firm and not sticky, take them out and roll them into balls.
4. Melt the chocolate, using a double boiler and dip each of the balls in it, covering it with the chocolate. Place them back on the parchment paper sheet and then leave them in the freezer for another 20-30 minutes or until the chocolate is completely dry and firm.

Notes:
It’s best to use frozen raspberries but leave them out for 15-20 minutes to soften before using them. This will reduce the freezing time after. Once you make the truffles, store in the fridge.

Avocado Truffle Chocolates

Ingredients:
- 1 ripe avocado, mashed
- ¾ cup dark chocolate, melted
- ¼ tsp. cinnamon
- Cocoa powder
- ½ tsp. vanilla extract

Directions:
1. Melt dark chocolate in a microwave-safe bowl.
2. In a separate bowl, mash avocado. When chocolate is smooth, pour into mashed avocado and stir together. Add in vanilla and cinnamon.
3. When combined and clump-free, place in refrigerator for about a half hour. When cooled and hardened, scoop into 10-12 balls and roll until smooth. Roll each ball in caco powder and serve. Place any remaining truffles in airtight container.
Spotlight On Timothy Powell, M.D.
Submitted by: Glee Miller

G Where were you born and do you have any siblings?
T “I was born in Memphis, TN and was adopted as a baby. My adoptive parents have one other child, a son.”

G What colleges did you attend?
T “Memphis State University, University of Tennessee Medical School, General Surgery training at U.T. Memphis, Heart Surgery training at Texas Heart Institute in Houston (with Dr. Denton Cooley).”

G Why did you elect cardiac surgery as your specialty?
T “I received a “pre-med” scholarship from MSU that was sponsored by a group of heart surgeons. I had the opportunity to spend time and work for those doctors and just got “hooked” on cardiac surgery.”

G Are you married and do you have children?
T “Yes, I have been married for 26 years in June. We have two girls, Brooke, who is a nursing student at TTU and Kendall who will be graduating from CHS and attending TTU on a soccer scholarship in the fall.”

G How hard is it to find time to spend with your family in your busy life?
T “Well, I am on call an average one out of three days/weekends so I get two out of three weekends to spend with family.”

G Favorite sports and teams you watch the most?
T “My favorite sports activity is watching Kendall play soccer and Brooke riding horses.”

G Do you like fast food or home cooking?
T “My wife likes to cook and we try to avoid too much fast food.”

G What is your favorite type of music and artist?
T “I like rock music and my all time favorite artist is U2.”

G What is your favorite holiday and why?
T “Thanksgiving. It is much less stressful than Christmas.”

G Where do you like to go on vacation and why?
T “Beach vacations - total relaxation.”

G How did you meet your wife?
T “In high school.”

G A piece of advice you would give to all the people who read this newsletter?
T “I want everyone to know how much we appreciate what Mended Hearts does for our patients. Enjoy every day!”

Spotlight is designed to feature various Mended Heart’s members and hospital staff.
Watch Out! You could be next!

To My Valentine
PagesMag0217

Romance aside, Valentine’s Day can be a frantic event, but lucrative for greeting card makers, florists, and restaurateurs. In 2017 your chances of being taken out to dinner are not very good since Feb. 14 falls on a Tuesday.

How long has all of this been going on? Historians trace the roots of Valentine’s Day back to the fertility festival of Lupercalia in Roman times. With spring in the offing, both birds and humans were beginning to be more affectionate, and celebrating Lupercalia was encouraged to make all unions fruitful.

The love notes started a few hundred years later, prompted by the good St. Valentine, and in centuries to follow, the custom spread throughout Europe and was carried to North America. Greeting card makers couldn’t be happier. After Christmas, people buy more Valentines than any other type of greeting card. Some 8.4 billion affectionate and funny cards are expected to be sold for Valentine’s Day 2017.

Flowers have long been a symbol of love and caring. They were especially handy a century ago when many lovers were illiterate and could not write a love note or read one.

For most florists, Valentine’s Day is the busiest and most hectic day of the year. Many sell thousands of roses, the most preferred Valentine flower. And air-freight companies go into high gear as well. Many flowers are grown in South America.

According to the numbers from 2016:
$1.7 billion: Amount that will be spent on candy, according to Financial Times.
$1.9 billion: Amount that will be spent on flowers.
$19.7 billion: Total amount that will be spent on Valentine’s Day gifts.
$681 million: Total that consumers will spend on their pets.

Happy Valentine’s Day, but remember as you open the card or smell the roses, the process has not been as simple as it would appear.

“It’s great to be alive - and to help others!”
How to Take Care of Yourself After a Heart Attack

The American Heart Association (2016) recommends these five steps to give you the best chance at recovery from a heart attack.

1. **Take any prescribed medication.**
   Follow the instructions of your doctor and take all medication as directed. Depending on the severity of heart damage and the underlying causes, you may be prescribed a range of medication. It is important to know what you are taking, what it does, how and when to take it, and any possible side effects.

2. **Continue to see your doctor**
   Attend any follow-up appointments scheduled with your doctor so that they can monitor your progress. Your doctor will continue to assess the effectiveness of your treatment.

3. **Complete cardiac rehabilitation**
   Cardiac rehabilitation is a medically supervised program aimed at making your recovery successful.

4. **Get support**
   Getting support from loved ones, health professionals and support groups can help reduce the emotional burden.

5. **Change your lifestyle**
   High blood pressure, high cholesterol, and diabetes are major risk factors of having a heart attack. Quit smoking. Eat a healthy diet. Stay active.

Progress Against Heart Disease Stalls:
Death Rate Rises

After decades of dramatic progress, the death rate for heart disease has begun to show a slight increase.

The death rate for heart disease has been declining during the past four decades due to public health campaigns, the introduction of medication to control high blood pressure and diabetes, and better medical care for people who suffer a heart attack, according to the Centers for Disease Control.

Until 2011, heart disease was set to be replaced by cancer as the number one killer in the U.S., but the decline in heart disease deaths slowed. Then, in 2015 the death rate from heart disease started rising, by 0.9 percent, keeping it as the leading cause of death in the US.

Heart disease wasn’t the only disease rising in 2015. Eight of the 10 leading causes of death increased.

These changes have had the most significant impact on life expectancy since 1997 with the overall death rate up 1.2 percent and life expectancy down to 78.8 years, according to the Wall Street Journal.

It is too early to tell whether this is just a temporary increase or the beginning of a more permanent change of direction, experts say.

Researchers from Kaiser Permanente, Northern California division of research, blame increasing levels of obesity for the rise in heart disease related deaths. The death rate for the elderly has remained relatively unchanged over time, but as obesity has increased, more middle-aged people are dying.

When compared with the early 1970s, levels of obesity have more than doubled for adults and tripled for teenagers. Obesity causes high blood pressure, high cholesterol and diabetes, all of which are major risk factors for heart disease.

Controlling the major risk factors is seen as the key to bringing heart disease related deaths back down. Cardiac rehabilitation, for people who have already suffered a heart attack, could also be used more effectively to reduce future heart-related deaths.
A Hospital Truth: If you are in the hospital under observation, you aren’t under Medicare

There is an assortment of reasons that you could stay at a hospital overnight and still not be covered under Medicare Part A.

According to Medicare.gov, suppose you go to the Emergency Room and the doctor sends you to the Intensive Care Unit so that you can be monitored closely. You stay the night, get better and go home the next day. That’s not covered under Medicare Part A. Your doctor’s services will be covered under Medicare Part B, but not your hospital expenses. Why? You haven’t been admitted, you have just been observed. Thus, you are an outpatient.

Even if you stay for two days, the full two days may not be covered if you stay in the hospital. You must be admitted both days to have inpatient status. If one day is for observation, Medicare Part A will not pay. Medical Part B will pay for your doctor’s services.

Outpatient surgery can sometimes result in a night in the hospital if, for example, your blood pressure is high. But if the doctor hasn’t specifically written an order to admit you, then Medicare Part A still classifies you as an outpatient and will not pay. Medicare Part B will pay for doctor and outpatient tests but not the bed.

In some cases, a doctor may admit you but the hospital can change your status to outpatient. In that situation, your doctor must agree and the hospital must tell you in writing that your status has changed. Medicare Part A pays nothing. Medicare Part B pays doctor and outpatient services.

What to Expect After Your Loved One Has a Heart Attack

Heart attacks don’t just take a physical toll; they also leave emotional wounds in both the survivor and the family.

It may require time for the whole family to recover emotionally from this life-threatening health event.

Family will notice physical changes in the survivor after release from the hospital. Your loved one may be tired and weak during the days directly following a heart attack. They will generally be restricted from strenuous exertion such as lifting heavy objects or sport.

Nonetheless, at some point, the doctor will advise the patient to return to physical activity. The patient must be encouraged in this, but families should avoid being overprotective.

Roughly one in four people experience anxiety after a heart attack, according to the Heart Foundation. This is usually short term and should go away once they have returned to their regular lifestyle. You can help your loved one deal with new emotions by encouraging them to share their feelings and speak to a medical professional if required.

Your loved one will be encouraged to make lifestyle changes to help prevent future heart disease. High blood pressure, high cholesterol, smoking and diabetes are all major risk factors for heart attack. You can help your loved one by starting a walking program together and fixing healthy meals.

Expect your loved one to be physically weaker and a bit blue following a heart attack. Do a lot of listening to help them sort out short-term emotional challenges, and encourage positive lifestyle changes.
Mended Hearts does not give medical advice. As always, consult your physician before making any changes in medication, food supplements, diets or lifestyle.

If you would like to receive the Mended Hearts newsletter by email please send your email address to: Angie Boles at aboles@crmchealth.org.

February 1-28   Heart Month
February 2        A Woman’s Heart Event
February 9        MH Board Meeting
February 11      Health Fair at CRMC
February 14      Valentine’s Day
February 16      MH Meeting
February 26      Master Singers Concert to help support MH Chapter 127

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Valentine’s Day Word Search Puzzle

Amour   Beau   Beloved   Candy   Cards   Champagne   Chocolate   Cupid
Darling   Dearest   Flowers   Gifts   Hearts   Love   Paramour   Passion
Poems   Romance   Romeo   Sweetheart   True love   Valentine

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Angie Boles at aboles@crmchealth.org.
Mended Hearts presented an AED to First United Methodist Church in Gainesboro, TN. Pictured left to right are Charles Jackson, AED Chair; Bill Mitchell, Harold Martin and Tim Dunavant, Minister.

Mended Hearts received a grant from UCEMC. From left to right are Randy Dodson, UCEMC Rep.; Blanche Smithers, Marie Thompson, Bill Thompson representing Mended Hearts.

One of many recipients from the Junior Women's Club.

John Willison at Findley Church of Christ was REALLY excited about getting an AED for his church.

JANUARY MEETING

A WOMEN’S HEART EVENT
To New Heart Patients

Our monthly newsletter, Heart News, will be sent to you for three months.

We hope that your recovery is progressing well and would like to invite you and your family to visit our monthly meetings. We have speakers and programs designed to be of interest to heart patients. As heart patients we know what you are experiencing and are available to answer non-medical questions.