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MATTERS OF THE Heart

Georgia's Family Caregiving Magazine

THIS ISSUE:

- SONS**
The Call, The Duty, The Joy.....Page 4
- Honor Your Father and Mother**
..... Page 8
- NITRIC OXIDE (NO) in Health and Disease** Page 10
- Moving Forward with Technology: Multi-Touch Screens Can Make Dining Out A Better Experience!**..... Page 12
- IV Hydration – What Is It, Do They Work, What Are The Risks And What Is The Cost?** Page 14
- Sacred Work of Family Caregiving** Page 17
- MATTERS OF THE HEART**
"The Answer my Friend Is Not Blowing In the Wind; The Answer, My Friend, is Within"! mph 08 Page 19
- Requiem for a Quilt** Page 20

SONS The Call, The Duty, The Joy

James Howard Lewis, II



SYNERGY HomeCare of Richmond, Virginia
 Matthew J. Enderle-Owner
 Duty Nurse-Lydia , Caregiver-Katina
 CEO-Beth Pollard (Not Pictured)

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Summer Greetings and Welcome to Matters of The Heart!

Shirley A. Morman
Editor-In-Chief
and Publisher

In this issue of Matters of The Heart you will read articles that address important topics and promote knowledge and understanding about subjects important in family caregiving, scientific research, health education, and family relationship. Your learning experience will shape your perspective on specific subject matter and inspire you to engage in relationship-based conversation that will help you to more closely relate to family and community and foster shared knowledge about matters important to you and the larger community as our articles give practical wisdom, knowledge and provide scientific understanding about health and family matters and issues America faces in the aging society in which we live, work and provide family care.

Thank you for sharing this issue with us. I hope that you will enjoy your Matters of The Heart Reading Experience!

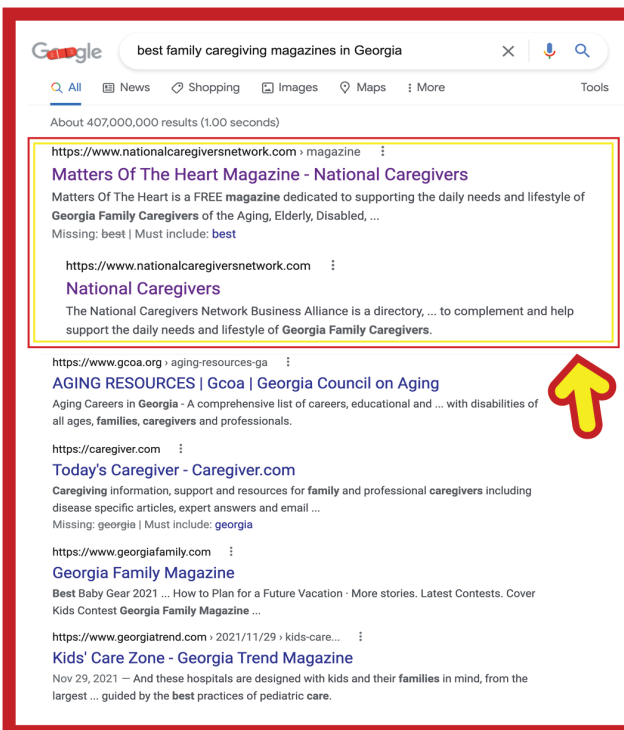
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Matters Of The Heart is a **FREE** magazine dedicated to supporting the daily needs and lifestyle of Georgia Family Caregivers of the Aging, Elderly, Disabled, Chronically Ill, Veteran, and End-of-Life Loved One. The magazine brings touching stories, helpful resources and information for caregivers and caregiving to help seniors/older adults and their families making informed decisions. We also advertise products and services to complement and help support the daily needs and lifestyle of Georgia Family Caregivers.

Matters Of The Heart is a magazine that is published quarterly within the 13 counties that comprise Middle Georgia and its surrounding areas.

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SONS

The Call, The Duty, The Joy

James Howard Lewis, II



Throughout the history of mankind, the birth of a male child, particularly, the "First Born" Son was necessary for the survival and perpetuation of a family, civilization and nation. Sons represent the strength and honor of a civilization and nation's ability to Reproduce itself, Protect itself, Advance itself, and sustain Relevance in the civilization with which it exists.

In the ancient cultures of the world, it was the first-born son that received the "Lion's Share" of the family fortunes, and it was his responsibility to guide, direct, protect and advance the family into

the future, generation by generation. The First-Born Son was a "reflection" of the physical likeness of the father; interestingly, the Bible records this pattern as we see God the Father and HIS only Begotten Son, Jesus the Christ displayed in like imagery. One of the most quoted scriptures in the Bible is John 3:16 . . . **"For God so loved the world that he gave His Only begotten son, that whoever believes in Him should not perish but have eternal life."** Additionally, Jesus' disciples asked him on one occasion, "show us the Father?" to which Jesus replied (John 14: 8-11) " . . . **He who has seen Me has seen the Father . . .**" **The Son is a direct Reflection of his Father!** Furthermore, the Bible shares in 2 Corinthians 5:19 " . . . **that God was IN Christ reconciling the world back unto Himself . . .**"

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Therefore, The **CALL OF SONSHIP** is revealed in the "Reflection" of the Father. To illustrate this concept further, we shared earlier that God the Father was IN Christ the Son, reconciling the world. The Heart and Reflection of the Father is manifest in this Biblical scripture . . . **"How God anointed Jesus of Nazareth with the Holy Spirit and with power, who went about doing good and healing all who were oppressed by the devil, for God was with Him."** The Son is doing the GOOD he witnessed from his Father.

Wherefore, we start the Journey of James Howard Lewis, II the eldest Son of Jim and Thelma Lewis from this point. The heart and reflection of the father is revealed in the sons: The Earthly Father and The Heavenly Father, understanding this principle, "A Good Tree bears Good Fruit, and a Bad Tree bears BAD Fruit" . . . I didn't realize the CALL of Sonship until I had left home on my life's journey, well into adulthood, and my father became ill, struggling with the effects of Diabetes Type 2 with limited medical insurance and prescription benefits. Late spring of 1991, dad had a heart attack that placed him in the IC unit of our hometown in California; we rushed home, Prayed and by God's Grace he survived. It was during this Trial that I became Acquainted with the "CALL of Sonship," taking ALL the family business packed in a suitcase, we set up the Household command center here in Washington, DC (Mom was frazzled as she came from a generation of wives where the man did everything . . . she was clueless!). For the next few years, the well-being of the family was my responsibility, from paying the bills, moving my parents into a home they could afford, and stabilizing/comforting them during this season. One year later, dad passed away from a massive heart attack (Mom called me in DC as dad lay on the bathroom floor, ambulance on route). Years passed on, Mom learned how to manage her affairs and became quite efficient. In 2001, she was diagnosed with Breast cancer and had a partial Mastectomy; and God's GRACE continued!

In 2013, I received a call from the Elders of our United Methodist Church, alerting me to challenges mom was having living alone, and that it was probably time to move her closer to myself in DC



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or Evelyn, the younger of my two sisters residing in Los Angeles, CA about 3-hours away from our hometown in Ridgecrest, CA. My parents migrated there from DC in 1962.

AGAIN, the next installment of adulthood, the **DUTY OF SONSHIP** commenced, taking FULL Responsibility for an aging Parent and following the Biblical mandate listed in 1 Timothy 5:4 . . . ***“But if any widow has children or grandchildren, let them first learn to show piety at home and repay their parents; for this is good and acceptable before God.”***

My parents had been a vital part of the Ridgecrest-China Lake California community for over 50+ years, both of them serving in various capacities, and receiving numerous awards and accommodations. Now, finally in 2014, Mom was heading back to Washington, DC where she and my father married in 1956 and started a Family together.

Now back on her old stomping grounds, life began to stabilize again, as she was reunited with her brother Henry and Sister Blanche with a host of nieces and nephews and relatives on both sides of the aisle. Mom has now been back in DC and under my direct Care for just short of 10-Years, as she arrived on Her Birthday, September 3, 2014. During this tenure there have been many events and milestones that have shaped our mother and Son relationship.

In 2018, Mom became permanently wheelchair bound by Rheumatoid Arthritis and began living in various assisted living homes. She currently resides at Charis Home Assisted Living in southwest Baltimore City, MD and has been there since December 2021. In 2020, the Covid-19 Pandemic arrived changing how the world interacts with one another; yet mom celebrated her 90th Birthday party in style with a Drive-By outdoor party. Unfortunately, she lost her youngest daughter to Leukemia in November 2020, but on May 16, 2021 she was Water Baptized and fully submerged in our church baptismal pool at Christ Kingdom Church in District Heights, MD by non-other than her 1st Born Minister Son, which was a real honor and significant milestone because she was wheelchair bound, yet didn't allow this handicap to keep her

from connecting with The Lord, definitely one of the highlights of my Pastoral Career! Which brings us to the third component of Sonship . . . **THE JOY OF SONSHIP!**

My mother and I have had numerous experiences over the years, and looking back, each of them has been unique and special from hanging out on the 4th of July at the Baltimore Harbor, to sharing a once in a lifetime family dinner with ALL four of her children in 2017 (The last time all four of us were alive and together) to numerous doctors' appointments, Family devotionals and Holy communion, and of course, the Beauty Salon. The JOY of Sonship has been the opportunity to even have my mother alive at 94, with the BONUS that she is in her RIGHT Mind! We have won many battles together, from IRS income garnishments, to pushing through Veterans Aid & Assistance funding, to locating emergency housing in the wake of state assisted living closures; rides to church, emergency dental surgery and creation of new partials, and the list goes on!

The most recent rendezvous was taking a trip to Mom's childhood home of Richmond, VA in mid-November of 2023. Mom had been asking me for the past two years to take her to Richmond. When she mentioned it again early November 2023, God whispered to me . . . "You'd better Go NOW before you lose the opportunity" . . . so we sacrificed and made it happen, WITH the Help of ALMIGHTY GOD! . . . We knew we would need a Caretaker in the Richmond area, but everywhere we looked, they were asking for a king's ransom, Except SYNERGY HOMECARE! Operations Manager, Matt Ederle, saw the vision and got the CEO, Beth Pollard to sign off on a package that made the whole trip possible, and they had just the RIGHT Caregiver, Ms. Katina Willoughby; she and Mom hit it off from the Jump! Synergy was Excellent! As they collaborated with the owner (Ms. Yanique Oluwafemi) of Charis Home Assisted Living in Baltimore, MD (where mom resides) to make sure all the medications and paperwork were in order, confirmed by Synergy's Duty Nurse Ms. Lydia. The other part of the equation was our hotel accommodations, and the customer service rep with Embassy Suites Hilton helped me secure the appropriate room and rates for our visit. EVERYTHING was coming together! We were able

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to track down the church mom had grown up in, Wesley Memorial United Methodist Church, still in Richmond, but not downtown any longer. Pastor Hunter and the congregation warmly received us. We visited all the places mom lived and patronized as a child which included: the famed Hippodrome Theatre in the Jackson Ward District (most of the areas mom played in or lived in were now renovated and owned by either the Virginia Commonwealth University or the Richmond Convention Center) and the Virginia Black History Museum. We had a fabulous experience at the Virginia State Capitol that included an unexpected "Private" Tour of the original and current Senate and State Representative legislative Chamber. Overall, it was a phenomenal experience!

I believe that the bond that has been created between a mother and her son, particularly, the First-Born child, who is a son, is the result of many factors; primarily that both mother and son Respect and Love God! Mom made it easy to serve her because she began early in our phase of the "Duty of Sonship" to give me the position as "Head of the Family." Whenever I would come home to visit after the death of my father, she would offer me the BEST room in the house. I allowed this because I knew it was her way of showing Respect, Honor and Appreciation for accepting responsibility for her (this is what Jesus did for his mother Mary while hanging on the cross before actually dying - John 19:26). When she actually moved to DC and lived under my roof, she vowed that she would NOT be a Problem to me, but rather do her best to submit herself in the Fear of God . . . and She has KEPT Her WORD! Therefore, since both of us Love God and each other, we have kept the charge and responsibilities in our respective seasons: Mom while I was a child and dependent upon her for my living through age 20, and myself when I became a full-grown man and she was in need as a new widow and now an elderly widow. The Word of God says " . . . and when Your mother is old and grey headed, do not forsake her (Proverbs 23:22 and Psalms 71:18). And YES, there is a "Special" Bond with the FIRST BORN! Even God required Israel to "Set-Aside" the First Born male of Man and Beast, eventually naming the tribe and the sons of Levi as His appointed priest. The

journey can be Hard! No Doubt! Caregiving is not for the faint of Heart, but it is the way of Mankind! . . . Honoring our Parents, particularly, when they cannot do for themselves, IS NOT AN OPTION! . . . IT IS A COMMAND! Yet it comes with God's Promise . . . "Honor Your Father and Mother, which is the first commandment with Promise: that it may go well with you, and you may live long on the earth" (Ephesians 6:2-3 and Exodus 20:12).

In CONCLUSION, If a Man will Honor and Love God, remember his own human frailty and Do unto others as He would desire others to DO to him (The Golden Rule), then he or she will have audience with God Almighty, who is merciful, generous and kind . . . HE will not forget YOUR Labor nor Sacrifices of Faith, Faithfulness, Patience and Love.

Some have accused me of being a "Mama's Boy", But I serve my mother in Honor of my Earthly Father, the late and incomparable JIM LEWIS (James H. Lewis, I) and of course my Heavenly Father and His Son, God The Father, Jesus The Christ and The Precious Holy Spirit! . . . ALL that I am, and ever Hope to Be? . . . I OWE to GOD!

James Howard Lewis, II

Son and Servant

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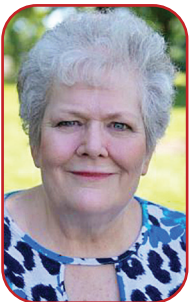
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Honor Your Father and Mother

Cheryl J. Wilson, M.S.
Advocacy for Seniors
 advocacy4seniors.com



Children are commanded to honor their father and mother; however, as parents age, it can become harder to find ways to do this. When our parents age, they get illnesses that can make it more difficult, not just to honor them, but to be around them. Sometimes, without an illness a parent can become very angry, demanding, and unpleasant to be with. So, how can you honor someone who does not seem to want you around?



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Why would a parent who had always loved their children now push them away by saying or doing things that make a child not want to be around them? As a senior advocate, I see this scenario far too often, which is tragic for both the child and the parent. In most situations, I see two reasons for this behavior from a parent:

1. The parent has an illness/disease like dementia but there could be other health conditions. When a parent gets dementia, it can progress to a point where the parent doesn't recognize the child. When parents are not able to process the fact that you are their child, they may think that you have some alternative motive for trying to get close to them.
2. Growing older is not an easy journey. Your parents taught you much of what you know and shaped you into who you are today. Parents are a child's go-to person; they are the ones a child goes to when they are hurt or when they need guidance. Now, this individual has aged. The parents may be unable to continue to guide their child, or even worse, the child has grown up and has a family of his/her own and doesn't feel the need or want the parents' advice/help. This once vibrant person's opinion is no longer needed or welcomed in their children's lives. They don't visit as often, sometimes not at all, which means the parent/senior has little to no access to the grandchildren. How do you think that would make you feel? Seniors may become bitter or angry with the people they love the most, their children, because they feel they have been removed from their lives.

How can children show their parents that they love and respect them in either of these two situations? Most importantly, visit them as often as possible and bring your family. Show them that they are an important part of your life. If your parent has cognitive issues, still involve them in your life and the lives of your family. Even if the person has some cognitive issues, you can still ask their opinion; it doesn't mean you have to do everything they suggest.

Seniors can reach the point where they feel that they are not valued and have no purpose in life. If their family is not involved in their lives, this validates those feelings. When a person feels that no one

values them, they can lose hope. When people lose hope regardless of their age, they are in a dangerous situation.

A child who does not live close to their parents can still make it a priority to pick up the phone and call them regularly. They can share their struggles and successes and their families with their parents and ask for their opinions on how they should move forward. Parents may not have all the answers, but they can listen and be a good person to brainstorm ideas with. Think about it this way: your parents have lived a long time and have experienced and seen many things in their lifetime. If you take the time to learn from your parents, then you may save yourself from making the same mistakes they did, giving you more time to explore new opportunities! Yes, your parent may have slowed down and may take longer to process information, but they are still your parents and can be a valuable resource to you if you allow them to have an active role in your life.

Most parents do not want more stuff from their children; they want more time with them. I found one gift that I got for my mom several years ago that has transformed her life. I got her a digital picture frame. This way, when there are family events or milestones with her grandchildren/great-grandchildren, we can take a picture and immediately send it to her digital picture frame. This allows her to experience these events in real-time even though she cannot physically attend. My mom often tells me how much she loves her digital picture frame. These can be purchased at many stores or online.

Note: Some situations can make it difficult to be with a parent due to past history. In cases like this, sometimes the best thing you can do is ensure that there are other people in their community who can step in and visit/advocate for the best possible outcome for the parent.

Cheryl J. Wilson, M.S.

Advocacy 4 Seniors

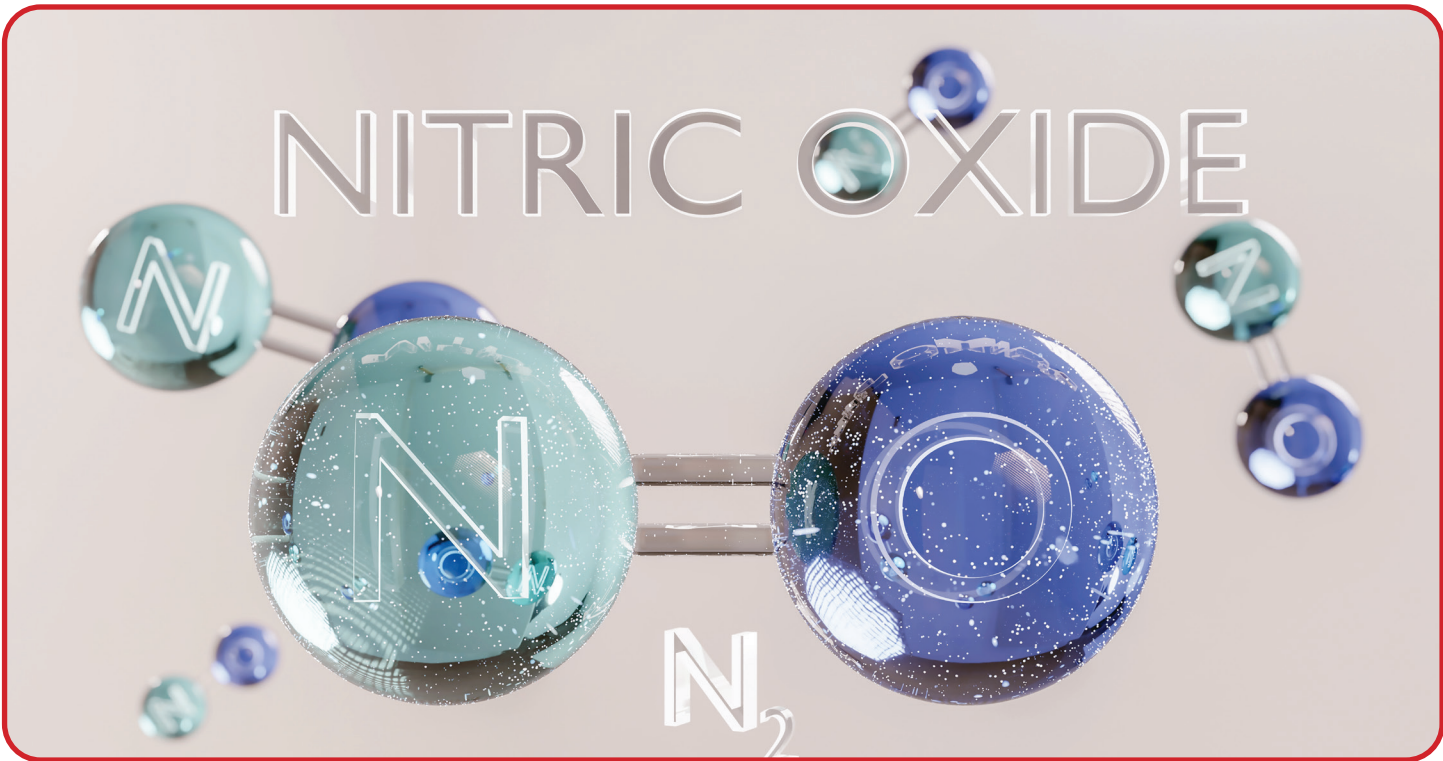
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NITRIC OXIDE (NO) in Health and Disease

Doc Wilson, Ph.D.



Nitric Oxide (molecular structure: NO) is a very important chemical (a gas) in fluids of the human body. It is produced mainly by endothelial cells called macrophages – cells that line the inner walls of blood vessels.

The reason that one's "nitric oxide status" is important is that both low levels and high levels are associated with a broad range of potential harmful effects, including:

- ◆ increased risk of blood clots
- ◆ increased risk of high blood levels of glucose (blood sugar)
- ◆ increased risk of becoming a Type 2 Diabetic and insulin resistant
- ◆ increased risk of getting many of the so-called autoimmune diseases
- ◆ increased risk of having a heart attack, a stroke, and/or dementia,
- ◆ including Alzheimer's Disease and premature aging
- ◆ increased risk of cardiovascular disease, including strokes
- ◆ increased risk of contracting cancer
- ◆ increased risk of migraines
- ◆ increased risk of damage to mitochondria in the cells of one's body
- ◆ increased risk of damage to one's DNA
- ◆ increased risk of becoming overweight or obese
- ◆ increased risk of various psychiatric disorders

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- ◆ poor wound healing ability
 - ◆ increased inflammation throughout one's body, including
 - ◆ neuroinflammation and neurodegenerative diseases
 - ◆ impaired insulin secretion
 - ◆ impairment of cell proliferation
 - ◆ increased risk of damage to one's kidneys
 - ◆ decreased functioning of one's immune system
- etc.

Fortunately, the above unhealthy potential effects can be minimized, or the risks for some effects may be reduced to very low levels, by adopting healthy lifestyle choices with respect to

- ◆ Nutrition: Be sure to eat plenty of fruits and vegetables and minimize the intake of meats – especially processed meats and mammal meat (for example, beef, bison, pork, squirrel, rabbit, etc.). Lentils and beans are healthier choices for protein.
- ◆ Exercise: Schedule time each week for both cardio exercise and strength-building exercise: at least 2 to 3 workouts that include both cardio exercise and strength-building exercise.
- ◆ Sleep: Keep a regular sleep schedule that provides a sufficient amount of deep sleep each night (most people need 7 to 9 hours of sleep).
- ◆ Stress: Keep stress levels to a minimum, for example, by walking in nature, watching funny TV shows, meditating, etc.

The four bulleted paragraphs above are essentially what are known as "lifestyle choices" because they are examples of things that we consciously choose to do with our lives.

Do You Choose Health or Unhealth?

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Moving Forward with Technology: Multi-Touch Screens Can Make Dining Out A Better Experience!

Lisa R. Washington



Mobile technology has become increasingly popular in recent times. Touch-based devices have become ubiquitous in our daily lives. We have access to touch-based TVs, monitors, laptops, and tablets which allow users to interact with applications more naturally and intuitively. Thanks to touch and multi-touch technology, users can physically engage with an application, making the interaction process more user-

friendly. Nowadays, people use their smartphones to perform various tasks such as booking ride services, shopping for clothes and electronics, ordering movie and concert tickets, and more.

Restaurants are also adopting mobile technology to handle common food industry issues, boost their profits, and offer better experiences for customers and staff. One such solution is a tablet point of sale (POS), which provides numerous advantages to both restaurant owners and customers.

Several of the benefits are increased revenue, better customer experiences, and more secure payment security. Tablet POS systems can help restaurants increase their revenue by serving more customers in less time. With a tablet POS system, servers can take orders directly at the table, without the need to take notes and walk to a POS terminal to enter them. Orders are sent to the kitchen faster, and there are fewer mistakes made by staff entering orders. Traditionally, settling a check requires servers to drop off the check at the table, wait for customers to get out a payment card, walk the card to a POS terminal

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to initiate the transaction, return with the card and receipt so the customer can provide the tip amount, and then return to the POS terminal to complete the transaction. This process is time-consuming and inefficient. With a tablet POS solution that includes pay-at-the-table technology, customers can pay their checks in a single step, streamlining the process. Customers are happier with reduced wait times, which can lead to higher tips. The pre-calculated tip amounts based on percentages can also encourage higher tipping. With tablet POS systems, staff can spend more time interacting with customers and ensuring they are satisfied with their dining experiences, all while serving more customers and generating more revenue for the restaurant because they can carry the POS systems throughout the restaurant whereas a mouse-driven system would require the use of a monitor stationed at a permanent point in the restaurant. Customers will also not have to wait long as the orders can be taken instantly, which will add to the customer's delight.

Improving the customers' experiences can have a significant impact on businesses. When customers have a better experience, they are more likely to return, leave better tips, and recommend the business to others. An easy way to enhance a customer's perception of the business is by using pay-at-the-table technology. This technology allows customers to pay their bills through a tablet POS system, which offers the same payment options as a stationary POS system. Customers can split their checks, pay with multiple cards, and have more control over how and when they pay.

Card fraud and identity theft have become more prevalent, particularly in the case of card-not-present transactions. Even when paying in person, customers may feel uneasy about handing over their card to someone they don't know. Fortunately, the use of tablet technology enables customers to process their payments themselves, ensuring that their card never leaves their sight. Additionally,

advancements in technology have led to the implementation of tokenization and encryption, providing an extra layer of protection for payment processing. By adopting these measures, restaurants can reassure their customers that the business is committed to keeping the customers payment data safe.

With a traditional wired-in point-of-sale (POS) system, the restaurant is limited to taking orders only from the front counter. But by switching to a tablet-based POS, such as Toast, restaurants can process orders from anywhere in the restaurant. This means that if the line is getting too long, restaurants can simply take out the tablet and start taking orders from customers in the line, thus breaking it up. By doing this, restaurants can get orders into the kitchen much faster, which significantly reduces customer wait times and improves the ability to handle sudden rushes of customers. With these advantages in mind, tablet POS systems are the next level of technology for restaurants, adding mobility and improving the benefits of traditional POS systems.

Moving forward with technology,

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IV Hydration – What Is It, Do They Work, What Are The Risks And What Is The Cost?

Donna D. Bellamy, Pharm.D.



As caregivers, the need for a boost from balancing work-life balance regularly becomes a familiar feeling. Celebrities and professional athletes have been utilizing intravenous or IV Hydration for years for various reasons due to their hectic day and night schedules. We all have heard of celebrities like Michael Jackson that would even get Propofol, a medication that requires intravenous infusion just to get restful sleep.

Though IV infusions are not recommended to that extreme, they are growing in usefulness in the outpatient settings.

What is IV Hydration? Do they really work? What are the risks? What is the cost? The answer to these questions may vary depending on who you refer to. There have been several studies in the hospital setting for IV Hydrations, however the studies and FDA approval of the outpatient formulations are limited.

What is IV Hydration? IV (short for intravenous) is a procedure in which intravenous solution is administered through a tube attached to a needle, inserted into a small vein usually in the arm or hand. The solution contains a small amount of salt (sodium chloride), sugar (dextrose) and/or vitamins and minerals. The fluids are absorbed directly into the intravascular fluid compartment of the bloodstream bypassing the digestive system. This allows quicker relief of symptoms and repletion of vitamin or mineral deficiencies than oral route.

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Does IV Hydration work? Depending on who you ask, intravenous hydration should be given only if ordered by a certified prescribing provider in a facility, outpatient or home health setting by a trained nurse or healthcare professional when the person 1. is unable to tolerate oral fluids or foods that require use of the gastrointestinal tract for digestion, 2. is experiencing malabsorption of oral supplementation, 3. has had an illness that caused loss of fluid or blood, due to vomiting, infection, over exertion of exercise or heat exhaustion, hyperglycemia, medications causing vitamin/mineral deficiencies, hypercalcemia, cancer, postural fast heart rate and other acute medical situations. Recently, however, intravenous clinics, mobile units are showing up in cities, Medi-spas, gyms, offices, and even clubs. A few of the most common claims for IV Hydration are to: 1. Improve immunity, 2. Detox the body, 3. Help lose weight, 4. Clear your complexion, 5. Get rid of pain, 6. Increase fitness performance and recovery, 7. Improve focus and cognitive function and 8. replete body from dehydration.

Because vitamins and supplements are seldom studied in large randomized controlled trials, the health outcomes studies are limited. Most of the premix IV solutions are not FDA approved. The regulatory requirements for these clinics are limited. Even with the limited data, I will review a few of the most used IV Hydration Infusions. The Myers' Cocktail that contains Vitamins B, C, Calcium and Magnesium trademarked by John Myers, MD has shown effectiveness for Fibromyalgia on a 34 adults randomized, double-blind, placebo controlled pilot study but to be no different than normal saline infusion. It is known for acute asthma, migraines, chronic fatigue syndrome, acute muscle spasm, upper respiratory infections, chronic sinusitis, seasonal allergic rhinitis, cardiovascular disease, and other disorders. IV Magnesium has been shown to be more beneficial in acute asthma than using nebulizer. It has also been shown to be beneficial in reducing migraines, mild to moderate tension-type headaches and muscle spasm. IV Vitamin C for cancer or immune boosting effect has not proven to be effective in most studies although studies are conflicting. For athletic performance, severe deficiencies in Folate,

Vitamin B12, Iron and Magnesium (serum levels may not reflect the whole-body magnesium status as only 0.8% of Magnesium is found in the blood, 0.3% in the serum with the rest being found in soft tissues, muscles and bones) have shown when repleted to improve endurance performance. Vitamin D has shown extensive data in improving health in the young with Vitamin D deficiency, kidney patients and older adults. Intravenous bags for alcoholics that included Multivitamin, Thiamine, Folic Acid, and Magnesium have been proven to be ineffective in the hospital setting and are ordered to tailor to specific needs of the patient. In Sickle Cell Anemia, Folic Acid and L-Glutathione have promising studies to support use to reduce inflammation, coagulopathy and blood cells.

Many of the benefits of IV Hydration are unproven at this time when compared to drinking fluids (water, hydration drinks), taking generic vitamins and other over the counter supplements from health food stores and an adequate food and beverage diet. The IV fluids last for 2-3 hours before the body excretes the excess fluids, and the vitamins and minerals may last for days or even months when properly replenished and the underlying cause of deficiency is addressed with food or supplements. To replete the deficiencies may require several IV infusions, especially if the underlying cause cannot be corrected due to chronic medical condition.

What are the risks? In the hospital setting, patients are monitored regularly with close monitoring and labs for allergic reaction, blood clots, skin necrosis, infection, abscess development and reversal of illness after infusions. Some of these occurrences may not occur for 3 or more days after insertion of the IV line. The facility that is providing IV Hydrations should have emergency protocols in place if the unexpected occurs. Overall, the medical risks are low. Precautions should be given to the amount of fluid, rate of fluid and type of fluid based on the person's underlying medical conditions and lab values. Use of too much fluid in a kidney or heart failure patients with decreased cardiac output may cause decreased sodium (Hyponatremia), fluid overload (Hypervolemia) due to the abnormal function of the Antidiuretic Hormone in the kidney or Hyperchloremic

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Acidosis (pH <7.35). This can in turn cause Edema, decreased organ blood flow, and death. It is important that the facility has trained professionals for IV-line insertion and a medical director who provides guidance for the appropriate fluids and additives specific to the patient's medical condition. Special care should be given to frail elderly or cardiac failure patient (fluid overload), diabetes patient (quick change in electrolytes), head injury patient (glucose can increase intracranial pressure), kidney and liver patient (slower excretion of fat soluble and water soluble vitamins), pregnant patient (precautions to mom and baby for vitamin and electrolyte changes), burn patient (vast amount of fluids required), and iron overload patient (Vitamin C will increase the absorption of iron).

When an intravenous line is started and fluids, vitamins and minerals via compound are infused, a physician or medical director should be the ordering professional. A medical director must have the title of medical doctor (MD) or Doctor of Osteopathy (DO). In some states nurse practitioners may be medical directors without a MD or DO physician. In any clinic that you attend, the person should have a provider to patient relationship and if severe or chronic fluid, vitamin or mineral deficiencies are uncovered, a primary care provider should be obtained or referred for maintenance comprehensive health check-ups.

What is the cost? The financial costs are high for IV Hydration in comparison to the less costly oral replacement therapies. In the older adult on a fixed budget, a doctor ordered treatment plan should be the first option even with the selection of supplements and foods. However, it can be administered in the comfort of the home for the less mobile patient and reduction in germs going into facilities. Transportation and time must also be considered when deciding on IV Hydration as it usually requires for each sitting an average of 1-2 hours for infusion not including the IV line start. Lastly the cost of IV Hydration is usually \$150 - \$800 without insurance. So cash payment is usually required unless a home health provider is involved. When labs are ordered, they may be ordered through the person's primary care doctor's practice or outside lab facility. The cost of labs can usually be billed to

insurance with a reasonable diagnosis or treatment screening. Lab costs without insurance may cost from \$100 – \$500.

In my opinion if appropriate clinical shared patient-provider decisions are made, IV Hydration can be an excellent supplement to preventive and oral supplemental care. Gold standard research is needed to objectively confirm patient specific positive outcomes. For more information on medications and vitamin and mineral deficiencies, healthcare professionals may go to Nutrient Depletion Checker at www.trchealthcare.com.

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Sacred Work of Family Caregiving

**Dr. Gloria J. Barrett, Master Divinity, Bachelor of Science Nursing,
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*But the Fruit of the Spirit is Love, Joy,
 Peace, Forbearance, Kindness, Goodness,
 Faithfulness, Gentleness, and Self-Control.*
 Galatians 5: 22-23 New International Version



Family Caregivers play an important role in the life of loved ones with debilitating diseases that require round-the-clock assistance. It is in this environment that one might experience the gifts of spiritual and self-care practices. Spiritual practices are specific activities you do that deepen your relationship with the sacred and world around you. Self-care is the practice one engages in daily for physical, emotional, and spiritual (body, mind, spirit) well-being. A study by the National Alliance for Caregiving (NAC) and AARP reveals the number of Family Caregivers in the United States has increased to 9.5 million from

2015 to 2020. Family Caregivers encompass more than one in five Americans. The study also reveals that Family Caregivers are in worse health compared to five years ago. The information from this study is a clarion call for public and private partnerships to support Family Caregivers in their sacred work.

As a Family Caregiver for my mother, I was privileged to share in the most precious moments of life. The daily care of bathing, dressing, preparing meals, laundry, doctor appointments, beauty shop visits, performed with love for her, strengthened the bonds of our relationship. Love deepened through our time in religious gatherings and countless games of playing dominoes. This is love, the spiritual practice that grows in the life of Family Caregivers in their sacred work.

Family Caregiving may provide an opportunity for intergenerational modeling of how to show compassion and loving-kindness. Research by Ashley

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McGuire reveals that intergenerational interaction between children and older adults has numerous benefits for both parties. Young children who participate in intergenerational care demonstrate more advanced motor and cognitive skills, as well as higher developmental scores compared to their non-intergenerational peers.

Watching my 10- year- old granddaughter playing dominoes with her 88-year-old great grandmother filled my heart with joy. This joy would not have happened if Family Caregiving was not being performed in our home. Joy, a spiritual encounter, flows from the sacred work of Family Caregivers.

Everyone wants to know that their loved ones are in the best environment as they live with debilitating disease. Research reveals Family Caregivers report a sense of giving back to someone who has cared for them in the past. This act of kindness can be fulfilling and brings peace to the heart of the Family Caregiver. Being a Family Caregiver is a part of my heritage. My mother and I cared for her father and mother, my grandparents in their home when they could no longer care for themselves. My grandmother supported the care of her mother, my great grandmother as well. This legacy of Family Caregiving demonstrates faithfulness to honor parents. The sacred bond between family and faith is fulfilled in Family Caregiving.

Research reveals that Family Caregiving can be challenging, especially when one person is responsible for all the care. Caregiving has become more complex than in the past. It can take an emotional toll while observing one's love one decline and balancing life. Stress, anxiety and depression may be experienced. This is where daily practice of self-care helps to support the sacred work of Family Caregiving. In *Sacred Self-Care*, Dr. Chaniqua Walker-Barnes identifies daily practices for nurturing one's whole self. Some spiritual self-care practices one might include

daily: prayer, time in nature, deep breathing, meditation, express gratitude, healthy foods, exercise, practice mindfulness and self-control. If you feel overwhelmed in this sacred work of Family Caregiving, do not hesitate to seek professional care. It is important for caregivers to rest.

Rest is essential for the body to be restored. Respite provides Family Caregivers with a break from the continuous care of your loved one. There are several options for respite care: In-Home Care, Respite Day Care and Residential Respite Care. You may ask family or friends to come and sit with your loved one to give you a few hours of respite. Your medical provider or social agency may provide a list of respite providers in your area.

Family Caregiving is sacred work that draws one closer to the Divine and your loved one. May you experience Love, Peace, Forbearance, Kindness, Goodness, Faithfulness, Gentleness, and Self-Control during this season of Caregiving.

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MATTERS OF THE HEART

“The Answer my Friend Is Not Blowing In the Wind; The Answer, My Friend, is Within”! mph 08

Myldred P. Hill, Ed.D.



Among Favorite recorded Biblical Scripture has become words found in the Book of Ecclesiastes 3:1: “To everything there is a season, and a time to every purpose under the heaven...” The verses continue with commas and semicolons, without a period until verse 8. These punctuation marks demonstrate a relationship between words which indicate how a piece of written text should be read and consequently, understood. Likewise, as with Caregiving, *Relationships* between givers and receivers of care accentuate the “quality” of life experiences.

Continuing my role as Contributing Writer for Matters of The Heart, I have decided to share Personal Mantras adopted over the past 3-4 decades, Mantra #2 being: “I’m Blessed and So Are You!” This Mantra continues to lighten the normal stress and strain accompanying the many and necessary routine duties and responsibilities which can take its toll over a period of time. Whether the decision to take on this responsibility is provoked by Love, duty, or imposed by circumstances; an attitude of “Excellence in All Things” I find personally to be the standard of performance, regardless of circumstances.

The decision to seek a Rehabilitation Center, Nursing home, Personal Care or Senior Care Facility as the means to provide day to day care for a loved one is indeed a life changing relationship for both the giver and receiver of care. This population is increasing in numbers and demand for professional standards and engagements is essential.

To enter the role as Caregiver without specific rules of engagement is likened to applying for and enrolling in studies at the higher education level without a clue regarding commitment, focus, and all other morals, as well as Spiritual values. Without a doubt, declaring success prior to engagement is a must!

I Am, I Can, I Must, I Shall, as well as I Will succeed and celebrate the Victory are stars, stripes, and banners claimed at the end of each and every day of giving and receiving care.

The first declaration “I Am” is at the heart and core of this shared information. The Mantra “I Am Blessed, and So Are You! Its origin is Spiritual; adopted along the way as I found the need to claim Victory throughout a career of challenges, ups, downs, uncertainties, doubts, and fears.

Claiming The Victory was all about knowing I had to face each challenge as awares and unawares came with warnings, or without a clue.

It is so easy to usurp authority when the field is uneven- the Caregiver is in a position of advantage when another is dependent on another, whether 10% or 100%. The dynamics change. Power and Ego can take on personalities of their own, permitted or not. Humanity is just what it is- a human and flawed character. A Source “Greater than” should be the Guiding Wand- the Heart, not the mind/head. Experience will teach that it is from the “Heart” that Blessings flow! To make things interesting and challenging is that both the Caregiver and Receiver are inextricably interwoven! Both are operating from the “heart” of matter labeled, good, bad, or indifferent.

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As part of my Spiritual Walk, I have Prayed, read, studied, and meditated over a span of years to learn more and more about finding ways to live above rather than beneath circumstances. I was drawn deeper and deeper into a walk with my Source of strength, deliverance, overcoming, and victory.

I have grown and become convinced that it is in my realm of power to determine that "I Am Blessed and So Is the One Receiving whatever care I am able to provide". Perhaps, more importantly, is conveying that as the Giver of Care I am Blessed to give and provide services and I should also be encouraged to know that "So Is He, She, or They!"

It is important to realize that it IS a Blessing to be Trusted with the Care of another. So many Scriptures recorded in the New Testament especially, are teachings of The Master to Love Him as We Love ourselves, and others. Further, that as we Do for others, it is done to Him.

This, I do believe is a "Matter of The Heart!"

It is My Prayer that as the Circle of Care and Receiving broadens and expands; the Attitude of Heart Matters become more the Rule than exception.

Myldred P. Hill, Ed.D.



Requiem For A Quilt

by Frenchy J. Hodges

My love affair with quilts began with my sister, Soon (as we called her, while the community called her Miss Soon, but her name was Larue) who, when she retired as Lunchroom Manager from East Laurens High School in 1988, had a Hobby House built behind her home and thus began to quilt, which I guess was something she had long dreamed of doing. On one of my periodic trips from north Georgia to visit her, I asked to see her work. She had about a dozen quilts neatly folded and resting on the overhead shelves in the rustic hobby house. I was transported just viewing her output! What did she plan to do with all these quilts!!

"Nothing, really", she says. "I will give some away to the nursing home or to anyone who needs or wants one."

I was amazed. As we spent the next hour or so reviewing her output I began to develop a finer appreciation for her finished product. Most of her quilts were finished by *tying*, a method that uses twine through the layers and which is then tied off on the top whereas, she only had one or two that were actually *quilted*.

In a fleeting moment of inspiration I propositioned her to let me take a half dozen or so of her quilts with me and offer them for sale at my church, Mt. Zion AME Church in Decatur, GA. Thus it was I demonstrated to her a happy and productive outcome for a hobby that gave her as a quilter a lot of pleasure.

This is how my love affair with quilts began. I learned the rudiments of quilting from my sister Soon and my consciousness and admiration of the enterprise of quilting was fulfilled with my creation of about a dozen quilts in 1991 which I both sold and/or gave as gifts.

Through the literature and the national explosion of interest in quilts and quilting I learned of other quilters and their stories of becoming and creating beauty out of scraps and pieces of fabric. In my broad exploration of the literature I met Faith Ringgold and her first story quilt, *Tar Beach*. I met Nora Ezell, a queen of story quilts, in a feature article in the *Atlanta Journal and Constitution* and convinced a friend, Shirley Karangu, to travel with me to Eutaw, Alabama to look for Ms. Ezell only to find she was not there, but had moved to Talladega.

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Many will find her account riveting in: *My Quilts and Me: The Diary of an American Quilter*. I met many of the African American master quilters in the pages of *A Communion of the Spirits* by Roland L. Freeman. I met some true grassroots quilters in the pages of *The Quilts of Gees Bend* featuring denim as the focus fabric in the making of quilts. All of this to say this was my insightful introduction to the world of the quilt and an appreciation for the quilter as true artist.

But my ultimate affiliation with quilts happened quite innocently one spring morning when a cousin of mine was purging and downsizing and as an afterthought called my attention to a quilt she had which she was earmarking for donation to Goodwill. Would I perhaps be interested in it for the Heritage Room Collection I had established at the Old Millville High School, here in Laurens County. Without hesitation, I told her I most certainly would like to add that quilt to my Heritage Collection.

That quilt joined my display at the old Millville school in about 2009 or 2010. It was a true antique with age marks apparent when observed closely, but it was, I felt, a great example depicting the work of unknown African American quilters. My Cousin had acquired the quilt as part of her mother's estate, however that was all I knew about the quilt.

In about the summer of 2015 my cousin and two other friends visited me here in my country home for a few days and I planned a trip to the Old Millville School that we might all visit my Heritage Room which featured not only my African mask collection and two vintage treadle sewing machines, but also the quilt I had acquired. The trip was uneventful. The artifacts in my Heritage Room were not overly exciting or exceptional and we reviewed them as small parts of our large story.

We were driving on our way home back across the county when my cousin casually asked me if I knew the story of the quilt.

I was nonplussed! "You mean that quilt has a story?" I said.

"Yes," she said. "I wondered if I had ever told it to you." I immediately pulled to the shoulder of the road. "Wait!" I said. "I have to call the caretaker to meet us back at the school. I have to go back and get that quilt."

I don't know how to explain it, but I felt so compelled to possess and safeguard the quilt as artifact upon being informed that there was a story attendant to it. I had to go get it and take it with me. I had to keep it close by. And so I secured the quilt and brought it home even as my cousin told me the part of its story she knew.

One day in the late forties or early fifties a young wife we'll identify as "M" noticed a quilt in her philandering husband's vehicle. She clandestinely removed the quilt from her husband's vehicle when he was either asleep or inebriated or both. At first, she secreted the quilt in her house, but before long she made arrangements for a Cousin we'll call "A" to keep it for her. "A" kept the quilt secure for more than 40 years and the husband died. "A" then offered the quilt back to "M", the widow who had initially removed it from her husband's vehicle. "M" did not want the quilt and left its disposal to the discretion of "A". More years passed and "A" died. In settling "A"'s estate, her daughter again offered the quilt back to "M". Again "M" rejected it.

More years passed and "M" died. Thus, the daughter of "A", a third party was left holding the "infamous heirloom". It was at this juncture that I acquired the quilt for my Heritage Room and placed it in this room as an artifact of history.

A great compassion for the quilt washed over me. I mourned its exile to someone's closet or trunk never to adorn a bed and keep a body warm or serve as a sofa throw to decorate and be admired. It had lived an aborted life, a closeted life, an unappreciated life.

And so the desire to restore it to its rightful place in the considered life of a quilt was strong on me. Once I recovered it from the Heritage Room I had it laundered by a cleaner known for care in cleaning. And, although it is an antique, I chose not to treat it as an artifact that must

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not be touched. It had spent its life not being touched. I placed it in my Great Room and made it accessible to my family. We lie on it, we cover with it, we display it to be admired. Further, I have made its story accessible to the ages as I have written a poem recapping its story. I even gave the quilt a name which sets it apart: *Ms. Maudie's Quilt*.

All of its story is a *matter of the heart!*



Miss Maudie's Quilt by Frenchy J. Hodges

(This poem is dedicated to the quilt pictured above. It is a unique quilt. It has a unique story. To protect the identity of the last person who owned it before it came into my possession and thus the identity of the persons in the story of the quilt, I have taken poetic license and named it "**Miss Maudie's Quilt**" for in truth, we do not know the identity of the original owner, but this poem is a conjecture of the truth, as it might have been.)

I'm going huntin', he said
 One starry autumn night
 And he took down the gun
 And drove away to the woods
 In that old truck he loved

Stayed gone half the night
 Him and that dog,
 and didn't catch a thing,
 he said, when came home
 Empty-handed--so it seemed

She may have been going
 To the house out there
 Or to the chicken-coop
 Or to the pig-pen
 When a piece of color called to her
 From Honey's truck

There she spied Maudie's quilt
 Rolled into a neat and tidy bundle
 Resting on the truck's bare
 buck-board floor

The quilt definitely drew her
 Attention to itself, the bold and
 Delicate beauty of it,
 but what was Maudie's quilt
 doing in Honey's Truck

Puzzled she picked it up
 And was about to smell it
 When Honey called out to her
 Sweetheart, he yelled from inside

Desperate to avoid discovery
 She hastened to the chickens'
 Coop, threw the quilt in a corner
 And calmly began gathering her
 Thoughts and her eggs
 In the midst of clucking hens

Maudie's quilt
In Honey's truck
 And like lightning
 The truth of it struck her

For forty years until the day
 He died, that quilt was her
 Reckoning rod, a truth that stood
 Guard between them—
 Held them hostage for forty years
 A truth never owned or
 Disowned—never spoken of
 Even until the day he died

A beautiful nine-star
 Eight-point patchwork quilt
 Remnant of two relationships
 Kept hidden all those years in a
 Cousin's treasure chest until the
 Day that Sweetheart herself died

A quilt that never again warmed
 Anyone, was never used from the
 Day Sweetheart found it lying on
 The bare buckboard floor
 Of Honey's ol'knock-about truck

A beautiful hand-stitched
 Patch-Work, too impossible for
 Her everyday use, yet not hers
 Either, to throw away

Help me somebody to
 Tell the pain-filled story
 Sing the redemption song for
 A quilt that kept nobody warm
 Ever again

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