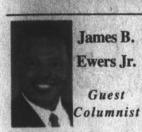
FORUM

The gun violence in Maryland festers America's dark side



Photo by Karen /Big Think



Like an abrasion, gun violence in the United States of America continues to fester and to get worse.

Our nation is known for great things. Our country is revered for its beautiful terrain, its cities both large and small and its major attractions. Our arts, our

food and our quality of life make our country the perfect location to live, to work and to raise a family. We honor and value our diverse cultures and our system of educa-

America is seen as a world leader. Other countries look to us for ideas, innovations and leadership. We have held this position for many decades and while challenged on many fronts, we still hold it today. However, some would argue that our status in the world is slipping. Recent and pending legislation on tariffs and immigration are viewed as detrimental to our position.

The battle going on with immigration in this country is getting worse by the day. Lawmakers are at a cross-roads when it comes to charting a course that will be humane and long lasting. The world is waiting to see

what we will do.

Another problem that America is facing is what to do about gun violence. It is literally ripping our country apart. Gun proponents don't see anything wrong with the current gun statutes. However, those on the other side say that it is much too easy to get a gun in this country.

On last Thursday [June 28], gun violence erupted at the Capital Gazette Newspaper office in Annapolis, Maryland. Jarrod W. Ramos is accused of having a long gun and killing five people and injuring two people in a shooting spree. Multiple questions in my opinion come up about Ramos. First and foremost is, how did Jarrod Ramos get a gun into the building? It could have been that the building didn't have security or metal devices,

which could detect a weapon.

Second, how did Ramos get his hands on this gun? Early reports said that he already had three peace orders against him. That should have raised a red flag suggesting that something was wrong. He had also been on Twitter making vile and threatening comments about the newspaper and one of its employees, Rob Hiaasen. He said that he would like to see Hiaasen "cease breathing." Rob Hiaasen was one of the victims killed by Jarrod Ramos on Thursday.

On Friday, June 29, 2018, the opinion page for the

Capital Gazette newspaper was without opinions. It sim-

ply said, "We Are Speechless."

Tom Marquardt, a retired publisher and editor for the Gazette, said that Ramos was simply a trouble-maker for the newspaper. "I was seriously concerned he would threaten us with physical violence," Marquardt said.

Jarrod Ramos is now in custody and could spend the rest of his life in prison. We are sitting on a ticking time bomb called gun violence in this country. Right now, there is no end in sight. I believe that reasonable lawmakers must lead the effort toward reasonable solutions. Those legislators and lobbyists who have hard line positions regarding this issue are, in my opinion, part of the problem. Unfortunately, at this moment in time, someone in our community is planning the next shooting. That is a sad but true reality.

Gun violence has become a part of America's dark

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The license to kill with immunity



"What's too painful remember, we simply choose to forget." -Barbara Streisand singing the song "The song

Way We Were"

The Tuskegee Institute documented 3,436 Blacks were lynched between 1882-1950. Perhaps, this represents a small percentage of murders due to racism and the fear to report these heinous crimes. Picnics, celebrations, dinners, music, dancing, laughing, mailed photographic post cards were part of this ritual of carnage. This led to the creation of the NAACP.

Martin Luther King Jr., Malcolm X, Medgar Evers, Trayvon Martin, Eric Garner, Stephon Clark and Tamir Rice are only a few names embossed on obituaries

as the choirs sang "Precious Lord Take Hand," "Amazing Grace" and "Pass Me Not, Oh Gentle Savior." Folks quietly walk behind shiny black luxury limousines during unforeseen family reunions. Rivers flowing from watery eyes are mirrors of broken hearts.

Tragically, an average of 10,000 Black men are killed each year. We have naively become numb and delusional with nervous self-imposed sighs of relief that Baltimore, New York, Baton Rouge, Cincinnati, Detroit, Jackson, Birmingham, New Orleans, Detroit. Newark, and Chicago, but not our town, are cities with the most annual deaths. However, as old folks say, "What goes around comes around," and "What's good for the goose is good for the gander."

Impromptu eulogies, long sermons, flowers, repasts, money in envelopes, prayers, sympathy cards and well-wishes are not able to bring solace. Weeping out of control is catastrophic for a mother whose son is dressed in a black suit, white shirt, ebony neck tie with excessive make up. (He looks so peaceful and no longer has any pain or stress.) She wants her son to breathe again, smile, laugh and tell more silly jokes. Gosh, memories of his first heartbeat as an embryo during the gestation period flushes throughout her

memory bank. The parents of boys, brown, black and darker than blue have the piercing sensation of cinder blocks on their chests, shoulders and backs every time their sons leave home "breathing" with a swagger, hoodies and sense of invincibility. The nightly news, ringing of the phone or doorbell, stimulate a rapid heart beat until their baby walks through the door. However, authentic experiences of Black parents include fear they have not instilled essential skills to keep their sons from being killed

Despite irreputable evidence of innocence, our young men are too often shot in the back, heart or torso. Complaints are ridiculed, even with eye-witnesses and

Social media, revisionist scholars, tel-

evision, magazines, newspapers and commentaries make zealous efforts to rewrite, but can't unwrite history.

Mirrors in our hearts include visually engraved images of our men and women lying on the ground in handcuffs, which remind us of slaves chained by the hands and feet. History is Black America's current inseparable reality.

Emboldened men with an arrogant sense of superiority, erroneously believe a tweet, birth entitlement, war resolution and court rulings divinely entitle them to certify licenses to kill with immunity.

We shall overcome some day. What day? Dead or alive?

James Bond had a license to kill, but that was in the movies. This is real life/death. Next? You? Me? Stop killing

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Tips on safely returning, staying home after hospital visits



A smooth transition of care truly dictates a healthy patient outcome beyond the hospital walls. Hospitals now have transition of care teams whose primary duty is to ensure proper maintenance of health status following a discharge. They have these teams in place to

simplify discharge processes and to help patients avoid medication related issues post discharge.

Transition of care teams also aid in the transition for caregivers, pharmacists, and other care providers in the community by passing on pertinent information that is essential in maintaining stability in the patient's health. Though the objective is to make the transition seamless, a lot of times the information overload can be quite overwhelming for all those involved in the transition. Being overwhelmed is where mistakes start to happen, follow up appointments are missed and medication related issues

Anyone who has spent time in the hospital hopes to not return for a long time. Unfortunately, that hope to maintain stability in health status upon returning home

can be challenging to say the least. The usual culprits that affect a healthy stability are simple precautionary steps that are missed or ignored during the transition from hospital back to home.

Here are some tips to help with transitioning from the hospital back to home:

*Keep all discharge paperwork all in the same place,

*Ask for a follow up date upon being discharged.

*Know when, where, who, and what the follow up is. *Notify your primary care provider of your hospital

visit as soon as possible. *Keep your current medication list up to date and readily available.

*Share discharge papers with your community pharmacist, who may ask to make copies to be reviewed later.

*Take your discharge medications as directed.

*Follow all discharge instructions as directed. *Most importantly, show up to your follow-up visits. This is critical for proper continuum of care.

For post-discharge issues related to medications, efforts from the community pharmacist can help. At the community pharmacy, patient's medications are updated promptly and accurately based on notes from the discharge papers. Old medication that has been removed from the patient's profile can be properly disposed of at some community pharmacies to prevent accidental consumption from either the patient or kids.

A clinical community pharmacist will also help simplify patients' medication regimens, monitor for adverse events, remind patients of upcoming follow up appointments and look at long term medication affordability to see if there are better options. Sometimes the community pharmacist will follow up with the patient days after the encounter as a part of maintaining proper health care.

The process of medication reconciliations, updating medication lists and sharing discovered information with patient's care provider at the community level allows the patient/caregivers to make a smooth transition with minimal stress at a reasonable pace.

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