



Central Valley Indian Health, Inc.



*1st Quarter  
Newsletter  
January 2021*

## COVID-19 Vaccine Has Arrived at CVIH

We have begun giving the COVID vaccination. As many of you have heard, the FDA recently granted emergency authorization for use of the Pfizer and Moderna COVID-19 vaccines. Both vaccines have special storage and handling requirements but the Pfizer vaccine was especially difficult because of its ultra-frozen requirements. Therefore, we chose to use the Moderna Vaccine which is being shipped directly to our clinics.

The CDC and the Advisory Committee on Immunization Practices (ACIP) recently released their guidance and recommendations on initial use of these vaccinations. Because there will initially be a limited supply, it was recommended to vaccinate Healthcare Personnel and residents of long-term care facilities first. After vaccinating all healthcare personnel, we will then begin patient vaccination based on supplies and recommendations by the Indian Health Service, the CDC, and the ACIP.

I realize that this has been a difficult year for everyone. Unfortunately there has been a significant rise in COVID cases recently not only in our clinics but throughout the state of California and in the United States. It has now reached a critical level and is putting a significant strain on our medical system and all healthcare personnel.

As we move forward, the best protection from COVID-19 will be a combination of getting the COVID-19 vaccine along with continuing to wear a mask, maintaining social distancing, hand washing, and avoiding large gatherings. No one tool is going to stop the pandemic. The vaccine is just one extra tool to help us stop this pandemic.

Therefore I encourage all of you to strongly consider getting the vaccine. Getting the COVID-19 vaccine helps protect yourself, your co-workers, our patients, and your family and friends from infection.

I believe strongly in vaccination and I plan on getting the vaccine. I hope you will all join me in helping make 2021 a better year for all of us.

Please stay healthy!

Aaron C Kissel, M.D.  
Medical Director



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## IMPORTANT DATES THIS QUARTER

**JAN. 18 - MARTIN LUTHER KING JR. BIRTHDAY - ALL CLINICS CLOSED**

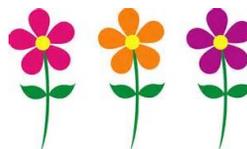
**FEB. 14 - VALENTINE'S DAY**



**FEB. 15 - PRESIDENT'S DAY - ALL CLINICS WILL BE CLOSED**

**MAR 14 - TIME CHANGES - SPRING FORWARD**

**MAR. 20 - FIRST DAY OF SPRING**



## Bedtime

By Lynette Bassman, Ph.D.

One of the lessons children learn as they grow up is that there is a right and a wrong time for many things in their lives. If it is about to be dinnertime, it's not a good time to eat a cookie. When a school assignment is given, it's best to start on it soon. When somebody gives you something, you say thank you. And there is a time to go to bed. Children resist going to bed, not wanting to miss out on anything fun, even when they are so tired that they can hardly stay awake. They might bargain with their parents for a little more time, or one more bedtime story. Eventually, most kids learn to accept bedtime and maybe even be glad it is time to surrender to sleep.



Some adults are still fighting that battle about bedtime, maybe even more so lately, with COVID-19 causing stress and changing our routines, but now that battle is often with themselves instead of with parents. Some adults, and especially teenagers, are staying up until the early morning hours, and sleeping late into the morning or early afternoon. But for most of us, our bodies do best when we sleep at night and stay awake during the day. Our brains respond to the signals the earth sends, with cycles of light and dark. Our ancestors, who didn't have electricity, went to bed when it was dark and woke up with the sun, and our bodies and brains haven't changed since those times. Dark is a time for sleeping and we feel more rested if we sleep then. Also, our bodies, and especially our brains, clean and repair themselves better if we are asleep during the dark part of the daily cycle. Without adequate night time sleep, we are at increased risk for automobile accidents, diabetes, lowered immunity, depression, anxiety, obesity, heart disease and other problems, even if we get enough hours of sleep. With good night time sleep, so many things in our lives are better. That's why I, as a psychologist, am writing about this topic. I have seen people who struggled with depression, anxiety, anger, and irritability improve dramatically when they started getting proper night time sleep.

Adding to the problems with going to bed late is the fact that when people are up during the late night hours, they often are exposed to blue light that comes from the screens of phones, computers, tablets, and TVs. That blue light, so different than the candles or campfires that were our ancestors' only lighting at night, sends our brains a signal that it is morning (think of a bright blue sky), and that it is time to be alert. So as long as we are looking at screens or other bright lights, we might feel alert, which is part of why we decide to stay up. But often, if you pay close attention, there are signs that you are ready for bed early in the evening. That sleepiness that you fight through (or worse, take a quick nap to get past), is your body telling you what it needs: an early bedtime.

How about doing a little experiment where, for a week, instead of fighting against that sleepiness, you give in to it, and establish a regular early bedtime. Take careful note of how you feel the next day. Notice your mood, your energy level, how clearly you think, whether you have food cravings, etc. If you like the results, you can stick with it and make "early to bed and early to rise" your new (old) way of life.



### TIME CHANGE

SET YOUR CLOCKS AHEAD ONE HOUR  
BEFORE YOU GO TO BED ON MARCH 13, 2021



## Slow Cooking

Ranjani Sri MS RD CDCES



2020 has been a challenging year. A global health crisis has added stress to our daily lives and to our healthcare and educational institutions. Prioritizing nutrition is increasingly important as food insecurity is rising in our communities and eating a nutritious diet is linked to supporting a healthy immune system.

This easy method can help encourage clients to cook more at home and have healthier meals. Eating at home is economical and associated with many health benefits as well. A 2017 study found that those who ate at home at least five times per week for their main meal consumed more fruits and vegetables and were less likely to have a high BMI or excess body fat compared with those who ate their main meal at home less than three times per week. According to the 2017 U.S Grocery Shopper Trends report from the food Marketing Institute, 88 % shoppers believe eating at home is more healthful than eating at a restaurant.

As health care providers, we can help our clients set goals related to eating at home more often. One of the barriers to cook at home is a lack of time to prepare meals. When it comes to saving time, a slow cooker (Crock-pot or Instant pot) can be a useful tool for preparing a healthy meal while at work or doing any other activities. Many slow cooker recipes require just one-step, reducing preparation time. The ingredients can be combined in the slow cooker insert the night before, refrigerate the insert overnight, and begin cooking in the morning with the following recommended temperature range.

**A primary food safety concern when cooking with slow cooker is ensuring that meat is cooked to the proper temperature.** Frozen meats should not be cooked directly in a slow cooker, as it may spend too long in the “danger Zone” of 40-140<sup>0</sup> F, the temperature range in which bacteria can grow. Thawing frozen meat in the refrigerator before cooking will avoid this hazard. Clients should make sure to fill the slow cooker at least half-full and no more than two-thirds full.

**Resist the urge to peek—keep the lid on.** In meat, keeping the internal temperature anywhere from 160° to 205° F is safe and helps the collagen begin to gelatinize and results in a tender end product. Because slow cooking process utilizes a little heat and a lot of time, it causes the collagen in the toughest cuts of meat to break down evenly, leaving with shreds of tender, juicy meat.

**Make sure leaner cuts of meat stay submerged in the cooking liquid (eg, broth, water).** This will ensure to prevent from drying out and stay juicy and tender. Cook lean cuts of meat on high heat to prevent drying out quickly; fatter cuts will do better on low.

**No need to presoak *most* dry beans and lentils. Slow cooking is one of the best ways to cook pulses perfectly every time.** This inexpensive protein source is a great option for the slow and steady heat of the slow cooker. *Note: Kidney beans contain a toxin that can cause gastrointestinal distress. Clients must bring them to a full boil on the stovetop for 10 minutes before adding them to the slow cooker.*

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**Layer veggies appropriately to preserve their texture.** Place hearty veggies like potatoes, squash, and sweet potatoes on the bottom of the slow cooker (dry pulses go here as well). Veggies that hold up well in the middle portion of the slow cooker include carrots, onions, and peppers. Delicate vegetables such as spinach, broccoli, and fresh herbs do best when added in the last 30 minutes of cooking.

**Don't throw out the excess liquid. Simply mix it with a bit of flour, cornstarch, or a cooked roux.** The result? Instant gravy.

### Safe Storage of Cooked Food and Leftovers

Any temperature between 40 F (4.4 C) and 140 F (60 C) is considered the "danger zone" for food. If food stays in this danger zone for too long, harmful bacteria can grow to levels that could cause illness.

Never leave food out of the refrigerator for over 2 hours. Keep hot cooked food above 140 F (60 C) if it is not served immediately or if you are serving buffet-style. Slow cookers, chafing dishes, and warming trays are good for keeping food warm for serving or use a warming drawer or the Keep Warm setting of the oven (usually between 160 F (65.5 C) and 205 F (93.3 C). Store leftovers in shallow containers so they will cool quickly. They must be refrigerated at 40 F (4.4 C) or below within 2 hours.



### Reheating the Leftovers

Reheat foods to a minimum internal temperature of 165 F (73.9 C), or until they are steaming hot. Microwave ovens do not heat evenly, so when using a microwave to reheat leftovers, cover the container and rotate to heat evenly. If possible, check the temperature.



## GLUCOMETER UPGRADE ANNOUNCEMENT



For patients with diabetes who use an Accu-Chek Aviva Plus glucometer, we will be upgrading your meter to an Accu-Chek Guide Me glucometer. Please call the Nutrition Department at (559) 299-2578 at ext. 1619 or 1614 for Ranjani or Esther. You may also request a meter while at a doctor visit.



## Seasonal Affective Disorder or SAD

By: Moriah Bonilla—Outreach Director

Are you feeling SAD this time of year? Well there may be a reason why! SAD or Seasonal Affective Disorder affects a lot of people this time of the year. SAD is a type of depression that occurs at the same time every year. Most people who experience this usually start to feel depressed during the late fall and continue to feel depressed until the spring. If you are feeling depressed don't assume that it is a case of the "Winter Blues", get check out!

Symptoms of Winter SAD can include: Depression, hopelessness, anxiety, loss of energy, social withdrawal, oversleeping, not enjoying activities you once did, appetite changes especially a craving for carbohydrates, weight gain, and difficulty concentrating and processing information.

It is very normal for people to have days where you're feeling sad but this should not be happening everyday! If you are noticing any of these symptoms and find yourself thinking about suicide or turning to alcohol or other drugs for comfort you need to speak with your Doctor. The causes for SAD are mainly things that we are unable to control. The decreased sunlight during this time of the year is primarily to blame as it affects some hormones in our bodies. These hormone changes contribute to SAD! Risk factors for this disorder are being female, living away from the equator, and a family history of SAD. SAD is diagnosed in higher numbers in females than males. Living far from the equator helps determine the amount of sunlight you are getting during the year. For us it is more sunlight in the summer and less during the winter. Family history is key because if you have a family member who has had any type of depression then you are at a higher risk of having depression because it could be in your genes.

There are no tests that can diagnose SAD but if your condition is worsening your Doctor may order tests to rule out other illnesses. Your Doctor may ask you some very detailed questions and do a physical exam as well. To be diagnosed with SAD you must have had depression during the same time of the year for two consecutive years. Your periods of depression are followed by periods without depression. And there are no other conditions that explain your depression.

Treatments for SAD include medication, light therapy, and psychotherapy. Things that you can do at home to help are by getting regular exercise, going outside, and making your living space more sunny and bright. Other things that you can do to make yourself feel better are to take any and all medications as directed by your Doctor, take care of yourself by sleeping and eating regularly, learn how to manage your stress in positive ways, go see your friends or family on a regular basis, and take a trip!



Most of us feel safe in our homes, but danger can lurk around every corner. However by taking a few precautions you can insure that your “home sweet home” is “home safe home”.

- Keep an emergency list of phone numbers by each phone that is written clearly and large enough that it can be read easily if in a hurry or frightened.
- Don't rush to answer the phone or the door. By rushing you could easily fall and injure yourself.
- When walking on smooth floors wear non-slip footwear, such as slippers or shoes that fit well.
- If you use a cane or walker, use it at all times instead of holding onto walls or furniture.
- Make sure that hallways, stairs, or paths are well lit and clear of any objects that might be tripped over.
- Arrange furniture to create clear paths between rooms.
- In rooms with wall-to-wall carpeting, make sure carpet is secure and there are no wrinkles or raised areas.
- Be sure that electric appliance and telephone cords are out of the way but not put under rugs.
- Always use handrails when going up or down stairs.
- Remove throw rugs or secure throw rugs with double sided tape so they don't move when you walk on them.
- Replace appliances that have fraying or damaged electrical cords. These appliances could create an electrical fire.
- Place rubber mats in bathtub to prevent slipping.
- Make sure that you have smoke detectors in all rooms and check batteries regularly.

By: Sarah Goulart, RN, BSN, PHN  
CVIH Public Health Nurse

## DRY MOUTH & OLDER ADULTS

Dry mouth is the feeling that there is not enough saliva in the mouth. Common causes of dry mouth in older adults include side effects of certain medications and dehydration, when you lose more fluid than you take in. Dry mouth can make it hard to chew, swallow, or even talk.

Having less saliva also increases the risk of developing tooth decay or fungal infections in the mouth since saliva helps keep harmful germs in check.

Dentures can become uncomfortable and may not fit as well if the mouth is dry. And without enough saliva, dentures can rub against the gums or the roof of the mouth and cause sore spots.

It is important to know that dry mouth is not part of the aging process itself. However, many older adults take medications that can dry out the mouth, and taking more than one of these can make dry mouth even worse. For example, medicines for high blood pressure, depression, and bladder-control problems often cause dry mouth. (Do not make any changes to your medications, though, without first talking to your physician.)

**DID YOU KNOW?** Some people feel they have dry mouth even if their salivary glands are working correctly. People with certain conditions, such as Alzheimer's disease or those who have suffered a stroke, may not be able to feel wetness in their mouths.

### WHAT CAUSES DRY MOUTH?

- Side effects of some medicines. Hundreds of medicines can cause the salivary glands to make less saliva.
- Dehydration. Older adults are more prone to dehydration than younger people.
- Disease. Diabetes, Sjögren's syndrome, and HIV/AIDS can all cause dry mouth.
- Radiation therapy. The salivary glands can be damaged if they are exposed to radiation during cancer treatment.
- Chemotherapy. Drugs used to treat cancer can make saliva thicker, causing the mouth to feel dry.
- Nerve damage. Injury to the head or neck can damage the nerves that tell salivary glands to make saliva.

**WHAT IF THE PERSON YOU CARE FOR HAS DRY MOUTH?** Make sure he or she visits a dentist or physician who can help determine what is causing the dry mouth and suggest appropriate treatments. If medications are causing dry mouth, the dentist or physician might advise changing medications or adjusting the dosages. Other treatments might include a medicine that helps the salivary glands work better and artificial saliva to keep the mouth wet.

### YOU MAY ALSO SUGGEST THE PERSON YOU CARE FOR DO THE FOLLOWING:

- Sip water or sugarless drinks often, especially during meals. This will make chewing and swallowing easier. It may also improve the taste of food.
- Avoid drinks with caffeine, such as coffee, tea, and some sodas. Caffeine can dry out the mouth.

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- Chew sugarless gum or suck on sugarless hard candy to stimulate saliva flow; citrus, cinnamon, or mint-flavored candies are good choices. Some sugarless chewing gums and candies contain xylitol and may help prevent cavities.
- Don't use tobacco or alcohol. They dry out the mouth.
- Be aware that spicy or salty foods may cause pain in a dry mouth.
- Use a humidifier at night.

TO MAINTAIN GOOD ORAL HEALTH, HE OR SHE SHOULD ALSO:

- Gently brush at least twice a day with fluoride toothpaste.
- Floss regularly.
- Avoid sticky, sugary foods, or brush immediately after eating them.
- Rinse with water after using an inhaler or taking any syrup-based medicines.
- Select sugarless cough drops, vitamins, and antacid tablets.
- Use a fluoride mouth rinse that does not contain alcohol.
- **VISIT THE DENTIST REGULARLY** The person you care for should visit the dentist even if there are no remaining natural teeth. And see the dentist right away about any changes in the mouth such as sores, pain, swelling, or bleeding gums.



National Institute of Dental and Craniofacial Research •

**important stuff**

DEAR PURCHASED REFERRED CARE (Formerly Contract Care) PATIENT:

**ANNUAL CHECK-UPS AND NEW OR DIFFERENT PROCEDURES REQUIRE AN UPDATED REFERRAL.**

WHEN SCHEDULING APPOINTMENTS WITH A SPECIALIST PLEASE BE SURE YOU HAVE A CURRENT REFERRAL ON FILE WITH CVIH.

PLEASE BE SURE TO PRESENT ALL INFORMATION REGARDING ANY OTHER COVERAGE YOU MAY HAVE.

***CVIH IS A PAYER OF LAST RESORT AND CAN ONLY MAKE PAYMENTS AFTER ALL OTHER AVAILABLE RESOURCES, INCLUDING BUT NOT LIMITED TO, PRIVATE INSURANCE, MEDICARE, MEDI-CAL, ETC. ARE UTILIZED.***

**CVIH DOES NOT COVER IN-PATIENT OR EMERGENCY SERVICES.**

STILL HAVE QUESTIONS??? PLEASE CALL CARLA, PRC OFFICE, AT 559.299.2634 EXT 101 OR FAX 559.299.0717.



Vicente Ocegueda  
Maintenance

Clovis



Diana Lulu  
Medical  
Receptionist

Tachi



Terry Whitener  
Medical Screener

North Fork



Elaina Velasquez  
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Receptionist

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CVIH Frame Brands  
(available for 2021)

- ARMANI EXCHANGE
- ARNETTE
- BROOKS BROTHERS
- BURBERRY
- COACH
- DOLCE & GABBANA
- EMPORIO ARMANI
- \*FATHEADZ
- GIORGIO ARMANI
- \*GUCCI
- MICHAEL KORS
- \*NATIVE VISION
- OAKLEY
- POLO
- PRADA
- PRADA LINEA ROSSA
- \*PUMA
- RALPH
- RALPH LAUREN
- RAY-BAN
- \*SAINT LARAUNT
- \*SPY
- TORY BURCH
- VERSACE
- VOGUE



\*LIMITED STOCK ON HAND  
SEE OPTICIAN FOR DETAILS

***THANK YOU FOR CHOOSING CENTRAL VALLEY  
INDIAN HEALTH, INC. AS YOUR PRIMARY  
HEALTH CARE PROVIDER.  
WE LOOK FORWARD TO SERVING YOU  
IN THE MOST THOROUGH AND  
PROFESSIONAL MANNER POSSIBLE.***



# Central Valley Indian Health, Inc.

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*Serving the American Indian people of the Central Valley since 1971*

*The CVIH Mission: To Improve the quality and quantity of health care services to the Indian people of the Fresno, Madera & Kings counties.*

## BOARD OF DIRECTORS

- Area 1: Shawn Hatfield & Lynnell Shaffer
- Area 2: Irene Roan & Ruby Peterson
- Area 3: Dixie Jackson & Pearl Hutchins
- Area 4: Misty Ortega & Jenifer Phillely
- Area 5: Shelby Charley & Brenda Sorondo
- Area 6: James Lewis & Donna Lewis

### Central Valley Indian Health, Inc. Clinic System

► **Central Valley Indian Health, Inc., Clovis**

*Open: Monday-Friday*  
8:00-12:00 & 1:00-5:00  
*Medical Phone: 559-299-2608      Fax: 559-299-1341*  
*Dental Phone: 559-299-2570      Fax: 559-299-2391*

► **Central Valley Indian Health Clinic Prather**

*29369 Auberry Road, Suite 102, Prather, CA. 93651-9784*  
*Open: Monday - Friday*  
8:00- 12:00 & 1:00- 5:00  
*Phone: 559-855-5390      Fax: 559-855-5395*

► **North Fork Indian & Community Health Center**

*32938 Road 222, Suite 2, North Fork, CA. 93643-9562*  
*Open: Monday, Tuesday, Thursday & Friday*  
8:00-12:00 & 1:00-5:00      **Closed: Wednesday**  
*Phone: 559-877-4676      Fax: 559-877-7788*

► **Tachi Medical Center**

*16835 Alkali Drive, Suite M, P.O. Box 8, Lemoore, CA. 93245-9643*  
*Medical Open: Monday-Friday      Dental Open: Tuesday and Thursday*  
8:00-12:00 & 1:00-5:00      8:00-12:00 & 1:00-5:00  
*Medical Phone: 559-924-1541      Dental Phone: 559-924-0460*  
*Medical Fax: 559-924-2197      Dental Fax: 559-924-0790*

► **Central Valley Indian Health Behavioral Health**

*255 W. Bullard., Suite 101, Clovis, CA. 93612-0861*  
*Open: Monday-Friday*  
8:00-12:00 & 1:00-5:00  
*Phone: 559-299-2435      Fax: 559-299-2464*

► **Central Valley Indian Health, Bullard**

*255 W. Bullard Ave., Suite 109, Clovis, CA. 93612-0861*  
*Open: Monday-Friday*  
9:00 - 6:00  
9:00-12:00 & 1:00-6:00  
*Phone: 559-325-5715      Fax: 559-325-5735*

