A top-down view of various medical supplies arranged on a white marble surface. In the top left, there is a blue pill organizer with compartments labeled 'W', 'T', 'F', 'S'. Next to it is a white digital thermometer with a 'START' button. In the top right, there is a clear syringe and a pair of silver surgical forceps. In the bottom left, there is a black manual sphygmomanometer with a gauge. In the bottom right, there is a silver stethoscope. The central focus is a black rectangular tablet with white and teal text.

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Strength training for seniors

A balanced diet and exercise, which includes a combination of aerobic activities and strength training, is necessary to maintain long-term health.

According to the Centers for Disease Control and Prevention, regular physical activity is one of the most important things older adults can do to protect their overall health. Exercise helps to delay or prevent many of the conditions that come with age. Adults ages 65 and older should aim for the recommended 150 minutes a week of moderate-intensity activity, such as brisk walking, and at least two days of activities that strengthen muscles.

When it comes to muscle strengthening, seniors can follow these safety guidelines as they embark on their strength-training journeys.

- **Speak with a healthcare provider first.**

Get the green light to proceed with an exercise regimen before beginning by

having a discussion with your general practitioner about your fitness goals. Your doctor can recommend strategies that are safe and point out any exercises that may compromise your overall health.

- **Master basic exercises first.** Anyone new to strength training, which is sometimes known as resistance training, can start out slowly, even using just body weight, to provide resistance. Resistance exercises can include squats, crunches, modified pushups, planks, and lunges.
- **Graduate to resistance bands.** When you're ready to move on to something else, consider resistance bands as an alternative to free weights. The bands can help you develop good form before introducing weight. Good form is key to avoiding injury.
- **Work with a trainer.** Working with a certified personal trainer can help you learn





how to use free weights and strength-training machines correctly. A trainer also can create a routine that includes the right number of sets and repetitions to gradually build and maintain muscle mass. If you decide against hiring a trainer, gym staff members may guide you through equipment and demonstrate proper form.

- **Exercise with a friend.** Strength training with a friend or family member can provide motivation and keep you on target to meet your goals.
- **Build up gradually.** Your first strength session should only last 10 to 15 minutes, according to Tiffany Chag, C.S.C.S., a strength coach at the Hospital for Special Surgery in New York. This enables you to gauge soreness. Wait until soreness abates before beginning your next session if you are new to strength training.



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What's a good heart rate for your age?



A resting heart rate can be a good indicator of health. According to the Mayo Clinic, generally speaking, a lower heart rate at rest implies more efficient heart function and better cardiovascular fitness. Athletes tend to have lower normal resting heart rates than non-athletes. Conversely, an unusually high resting heart rate may signify an increased risk of heart disease or another medical condition, advises Harvard Health.

While the official stance on resting heart rate for adults indicates it should range from 60 to 100 beats per minute (bpm), most healthy adults fall between 55 and 85 bpm. However, certain people may fall outside of this range and still be healthy. Penn Medicine says resting heart rate generally should not be too fast or too slow, and should not fluctuate all that often.

Men and women differ slightly in resting heart rate. The National Institutes of Health says the average adult male heart rate is between 70 and 72 bpm, while the average for adult women is between 78 and 82 bpm. This is due in large part to the fact that men have larger hearts than women. This occurs even after accounting for age and physical fitness.

There are ways to lower resting heart rate. Exercise, quitting smoking and relaxing to reduce stress and anxiety can promote a low resting heart rate.

What qualifies as a healthy resting heart rate changes as one ages. In fact, heart rates for children are much different from adults.

- ♥ Newborn babies: 100 to 205 bpm
- ♥ Infants under 1 year: 100 to 180 bpm
- ♥ 1 to 2 years: 98 to 140 bpm
- ♥ 3 to 5 years: 80 to 120 bpm
- ♥ 6 to 7 years: 75 to 118 bpm
- ♥ Older children and teens: 60 to 100 bpm
- ♥ Adults: 60 to 100 bpm

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How is RSV transmitted?

The American Lung Association notes that respiratory syncytial virus, or RSV, is a common respiratory virus that produces cold-like symptoms in adults and children. Though the Centers for Disease Control and Prevention notes that most cases of RSV go away within two weeks without intervention, the virus can be unpredictable. In fact, the ALA reports that RSV is the leading cause of hospitalization in all infants. In addition, most children have been infected with the virus by the time they are two years old. Such high infection rates understandably leads to questions about transmission of the virus, which the CDC reports can spread in the following ways.

- An infected person coughs or sneezes
- Individuals get virus droplets

from a cough or sneeze in their eyes, nose, or mouth

- Individuals come into direct contact with the virus, like kissing the face of a child with RSV
- Individuals touch a surface that has the virus on it, like a doorknob, and then touch their face prior to washing their hands

Such methods of transmission explain why so many children are infected with RSV prior to their second birthday, as curious youngsters often hug and grab other children at day-care facilities and frequently touch their faces without washing their hands. Though RSV infection in infants is often overcome, parents can speak with their child's pediatrician to determine if there is any way to lower their child's risk of infection.



What to know about RSV



Winter is synonymous with the holidays, snow and, of course, the common cold. Though colds are not exclusive to winter, they tend to be more common in the colder months of the year, when people typically spend more time indoors, making it easier for cold viruses to spread from one person to another.

As cold season hits full swing, it's important to recognize that the common cold is not always behind those uncomfortable coughs and sniffles. Respiratory syncytial virus, often referred to as RSV, is a serious respiratory virus that produces symptoms similar to those associated with the common cold. Some basic knowledge of RSV can ensure people seek the treatment they need to overcome it.

What is RSV?

The Mayo Clinic reports that RSV is a virus that infects the lungs and respiratory tract. Though RSV may not be as familiar as the common cold, perhaps it's more familiar than many people realize, as the Mayo Clinic indicates most children have been infected with the virus by the time they're two years old. The American Lung Association® reports that RSV is so common among children because they so frequently come into physical contact with other kids.

When is RSV most likely to occur?

According to the ALA, the peak season for RSV is fall through spring. However, the National Institute for Public Health and the Environment notes that RSV infections rose sharply in summer 2021. Though that spike was likely due to a relaxation of coronavirus restrictions, it underscores that RSV can strike in summer, even if it's less likely to spread during times of year when people tend to spend more time outdoors.

What are the symptoms of RSV?

The Centers for Disease Control and Prevention report that people infected with RSV typically exhibit symptoms within four to six days of infection. Such symptoms, which usually appear in stages and not all at once, may include:

- Runny nose
- Decrease in appetite
- Coughing
- Sneezing
- Fever
- Wheezing

Young infants with RSV may be irritable, less active and experience breathing difficulties. The ALA notes that RSV is the leading cause of hospitalization in all infants, so symptoms should be taken seriously and brought to the attention of a child's pediatrician immediately. The ALA

also notes that symptoms like difficulty breathing, not drinking enough, decreased activity, nasal flaring, and bluish lips and fingernails require urgent care.

How is RSV managed?

The CDC notes that antiviral medication is not typically part of a treatment for RSV, as most infections go away within a week or two without intervention. Symptoms such as fever and pain can be managed with over-the-counter fever reducers and pain relievers like acetaminophen or ibuprofen (the CDC notes that aspirin should never be given to children). Drinking plenty of fluids to prevent dehydration and speaking with a physician prior to taking something or giving a child something to treat RSV is recommended.

Is there an RSV vaccination?

The CDC recommends immunization for those most at risk of serious illness from RSV. High-risk groups include infants, toddlers and adults age 60 and older. Parents and older adults are urged to speak to their child's doctors and their own physicians about RSV vaccination.

RSV symptoms mirror those of the common cold, but the virus can be more serious than that. More information is available at [cdc.gov](https://www.cdc.gov) and [lung.org](https://www.lung.org).

Find the right doctor for your condition

The medical field is comprised of many professionals working in concert to keep patients healthy, which involves treating any conditions that arise. Individuals may be treated by various types of doctors in their lifetime, and each is an expert in his or her field. According to Medical News Today, most physicians are categorized as primary care or specialty care.

Navigating the health care system can be confusing. Recognition of the specialties of various types of doctors can make it easier to make it through that system.

- **General practitioner:** Also known as a family physician, or primary care doctor, these are the doctors patients are likely to encounter most often. They care for patients during routine checkups and screening tests; provide immunizations; and manage ongoing medical conditions. GPs also may be internists, treating both common and complex illnesses.
- **Pediatrician:** Pediatricians specialize in the care of children from birth and up. Although there is no set age when patients will transition from a pediatrician

to an adult doctor, Kids Health says the switch is typically made between the ages of 18 and 21.

- **Geriatric medicine specialists:** These doctors focus on treating elderly patients and the medical conditions that can develop as a person ages. Geriatric doctors work in private offices, nursing homes, assisted living facilities, hospitals, and some even make house calls.
- **Endocrinologists:** An endocrinologist is an expert in the study of the body's hormones, says the Cleveland Clinic. They diagnose and treat many different conditions that affect the endocrine system, including diabetes, reproductive issues and thyroid conditions.
- **Dermatologist:** Skin, hair and nail conditions are handled by a dermatologist. Dermatologists routinely treat conditions like acne, moles, scarring, rashes, and more.
- **Nephrologist:** Individuals with kidney diseases as well as high blood pressure and fluid and mineral imbalances will likely see a nephrologist.

- **Ophthalmologist:** Although many conditions of the eye can be diagnosed and treated by optometrists, ophthalmologists are medical doctors who can treat every kind of eye condition. They also can operate on the eyes, according to WebMD.
- **Oncologist:** Oncologists specialize in the diagnosis and treatment of cancer. They have subspecialties in specific types of cancer, and also may serve as radiation oncologists, who provide radiation cancer treatments.
- **Otolaryngologists:** Commonly referred to as ear, nose and throat doctors, these professionals treat diseases in these areas of the body. They also treat conditions that affect the neck and respiratory system.
- **Pulmonologists:** Those with conditions related to breathing issues, such as pneumonia, asthma, emphysema, and lung cancer, can seek out pulmonologists. These are just some of the many different types of doctors people may visit in their lifetimes.



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Variables that could elevate your risk for stroke



The World Stroke Organization notes that more than 12.2 million individuals experience stroke each year across the globe. Perhaps even more telling, the WSO reports that, globally, one in four people over age 25 will have a stroke in their lifetime.

Stroke is indeed a threat to public health. However, despite the prevalence of stroke, individuals are not helpless against it. Various risk factors for stroke are within individuals' control, and it's never too early for adults to prioritize stroke prevention. With that in mind, the following are some of the most common risk factors for stroke, courtesy of the WSO.

- **Elevated systolic blood pressure:** The American Heart Association notes that an elevated systolic blood pressure means the upper number on a blood pressure

reading is between 120 and 129. Systolic blood pressure measures the pressure your blood is pushing against the artery walls each time the heart beats. Individuals diagnosed with elevated systolic blood pressure are urged to discuss the ways to lower that number, as the American Stroke Association notes high blood pressure is the most significant controllable risk factor for stroke.

- **High body mass index:** A 2022 study published in the journal PLOS One found that body mass index was associated with stroke risk among diabetes patients. The study found that the risk of ischemic stroke, which occurs when a blood clot or fatty plaque blocks a blood vessel in the brain, was higher among obese patients

compared to patients who are overweight or normal-weight.

- **Smoking:** The WSO reports that someone who smokes 20 cigarettes a day is six times more likely to have a stroke compared to a non-smoker. One of the links between smoking and stroke risk surrounds carbon monoxide and nicotine. Smoke from cigarettes contains both carbon monoxide, which reduces the amount of oxygen in a smoker's blood, and nicotine, which makes a smoker's heart beat faster. Those variables combine to raise blood pressure, which has already been noted as a significant risk factor for stroke.
- **Alcohol consumption:** A 2022 study published in the journal Neurology examined the link between alcohol consumption and stroke. The study found

that high levels of alcohol consumption are associated with a higher risk for all types of stroke, and even moderate intake, defined as between seven to 14 drinks per week for women and seven to 21 drinks per week for men, was associated with higher risk for all types of stroke.

These are not the only common risk factors for stroke. In fact, the WSO reports high fasting glucose, air pollution, low physical activity, poor diet, high LDL (i.e., "bad") cholesterol, and kidney dysfunction are some additional common risk factors for stroke.

Though stroke affects more than 12 million individuals across the globe each year, many of its more common risk factors are manageable. More information about stroke is available at stroke.org.

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How families can share caregiving responsibilities

Family caregivers are unsung heroes. Such individuals typically provide vital services to their loved ones who cannot fully care for themselves, and they often do so without compensation.

Data from the U.S. Bureau of Labor Statistics indicates the prevalence of family caregivers across the country. According to the BLS, 14 percent of the population, which equates to roughly 37 million people, provide unpaid eldercare across the nation. Unpaid caregivers also provide vital services in Canada, where the Canadian Institute for Health Information reports such individuals provide an average of 17 hours of unpaid care each week (26 hours for those who care for seniors with dementia). Caregiving for a family member can take a toll that affects caregivers' physical and mental health. According to the Centers for Dis-



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ease Control and Prevention, caregivers are at increased risk for developing multiple chronic diseases since many neglect their own health needs while caring for others. In addition, roughly 15 percent of caregivers who participated in a CDC survey reported experiencing 14 or more mentally unhealthy days in the past month.

The physical and mental toll of caregiving underscores how important it can be for families to find ways to share caregiving duties. Though each situation is unique, the National Institute on Aging offers the following advice to families as they seek to share the responsibility of caring for a loved one in need.

• **Identify the care required.**

The NIA recommends families discuss caregiving needs as early as possible and ideally before an emergency situation arises. If possible, the person in need can participate in this conversation

and help to calmly discuss which services are wanted and needed. If a loved one is diagnosed with a condition in its early stages, such as dementia, families can then work together to identify the level of care required in the immediate future and potentially down the road should the condition worsen.

• **Choose a primary caregiver.**

The primary caregiver will be the individual who accepts the bulk of the daily responsibilities of caregiving. Identifying this person early, ideally before a primary caregiver is even needed, can limit confusion should the day come when the individual needs daily care.

• **Determine each caregiver's contribution.** The caregiving team can discuss each person's skills and how they can be used to take care of the individual in need. This can be particularly useful

when assigning specific tasks. For example, a caregiver who works in the medical field may be most qualified to speak to medical staff about their loved one's condition, while another who works in the financial sector may be tasked with managing a loved one's bank accounts and ensuring bills are paid on time.

• **Recognize everyone has limits.** A caregiving team is just that: a team. As noted, caregiving can take both a physical and emotional toll, so it's important that everyone, and particularly the individual chosen as the primary caregiver, receive routine breaks to ensure everyone can take care of themselves. It's important that a caregiving team maintain a degree of flexibility to account for the physical and mental challenges caregivers may encounter as they tend to a loved one in need.



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7 signs a pet could be in pain

Pets and even wild animals can convey sentiments in various ways. It's human nature to want to assume that the passing glances of a puppy are looks of deep love — and they very well may be. Animals may convey various emotions through their behavior, but when it comes to being in pain, they may not show it readily. In the wild, animals hide pain as a survival instinct. Pain can give the perception that an animal is weaker and therefore an easier target for predators. Since pets can conceal pain well, pet owners should familiarize themselves with reading the subtle indicators that suggest something is amiss. PetMD, Sears Veterinary Hospital and VetsNow note the following are seven signs pets could be in pain.

1. **Grumpy temperament:** Does your typically amiable pet suddenly want nothing to do with you? Is he or she more aggressive or shying away from your touch? Pain can turn a happy-go-lucky pet into one that is much more moody and resistant to human interaction.
2. **Excessive behaviors:** A pet in pain may lick or scratch a specific area. Cats may howl or meow frequently.
3. **Accidents:** Pets who are in pain could forget some of their hovertraining. Cats may urinate outside of the

litter box, while dogs may have accidents indoors.

4. **Reduced appetite:** Being in pain or ill may reduce the desire to eat or drink in some pets. Pets who have dental issues may be even more reluctant to eat because chewing triggers the pain.
5. **Difficulties lying down or standing up:** Pain that originates from injuries or arthritis can make it challenging for pets to sit, stand or lie down easily. Limping or having trouble walking are some additional indicators of injury or arthritis.
6. **Changes in body posture:** Most pet owners have a good idea of what their animals look like when they are relaxed and in good health. A pet who is hunched or especially rigid, or one hanging his or her head, could be masking pain.
7. **Agitation or restlessness:** Some pets cannot get settled when they're in pain. They may pace the house or not lie down long enough to get adequate rest.
Pet owners who spend enough time with their pets should be able to recognize a few signs that something is amiss and potentially indicative of an animal in pain. When such indicators present, schedule a visit with a veterinarian promptly to get to the root of the problem.



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The link between sleep and healthy aging

A good night's rest can be just what the body needs to feel revitalized and ready to tackle a new day. Indeed, rest is important for people of all ages, including seniors.

The National Council on Aging notes the brain needs sleep to regulate the body, restore energy and repair damage. Recognition of that is vital for aging men and women, some of whom may be more vulnerable to sleeping problems than they realize. In addition to being more vulnerable to age-related health problems that can interrupt their sleep, thus affecting its quality, aging men and women may find their sleep routines change over time. For example, a 2019 study published in the journal BMC Geriatrics found that active elderly people reported it took them longer to fall asleep as they got older.

The NCOA says it's a misconception that older adults need more sleep than younger people, noting adults of all ages require the same amount of nightly rest. However, things may change for seniors in regard to how much time they need to spend in bed.

The NCOA notes this is because adults may be more likely to experience poor sleep quality and continuity. When that occurs, adults still need the recommended minimum of seven hours of nightly sleep, but they may need to spend more time in bed since it's taking them longer to fall asleep.

It's important that aging adults recognize that they can spend too much time sleeping as well. A 2019 study published in the Journal of the American Geriatrics Society found that too much sleep is linked to the same health problems as too little sleep, issues that include an elevated risk for heart disease and falls.

Sleep issues affecting older adults also may be a byproduct of various contributing factors. The NCOA notes that frequent contributors to sleep concerns include:

- Pain that affects the back, neck, or joints
- Mental health issues, including anxiety and depression
- Neurodegenerative disorders that are more frequent among aging populations, such as dementia and Alzheimer's

- Sleep apnea or disordered breathing at night

Restless leg syndrome, a condition that tends to worsen with age and is characterized by an urge to move limbs often

- Nocturia, a condition marked by a need to urinate at night
- Stimulating medications or medication interactions
- Decreased exposure to sunlight
- Sedentary lifestyle

Aging men and women who are experiencing difficulty sleeping should know that such issues are treatable and not something that needs to be accepted as a normal part of growing older. For example, individuals whose sleep is routinely interrupted by a need to urinate can avoid certain beverages, including alcohol and caffeinated drinks.

Sleep and healthy aging go hand in hand. Aging adults experiencing difficulty sleeping can consult their physicians and visit ncoa.org to learn more about overcoming sleep-related issues.



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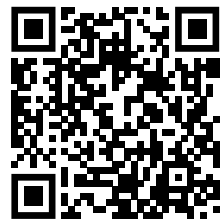


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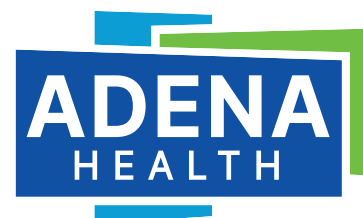
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Tips to find a home health aide

A desire to live independently seems to be part of human nature. Though that desire may continue to burn as individuals approach retirement age, unforeseen circumstances like medical issues or the death of a partner may result in a need to work with a professional caregiver.

Home health aides (HHAs) can help aging individuals or those with certain physical or cognitive limitations live full lives without requiring them to move into assisted living facilities or seek alternative housing arrangements. HHAs provide a host of services, and individuals living in well-populated areas may have no shortage of options as they seek to hire a professional to help themselves or a loved one with the tasks of daily life. Individuals or families beginning their search for a home health aide can keep these tips in mind.

- **Identify the services required.** The Family Caregiver Alliance® notes there are several main areas to assess when identifying which services individuals may need help with. Personal care consists of bathing, eating, dressing, toileting, and

grooming. Household care involves cooking, cleaning, laundry, and shopping. HHAs who provide medical care may help clients manage medications, provide physical therapy and help clients get to their doctor's appointments. Companionship is a component of emotional care, which also may entail engaging clients in meaningful activities and conversation. Identifying the services required can help individuals and their families zero in on the professionals who can help them.

- **Seek recommendations from trusted doctors and confidantes.** An individual who needs daily assistance at home can ask his or her physician for recommendations (family members can ask as well). Physicians undoubtedly have had previous patients who have benefited from the services of HHAs, so they can likely recommend local professionals. Trusted confidantes, such as neighbors, relatives and friends, who have been in similar situations, or have family members who have required HHAs, also can be an invaluable resource.

- **Contact a local agency.** The FCA notes that contacting a local Home Care Agency is a formal way to find an HHA for yourself or a loved one. Various agencies are likely in operation within a reasonable distance of a person's home, though the FCA notes far fewer agencies serve rural areas. Contacting a local Home Care Agency can put individuals and their families in contact with professionals who can help match people with particular needs with HHAs who specialize in such care or have extensive experience providing a range of home care services.

- **Look into a direct-hire group.** AARP® notes that direct-hire agencies maintain networks of independent caregivers and facilitate connections between those professionals and individuals and families seeking help. When working with a direct-hire group, inquire about their fees and ask if they can share any information regarding how to pay independent contractors who can be found through their agencies. It's also important to ask if direct-hire groups formally vet professionals that can be found through them or if individuals and families must conduct their own background checks.



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- Ventilator Care
- PT, OT & ST – 7 days a week
- Outpatient Therapy
- Pre-Surgery Registration
- Comprehensive Wound Care



Court House Manor

Skilled Nursing

Services Provided:

- Rehab Suites
- Person Centered Care
- PT, OT & ST – 7 days a week
- Outpatient Therapy
- Pre-Surgery Registration
- Comprehensive Wound Care



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Pulmonary and Ventilator

Services Provided:

- Ventilator –weaning and chronic
- Tracheostomy
- C-Pap & Bi-Pap
- Management of Chronic Conditions such as COPD, pneumonia and Chronic Emphysema
- Medical Director
- Respiratory Therapist – 7 days a week
- Trained Therapists: PT, OT & ST
- Registered Nurses



Court House Manor Assisted Living

Amenities:

- All utilities
- Medication Management
- 24-hour in-house staffing
- Transportation Assistance
- Life Enrichment and fitness activities
- Personal Pendant for added security
- Laundry accommodations
- Weekly housekeeping services
- Respite Stay available




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- Neurology
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For complete list of services visit

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