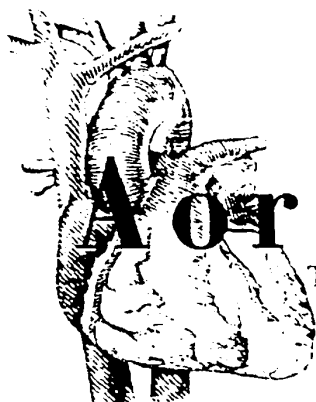


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Aorta Reporter

The Mended Hearts, Inc. Atlanta Chapter #81

Founded 1951

Chartered 1973

It's Great to be Alive—and to Help Others

Dedicated to the Memory of Dr. Paul Ambery

CAROL ZEPH, M.S., Ed.S., L.P.C.

**Director, Counseling Center
Hillside United Methodist Church
Woodstock, GA**

“Stress/Depression Management”

Tuesday, March 18, 2008

7:30 – 9:00 p.m.

SAINT JOSEPH’S HOSPITAL AUDITORIUM (ONE FLOOR BELOW LOBBY LEVEL)

FREE PARKING AVAILABLE

Drive past the hospital front entrance and watch for the Cancer Center parking deck on the left opposite the main entrance to the Cancer Center. Ring the button at the parking deck entrance and tell the attendant who answers that you are attending the Mended Hearts meeting and the gate will be opened.

**Remember — If you’re reading this, you’re invited!!!
(and we do it all for you; please come, learn and meet many other MENDED HEARTS)**

PRESIDENT'S NOTES

DO YOU HEAR WHAT I HEAR?

Do you realize that the most important health journey that a person can make is only approximately 18 inches long? It is the distance between a person's head and a person's heart.

Most of us have two health journeys in our lifetime. One, when we were dependent upon others to take care of us when we were much younger; and the second is when something goes medically wrong with us...sadly to say, not any sooner. I am a living example of my own prose.

But do we really listen to the doctor or do we just nod our heads in an affirmative style and forget what they told us and go about our own ways?

Remember, choices have consequences. We may see our choice being good for ourselves, where others see it as being threatening to us.

The time has come when you and I have to not only listen better, but also do a better job taking care of ourselves. What do you say?

Doug Steingraber

CHAPTER NOTES

The good news for this month is that about the time you get to read this, Spring will be right around the corner. And yes, the year is just MARCHing right along, if you know what I mean.

I am pleased to report that at our January meeting special recognition was given to our own John Friese for his dedicated service to Mended Hearts over many years and in many ways. For instance, after having bypass surgery at Emory Hospital on Christmas Day in 1980, he joined Mended Hearts in 1981. He has served as co-vice president, two terms as president, and served as a director on the board for over a dozen years. He was the Aorta Reporter editor for about four years, and has been a visitor at Emory for some 25 years. He has been our coordinator of visiting at Emory for at least a dozen years. Last but not least, John has been a consistent volunteer at the American Heart Association...always answering the call to help stuff and prepare materials and working at the Atlanta Heart Walks year after year! Thanks, John, for all you do. We're proud of you and appreciative of all your selfless acts. Folks, just think what our chapter could do if we had more people like John around!

While on the subject of helping at the AHA, I want to pass along our heartfelt thanks to the following group of Mended Hearts who volunteered there recently: Max and Lucille Feinstein, Herb and Dixie Jardine, Daryl

Thompson, Doug and Sara Steingraber, and George and Jackie Waterhouse.

We're passing on our congratulations to Milton Klein in Maryland, former vice president of our chapter who, in January, celebrated his 25th anniversary of valve surgery at Emory. There's another guy who, with Alma, was always at the forefront helping in so many ways in the chapter and at the AHA. We miss you guys!

My closing remarks always turn to a few words of wisdom or humorous ones from my favorite South Jersey Devil, and with their permission of course:

1. An old drunkard was brought into court. Just as the proceedings were about to begin, there was a commotion in the back of the room. The judge pounded the gavel and shouted, "Order, order."

The old drunkard immediately responded, "Thank you, Your Honor, I'll have a gin and tonic."

2. Message on an answering machine: "I am not available to take your call right now, but thank you for caring enough to call. I'm making some changes in my life. Please leave a message after the beep. If I do not return your call, you are one of the changes."

3. A bend in the road is not the end of the road.

4. Minds are like parachutes...they function only when open.

5. The happiness of your life depends on the quality of your thoughts.

I'll look forward to seeing you here again next month, God willing. In the meantime, take good care of your heart so it can take good care of you. And one last thought: become a visitor, a volunteer—live our motto!

George Waterhouse

After putting her grandchildren to bed for a sleepover, a grandmother washed off her makeup, changed into old slacks and a droopy blouse, and began to color her hair.

As she heard the children getting more and more rambunctious, her patience grew thin. At last she stormed into their room, putting them back to bed with stern warnings. As she left the room, she heard the three-year-old say in a trembling voice, "Who was THAT?"

CHAPTER 81 DONOR COUPON

DONOR'S NAME _____

AMOUNT \$ _____

**Mail to: Mended Hearts, Chapter 81
John Crosbie, Treasurer
3401 Winter Wood Court
Marietta, GA 30062**

WELCOME NEW MEMBERS

To receive the most benefit from your membership, make it *YOUR* Mended Hearts chapter.

**Ralph & Helen Hull*
**Joyce L. Bowen (Marietta)*

HOSPITAL VISITING REPORT

During the month of January 2008, we recorded 173 hospital and telephone/internet visits at Emory University Hospital, Crawford Long Hospital, Saint Joseph's Hospital, Atlanta Medical Center, Piedmont Hospital, Grady Hospital, Southern Regional, and WellStar Kennestone Hospital.

LET'S VISIT AWHILE

We had a great reaccreditation meeting with excellent participation. We were happy to see that Duncan McLaren has joined Rick Fisher and Jan Harris as an Internet visitor. I want to thank all of our visitors for the work they do.

This month we highlight Dixie Jardine in our "Know Your Visitors" section.

Dixie had her heart event in June of 1980, augmented by a pacemaker in 2006.

She became a visitor in 1992 and visits at Saint Joseph's and Crawford Long Hospitals. In her former life, she was a social worker placing children for adoption. She is married to Herb and is the mother of seven and the grandmother of 13. She has served the chapter as treasurer and is currently our "caring" person; however, she has received practically no requests to send get-well cards to ailing members.

Let's not forget that we do have someone who would be very glad to spread a little sunshine around.

Herb Jardine

WANTED!

Information on sick or deceased members so that the appropriate get-well or sympathy card can be sent. Please contact Dixie Jardine at 770-973-5816.

WANTED

We expect to be helping prepare materials for upcoming American Heart Association events.

If you would be willing to volunteer in the office with other Mended Hearts for a few hours when needed, please call Max Feinstein at 404-355-7771.

When the need arises, Max will call to see if you are available to help.

SATELLITE MEETING INFO.....

Marietta Satellite

First Tuesday of the month – 7 p.m.
Kennestone Hospital Rehab Center (behind the hospital)
Call Doug Steingraber at 770-926-0157

Piedmont Satellite

First Thursday of the month – 5:30 p.m.
Call Erin Driscoll at 404-605-3176

WellStar Cobb Hospital – Rehab Center

First Thursday of the month – 7 p.m.
Call Marie Thomas-Stanley at 770-732-4129

Southern Regional Medical Center Satellite
will not meet until further notice.

WELLSTAR KENNESTONE HOSPITAL GUEST SPEAKER

Nydia Bladuell, M.D., Cardiologist
Topic: Women And Heart Disease

AMERICAN HEART ASSOCIATION CONNECTIONS

LDL AND HDL CHOLESTEROL: WHAT'S BAD AND WHAT'S GOOD?

Cholesterol can't dissolve in the blood. It has to be transported to and from the cells by carriers called lipoproteins. Low-density lipoprotein, or LDL, is known as "bad" cholesterol. High-density lipoprotein, or HDL, is known as "good" cholesterol. These two types of lipids, along with triglycerides and Lp(a) cholesterol, make up your total cholesterol count, which can be determined through a blood test.

LDL (Bad) Cholesterol

When too much LDL (bad) cholesterol circulates in the blood, it can slowly build up in the inner walls of the arteries that feed the heart and brain. Together with other substances, it can form plaque, a thick, hard deposit that can narrow the arteries and make them less flexible. This condition is known as atherosclerosis. If a clot forms and blocks a narrowed artery, heart attack or stroke can result.

HDL (Good) Cholesterol

About one-fourth to one-third of blood cholesterol is carried by high-density lipoprotein (HDL). HDL cholesterol is known as "good" cholesterol because high levels of HDL seem to protect against heart attack. Low levels of HDL (less than 40 mg/dL) also increase the risk of heart disease. Medical experts think that HDL tends to carry cholesterol away from the arteries and back to the liver, where it's passed from the body. Some experts believe that HDL removes excess cholesterol from arterial plaque, thus slowing its buildup.

Triglycerides

Triglyceride is a form of fat made in the body. Elevated triglycerides can be due to overweight/obesity, physical inactivity, cigarette smoking, excess alcohol consumption, and a diet very high in carbohydrates (60 percent of total calories or more). People with high triglycerides often have a high total cholesterol level, including a high LDL (bad) level and a low HDL (good) level. Many people with heart disease and/or diabetes also have high triglyceride levels.

Lp(a) Cholesterol

Lp(a) is a genetic variation of LDL (bad) cholesterol. A high level of Lp(a) is a significant risk factor for the premature development of fatty deposits in arteries. Lp(a) isn't fully understood, but it may interact with substances found in artery walls and contribute to the buildup of fatty deposits.

Lifestyle Changes to Improve Your Cholesterol

As part of a complete prevention and treatment program for managing your cholesterol and lowering your risk of heart disease and stroke, your doctor may suggest that you make some lifestyle changes. Regardless of whether your plan includes drug therapy, you can do a number of things every day that can positively impact your cholesterol—and your overall health:

♥ Eat a heart-healthy diet

A diet rich in vegetables, fruits, whole grains, high-fiber foods, lean meats and poultry, fish at least twice a week, and fat-free or 1 percent dairy products—and low in saturated and trans fats and cholesterol—is a delicious way to help your cholesterol levels.

♥ Get moving

Enjoy at least 30 minutes of physical activity more days than not. Walk, bike, swim, jog, dance—whatever you love to do, do it.

♥ Avoid tobacco smoke

If you smoke, your cholesterol level is one more good reason to quit. If you don't smoke, avoid exposure to secondhand smoke.

Tips for Success

Following a healthy diet and lifestyle can give you the edge in the fight against heart disease and stroke—take an active part. Follow your doctor's advice carefully, and if you don't understand something, ask. Let your doctor be your coach in combating heart disease and stroke. It's your health. It's your heart.

*Sherelle Waters, AHA
Marketing Communications Coordinator*

A man was in his front yard mowing grass when his attractive blond female neighbor came out of her house and went straight to the mailbox. She opened it, slammed it shut, and stormed back into the house.



A little later she came out of her house again, went to the mailbox, and again opened it and slammed it shut. Angrily, back into the house she went.

As the man was getting ready to edge the lawn, here she came out again, marched to the mailbox, opened it, and then slammed it shut harder than ever.

Puzzled by her actions, the man asked her, "Is something wrong?"

She replied, "There certainly is! My stupid computer keeps saying, 'You've got mail.'"

MEDICINE & TECHNOLOGY

FDA APPROVES DRUG-ELUTING STENT FOR CLOGGED HEART ARTERIES

The U.S. Food and Drug Administration recently approved the Endeavor Zotarolimus-Eluting Coronary Stent for use in treating patients with narrowed coronary arteries, the blood vessels supplying the heart.

The Endeavor is the first drug-eluting stent approved since 2004 and the first since FDA convened its Circulatory System Devices Panel in 2006 to discuss evidence of the rare risk of blood clots occurring in patients who receive drug-eluting stents.

Manufactured by Medtronic, Inc., of Minneapolis, the device is a tiny metal mesh tube coated with a small amount of a new drug, zotarolimus, developed only for use on a stent. It is crimped around a balloon and delivered to the narrowed section of the coronary artery via a long thin catheter during a procedure known as an angioplasty. Once the stent is positioned, the balloon is inflated, expanding into the vessel wall where it will remain in place, acting as a mechanical scaffold to keep the artery open.

Slow release of zotarolimus over time prevents the artery from re-narrowing when new tissue begins to form. This process, known as restenosis, can eventually require a repeat angioplasty.

“The Endeavor drug-eluting stent provides cardiologists with another option for treating the one million patients who undergo an angioplasty procedure every year to open their clogged coronary arteries,” said Daniel Schultz, M.D., director of the Center for Devices and Radiological Health. “This important approval is the result of a substantial amount of clinical evidence and a careful review by both FDA and its advisory committee.”

Medtronic provided data from seven clinical trials in its marketing application. Studies showed that the Endeavor significantly reduced the number of major coronary events—heart attack, cardiac death and repeat procedures to re-open the artery—compared to a bare-metal stent (a stent without a drug coating). It also cut the restenosis rate by about half.

Imaging studies on a subset of patients indicated that the Endeavor’s restenosis rate was higher than what is seen in currently marketed drug-eluting stents. However, the Endeavor had a similar number of coronary events when compared to one of these stents.

The number of adverse events experienced by patients implanted with the Endeavor stent was similar to those that occurred in patients implanted with bare-metal stents and existing drug-eluting stents.

Based on recent concerns over the rare but serious side effect of blood clots or stent thrombosis, FDA asked

Medtronic to combine data from all Endeavor trials to determine how often this happened at various points in time following stent implantation. The stent thrombosis rate was 0.4 percent at one year and 0.5 percent at two years, a rate similar to that for bare-metal stents. To reduce such clotting risk, patients receiving the Endeavor will need to take blood-thinning medication for at least six months after implantation and should consider continuing this regimen for 12 months if they are not at an increased risk for bleeding complications.

The safety and effectiveness of the Endeavor stent in smaller diameter arteries or for longer blockages requiring more than two stents has not been studied and there has been no evaluation of the stent’s safety and effectiveness in patients who are having an acute heart attack, patients who had previous intravascular radiation treatment, or patients who have their blockage in a bypass graft, in the left main coronary artery, or in more than one vessel.

Patients who are allergic to zotarolimus or to cobalt, nickel, chromium, or molybdenum should not receive an Endeavor stent. Caution is also recommended for people who have had recent cardiac surgery and for women who are nursing or who may be pregnant.

Medtronic will continue to follow patients enrolled in six of the Endeavor trials for five years. Additionally, the company will conduct a 2,000-patient U.S. post-approval study, which will be combined with 3,300 patients from a study conducted outside the United States, to assess the long-term safety and effectiveness of the Endeavor stent and to look for rare adverse events such as stent thrombosis. Medtronic will also collect clinical data to identify the optimal duration of blood-thinning medication.

Before drug-eluting stents were available, about 15 percent to 30 percent of patients experienced restenosis within a year, requiring a repeat angioplasty. This number has dropped to 10 percent of patients since drug-eluting stents entered the U.S. market in 2003.

ONGOING REVIEW OF CHOLESTEROL DRUG VYTORIN

FDA issued an Early Communication on January 25, 2008, announcing that it will conduct a review of Merck/Schering Plough's recently completed study on Vytorin (ezetimibe/simvastatin) once the agency receives the final results. This Early Communication is based on information that FDA has not yet fully evaluated.

Merck/Schering Plough Pharmaceuticals issued a press release on January 14, 2008, reporting that there was no significant difference found between Vytorin and simvastatin alone in the amount of atherosclerotic plaque in the inner walls of the carotid (neck) arteries, despite greater lowering of bad cholesterol (LDL).

FDA has not received a final study report and at this time, it is not clear why the lower levels of LDL cholesterol in patients who took Vytorin did not lead to lesser amounts of plaque, compared to patients treated with simvastatin alone.

Until FDA reviews the study data, patients are advised to talk with their health care providers if they have questions about the study or the cholesterol-lowering drug. FDA's Early Communication reinforces its commitment to inform the public about its ongoing drug reviews.

FDA will provide updates as new information becomes available.

For More Information

FDA Statement

www.fda.gov/bbs/topics/NEWS/2008/NEW01784.html

Full Text of the Early Communication about Ongoing Review of Merck/Schering Plough's Study

www.fda.gov/cder/drug/early_comm/ezetimibe_simvastatin.htm

*FDA News and Consumer Update
Contributed by Daryl Thompson, FDA (ret.)*

HEART HEALTH

"Anger blows out the lamp of the mind."

William James

People continue to question whether or not hostility really is linked to the development and worsening of heart disease. There are hundreds of studies offering unwavering support for this relationship—still, there are studies suggesting the connection is weak, if there at all. What should we believe?

Whatever you read or hear, a "common sense" approach is prudent as you sort out contradictory information. If you were to read an article saying there's no such link between anger and heart disease—you might give yourself permission to be as angry as you like, whenever you like. But you know the truth. You know how physically depleted you feel following a bout of intense fury.

Expressions such as "my blood was boiling," "blind rage," or "that left a bitter taste in my mouth," say a lot about what a surge of anger does to the body. You don't need a scientific study to tell you whether or not anger takes a toll. Clenched fists, tight jaw, heart pumping, a bellyache, and obsessive, warlike thoughts, tell the story.

Vigilant; to be on guard, on the lookout, to have an "eagle eye." A hostile person certainly is watchful as they attempt to ward off anticipated threat—social, financial, physical, or otherwise. A hostile person is waiting for the next someone who will take advantage or demean them in some way. The cynicism sets the stage, the anger and

aggression are right there, ready to spring into action as needed.

If you know what it is you're most guarded about—what "bad" treatment you anticipate and from whom—you might begin to view others with less certainty...that is, less certainty about others' negative intentions. There may be some who may not have your best interest at heart, while others will be cooperative and supportive. It isn't all people, under all circumstances, all of the time, who will be difficult. It's more like some of the people, under some circumstances, some of the time.

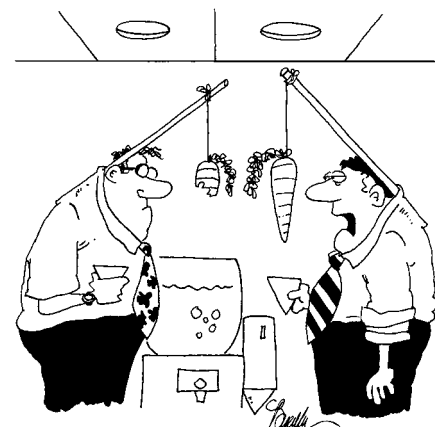
If you believe that when you call the doctor's office about the error on your bill, you'll be dismissed or given a "hard time," the slow, steady "boil" will begin as you think about the call—before it's been made. At that moment you might say to yourself...

"This could go badly—or it could go well. I can't predict the office manager's reaction. Whatever happens, I plan to remain in charge of myself, calm and competent. This will be resolved. Getting angry isn't helpful, and it's too hard on my heart! In my lifetime, I'll probably make many, many calls to straighten things out. Don't make this situation more important than it is."

Avoid over-generalizing—and life isn't all "black-and-white." Avoid jumping to conclusions. Don't decide that the driver in the car next to you is "out to get" you. There's no evidence to back that up. You have no idea what's going on in that person's life in that minute, on that day.

With a small change in expectations, with more open-mindedness, the world you create may look more agreeable and less threatening. Now, with your changed expectations, when you make that phone call, notice the way your body feels.

The Goodheart.com



"The new diet not working out too good, huh, Frank?"

PAGES Editorial Service, Inc.

NUTRITION NOTES

GO GREEN FOR ST. PATRICK'S DAY

St. Patrick's Day for most Americans means wearing green and shamrocks. Why not be festive with food by adding heart-healthy traditional Irish greens to your meal?

Green fruits and vegetables have lots of heart-healthy benefits. They are high in fiber and phytochemicals, which may help, protect against certain cancers. They help maintain vision health and keep bones and teeth strong. Some green fruits and vegetables include avocados, green grapes, honeydew melons, kiwi fruit, broccoli, Brussels sprouts, green beans, green cabbage, leafy greens, lettuce, peas, green pepper, and spinach.

Try incorporating these foods by putting them in your favorite sandwiches, soups, casseroles, and salads. For St. Patty's Day, go green and try this heart-healthy traditional Irish recipe:

COLCANNON

Serves 4

2 medium potatoes, scrubbed
1 cup kale, stems removed and coarsely chopped
2/3 cup low-fat soymilk
3 tablespoons thinly sliced scallions
Salt and pepper to taste

Cut potatoes into large chunks. Add to a medium saucepan with enough water to cover the potatoes. Bring to a boil, reduce heat, and cook until tender when pierced with a fork—about 20 minutes.

Meanwhile, add about one inch of water to a medium saucepan. Insert steamer basket, bring to a boil, then reduce heat to simmer. Add kale, cover, and steam for about 4 minutes. Remove kale and place in a mixing bowl.

Once potatoes are cooked, peel and add to kale.

In a small skillet, heat the soymilk and scallions, and simmer 5 minutes. Add to potatoes and kale and mash together. Add salt and pepper to taste. Serve hot.

Nutrition information per approximately 2/3 cup serving: 87 calories, 2.4 g protein, 18.3 g carbohydrate, 0.5 g fat, 5.5% of calories from fat, 0 mg cholesterol, 30.7 mg of sodium

Recipe from

http://www.pcrm.org/health/recipes/st_patty.html

*Contributed by Charleen Sibley, MS, RD, LD, CNSD
Southern Regional Medical Center*

THE VENT-RICLE

Q: How many doctors does it take to change a light bulb?

A: 20—One primary care physician to change it and 19 specialists to take it apart and look at it under a microscope.

Q: How many nurses does it take to change a light bulb?

A: 12—One to do it; one to chart it; ten to write the policy and procedure.

PAGES Editorial Service, Inc.

"How was your golf game, dear?" asked Jack's wife, Tracy.

"Well, I was hitting pretty well, but my eyesight's gotten so bad, I couldn't see where the ball went."

"You're 75 years old, Jack!" admonished his wife. "Why don't you take my brother Scott along?"

"But he's 85 and doesn't even play golf anymore," protested Jack.

"Yes, but he's got perfect eyesight and can watch your ball for you," Tracy pointed out.

The next day Jack teed off with Scott looking on. Jack swung and the ball disappeared down the middle of the fairway.

"Did you see where it went?" asked Jack.

"Yup," Scott answered.

"Well, where is it?" yelled Jack, peering off into the distance.

"I forgot."

A minister decided that a visual demonstration would add emphasis to his Sunday sermon.

Four worms were placed into four separate jars. The first worm was put into a container of alcohol. The second worm was put into a container of cigarette smoke. The third worm was put into a container of chocolate syrup. The fourth worm was put into a container of good clean soil.

At the conclusion of the sermon, the minister reported the following results:

The first worm in alcohol — dead.

The second worm in cigarette smoke — dead.

Third worm in chocolate syrup — dead.

Fourth worm in good clean soil — alive.

So the minister asked the congregation, "What can you learn from this demonstration?"

Maxine, who was setting in the back, quickly raised her hand and said, "As long as you drink, smoke and eat chocolate, you won't have worms!"

That pretty much ended the service.

APPLICATION FOR MEMBERSHIP

We (I) would like to join Mended Hearts, Inc., Chapter #81

Atlanta or Satellite: Marietta Piedmont Southside

NAME _____

SPOUSE _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____

PHONE _____ DATE OF BIRTH _____

DID YOU HAVE:

Bypass Surgery Balloon Pacemaker Heart Attack

Valve Surgery: Mitral Tricuspid Aortic Pulmonary

Other _____

New member family dues are \$32.00 and new member single dues are \$22.00.
Please make your check payable to:
The Mended Hearts, Inc.
Mail to: John Crosbie, Treasurer
3401 Winter Wood Court
Marietta, GA 30062-1247

RETIRED YES NO

DATE OF CARDIAC EVENT OR SURGERY: _____

TYPE OF MEMBERSHIP: FAMILY SINGLE

Membership covers a 12-month period from date of enrollment and includes:

- Insignia pin
- Chapter newsletter
- Subscription to quarterly national magazine, *Heartbeat*

Aorta Reporter

A copy of *Aorta Reporter* is mailed for three consecutive months following your hospital stay or referral as a heart patient. It is our way of keeping in touch while you continue to recuperate. We enjoyed meeting you and hope you received some comfort and encouragement from us. Having lived the same experiences, we are willing to take time out of our lives because we want to share our experiences in your recovery. As you become active again, you and your family are invited to attend our Atlanta Chapter #81 or any other chapter meetings as guests. In getting to know us, we hope you will decide to join us in helping each other. Our 7:30 p.m. meetings are the third Tuesday of each month.

Mended Hearts

Mended Hearts is a nationwide support organization, affiliated with the American Heart Association, for individuals with heart disease, including persons recovering from heart attacks or open-heart surgery. Members give hope and encouragement to others by providing living proof that persons with heart disease can lead full, productive lives. Family and friends are also welcome to attend the free monthly sessions. For information, call 678-385-2062 or your local American Heart Association.

**Visit Chapter #81 at
www.mendedheartatlanta.org**

**ATLANTA MENDED HEARTS, CHAPTER #81
678-385-2062**

c/o American Heart Association
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678-385-2000

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