



About Breast Cancer

Breast cancer is the second most common cancer among women, after skin cancer. It is a disease in which cells in the breast grow out of control. Cancer cells can also spread, or metastasize, to other parts of the body.

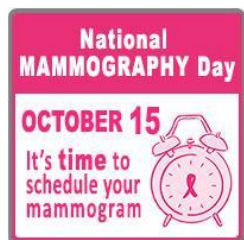
What symptoms should I look for?

- New lump in the breast or underarm (armpit).
- Thickening or swelling of part of the breast.
- Irritation or dimpling of breast skin.
- Redness or flaky skin in the nipple area or the breast.
- Pulling in of the nipple.
- Nipple discharge other than breast milk, including blood.
- Any change in the size or shape of the breast.
- Pain in the breast.

These symptoms can happen with other conditions that are not cancer.

✓ **If you notice any of these symptoms, talk to your health care provider right away.**

SOURCE: CDC.GOV



Breast Cancer Screening

What is a Mammogram? A **mammogram** is an X-ray picture of the breast. Doctors use a mammogram to look for early signs of breast cancer. Regular mammograms are the best tests doctors have to find breast cancer early, sometimes up to three years before it can be felt.

Tips for Getting a Mammogram:

- ✓ Try not to have your mammogram the week before you get your period or during your period. Your breasts may be tender or swollen then.
- ✓ On the day of your mammogram, don't wear deodorant, perfume, or powder. These products can show up as white spots on the X-ray.
- ✓ Some women prefer to wear a top with a skirt or pants, instead of a dress. You will need to undress from your waist up for the mammogram.

SOURCE: CDC.GOV



Medicine Chest Yearly Check-Up

Keep a Record of Your Medicines.

- **List all the prescription and over-the-counter medicines**, vitamins, dietary supplements, and herbals you take.
- **Bring this list with you when you see your doctors** and any other health care

professional. It is very important that each of them knows what medicines you are taking. The list should include:

- Name of the medicine
- Doctor who prescribed it
- How much and how often to take
- Instructions on how to take the medicine
- What it is taken for and any expected side effects.

It's also important to **get rid of expired medicines** you may have.

The information provided here is for general informational purposes only and is not intended to be nor should be construed as medical or other advice.

Newsletter Comments and Contributions: Please contact harveygrossmd@ehmhealth.org



- 1 Take time to get a flu vaccine.
- 2 Take everyday preventive actions to help reduce the spread of germs that cause respiratory illnesses like flu.
- 3 Take flu antiviral drugs if your doctor prescribes them.



Finding Safety and Support

Domestic violence is a pattern of abusive behaviors that adults and adolescents use to control their intimate or dating partners. It can include *physical, sexual* and *emotional abuse*, and *other controlling behaviors*. **Safety planning is key.**

Here are some suggestions:

- ✓ **Consider telling others you trust**, such as friends, family, neighbors and co-workers, what is happening and talk about ways they might be able to help.
- ✓ **Memorize emergency numbers** for the local police, support persons and crisis hotlines. **National Domestic Violence Hotline** is **1-800-799-SAFE (7233)**. Secure online chat: **thehotline.org**
- ✓ **Identify escape routes and places to go** if you need to flee from an unsafe situation quickly.
- ✓ **Talk with your children and/or other household members** about what they should do if a violent incident occurs or if they are afraid.
- ✓ **Put together an emergency bag** with money/ checkbooks, extra car keys, medicine, and important papers such as birth certificates, social security cards, immigration documents, and medical cards. Keep it somewhere safe and accessible, such as with a trusted friend or at your place of work.
- ✓ **Trust your instincts** — if you think you are in immediate danger, you probably are. If you are afraid for your safety and want the police to come to where you are now, **call 911**.

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“**STARS CAN'T SHINE WITHOUT DARKNESS.**”

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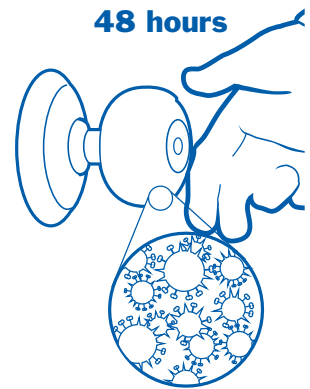
REMINDERS for Your Office Visit

- Bring your **prescription bottles** or **list of medication** to your visit.
- Do you need **medication refills**? Tell us at your office visit.
- Did you let us know if you have **any change(s) in your personal information** such as address, phone number and insurance?
- Do you need a **Referral for a Specialist** or do you need **further testing outside of our office**? You may need to call your insurance plan to verify your coverage.
- Did you check if your plan **covers Well care or a Physical**?
- Are you up-to-date on your screenings for **Mammogram** and **Colonoscopy**? **Are you due for one?** Ask your MD.
- Are you being referred by your PCP to get any **radiology test(s)**? If so, please let us know in case you need a **Pre-certification**.
- Is your **Immunization record** up to date? Please update us.
- Are you **Pre-Diabetic**? Have you discussed this with your MD?
- Did you get a **Summary of your Visit** today? If not, please ask for it before leaving.
- Do you need to make a **Follow-up appointment**? **Please stop at Check-out and make an appointment before you leave.**

Cleaning to Prevent the Flu

How long can the flu virus live on objects, such as doorknobs and tables?

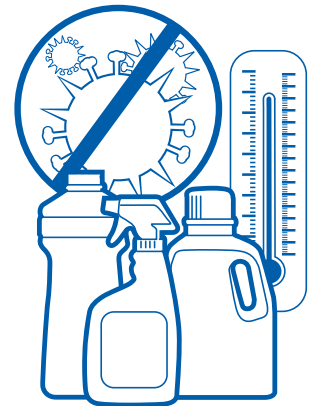
The flu virus can “live” on some surfaces for up to 48 hours. Routine cleaning of surfaces may reduce the spread of flu.



What kills flu viruses?

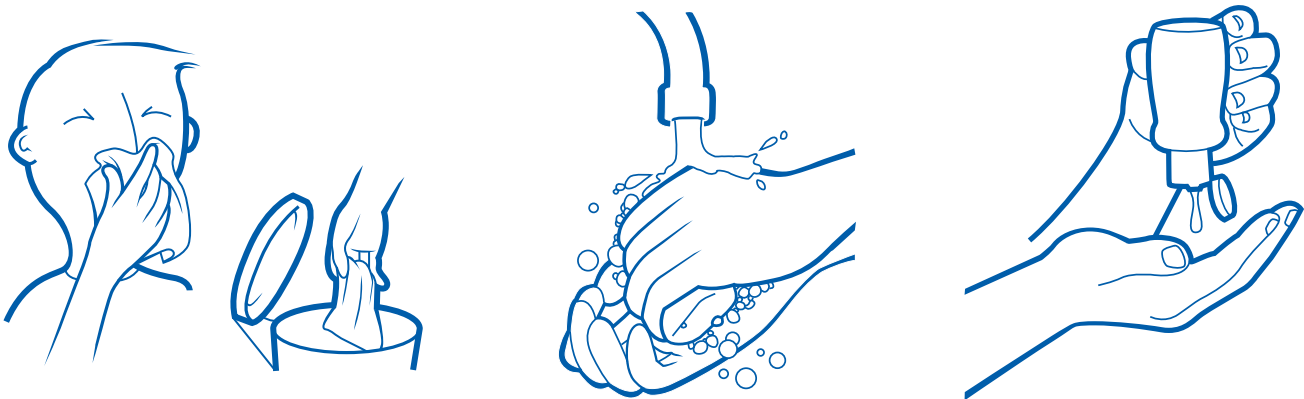
Flu viruses are killed by heat above 167° F [75° C]. Common household cleaning products can also kill the flu virus, including products containing:

- chlorine
- hydrogen peroxide
- detergents (soap)
- iodophors (iodine-based antiseptics)
- alcohols



How should a caregiver handle a sick person's tissues or other items?

Make sure to wash your hands after touching the sick person. Also wash after handling their tissues or laundry.



For more information call CDC info at 1-800-CDC-INFO (232-4636) or go to www.cdc.gov/flu.



OCTOBER 12-18: Bone and Joint Health National Action Week

Osteoporosis

Osteoporosis is a disease of the bones that causes bones to become weak and break easily. Osteoporosis affects mostly older women, but prevention starts when you are younger. No matter your age, you can take steps to build bone mass and prevent bone loss. Broken bones from osteoporosis cause serious health problems and disability in older women.

Q: Who gets osteoporosis?

A: Of the estimated 10 million Americans with osteoporosis, more than 8 million (or 80%) are women.

Osteoporosis is most common in older women. In the United States, osteoporosis affects one in four women 65 or older.

Q: What are the symptoms of osteoporosis?

A: Osteoporosis is called a “silent” disease. You may not have any symptoms of osteoporosis until you break (fracture) a bone. Fractures are most common in the hip, wrist, and spine (vertebrae). Vertebrae support your body, helping you to stand and sit up.

Fractures in the vertebrae can cause the spine to collapse and bend forward. If this happens, you may get any or all of these symptoms:

- Sloping shoulders
- Curve in the back
- Height loss
- Back pain
- Hunched posture

Q: What causes osteoporosis?

A: Osteoporosis is caused by bone loss. Most often, the reason for bone loss is very low levels of the hormone estrogen. Estrogen plays an important role in building and maintaining your bones.

The most common cause of low estrogen levels is menopause. After menopause, your ovaries make very little estrogen. Some women lose up to 25% of bone mass in the first 10 years after menopause.

Also, your risk for developing osteoporosis is higher if you did not develop strong bones when you were young. Girls develop 90% of their bone mass by age 18. If an eating disorder, poor eating, lack of physical activity, or another health problem prevents you from building bone mass early in life, you will have less bone mass to draw on later in life.

Q: How is osteoporosis diagnosed?

A: Your doctor will do a bone density test to see how strong or weak your bones are. A common test is a central dual-energy x-ray absorptiometry (DXA). A DXA is a special type of x-ray of your bones. This test uses a very low amount of radiation.

Your doctor may also use other screening tools to predict your risk of having low bone density or breaking a bone.

Q: Do I need to be tested for osteoporosis?

A: Your doctor may suggest a bone density test for osteoporosis if:

- You are 65 or older
- You are younger than 65 but have risk factors for osteoporosis. Bone density testing is recommended for older women whose risk of breaking a bone is the same as or greater than that of a 65-year-old white woman with no risk factors other than age. Ask your doctor or nurse whether you need a bone density test before age 65.

Q: How is osteoporosis treated?

A: If you have osteoporosis, your doctor may prescribe medicine to prevent more bone loss or build new bone mass. Your doctor may also suggest getting more calcium, vitamin D, and physical activity.

These steps may help prevent fractures, especially in the hip and spine, that can cause serious pain and disability.

Q: How can I prevent osteoporosis?

A: You can take steps to slow the natural bone loss with aging and to prevent your bones from becoming weak and brittle.

- Get enough calcium and vitamin D each day.
- Get active. Choose weight-bearing physical activities like running or dancing to build and strengthen your bones.

- Don't smoke.
- If you drink alcohol, drink in moderation (for women, this is one drink a day at most). Too much alcohol can harm your bones.
- Talk to your doctor about whether you need medicine to prevent bone loss.

Q: Should I take a calcium supplement?

A: It's best to get the calcium your body needs from food. But if you don't get enough calcium from the foods you eat, you may want to consider taking a calcium supplement.

Talk with your doctor or nurse before taking calcium supplements to see which kind is best for you and how much you need to take.

For more information...

about osteoporosis, call the OWH Helpline at 800-994-9662 or contact the following organizations:

Food and Drug Administration (FDA), HHS
888-463-6332 • www.fda.gov

National Institute on Aging (NIA), NIH, HHS
301-496-1752 • www.nia.nih.gov

**NIH Osteoporosis and Related Bone Diseases
National Resource Center, NIAMS, NIH, HHS**
800-624-BONE • [www.niams.nih.gov/
health_info/bone](http://www.niams.nih.gov/health_info/bone)

American Bone Health
888-266-3015 (Bone Health Hotline)
www.americanbonehealth.org

National Osteoporosis Foundation
800-231-4222 • www.nof.org

The Office on Women's Health is grateful for the additional reviews by:

- National Institute of Arthritis and Musculoskeletal and Skin Diseases staff
- Susan Randall, M.S.N., RN, FNP-BC, Senior Director, Science and Education, National Osteoporosis Foundation

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 www.facebook.com/HHSOWH

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 www.youtube.com/WomensHealthgov

www.womenshealth.gov | 800-994-9662



OCTOBER is Bullying Prevention Month

FACT SHEET

stopbullying.gov

Bystanders are Essential to Bullying Prevention and Intervention

Bullying can have significant mental, developmental, and social effects, which is why it is a public health concern. When it comes to prevention many people can take an active role to intervene – especially bystanders. A bystander to bullying is anyone who witnesses bullying either in person or in digital forms like social media, websites, text messages, gaming, and apps. When bullying occurs, bystanders are present 80 percent of the time.¹ A bystander has the potential to make a positive difference in a bullying situation, particularly for the youth who is being bullied. When youth who are bullied are defended and supported by their peers, they are less anxious and depressed.² When bystanders to bullying intervene, bullying stops within 10 seconds 57 percent of the time.¹ Sometimes adolescents and young adults who witness bullying are not sure what their role is and or what they can do to address bullying.³



Bystander Roles

Bystanders can play different roles in bullying situations:

- **Outsiders** witness the bullying situation, but stay out of it and do not get involved.⁴
- **Defenders** help by intervening when bullying occurs¹ or extend support to the person being bullied – privately or in the moment – or take other actions to address the bullying.
- **Reinforcers** support the youth who bullies or bullying behavior¹ and may laugh, encourage, or cheer during or after the bullying incident.²
- **Assistants** help the individual doing the bullying and join in. For example, an assistant may physically restrain or block the target of bullying so that they cannot get away.²

Cyberbullying has also been linked to psychological problems. Kids who have been cyberbullied reported higher levels of depression and thoughts of suicide, as well as greater emotional distress, hostility, and delinquency compared with peers who were not.

While bullying can lead to psychological problems, kids who have mental health concerns to begin with are also more likely to be bullied. Therefore, this is a complex cycle that is not easy to study and understand.

Why Bystanders Intervene or Not

There are many reasons why youth may or may not intervene or defend the target of bullying.

Some reasons bystanders **do not** intervene or respond to the bullying include:

- Fear of retaliation and being bullied themselves.^{4,3}
- Fear of losing their social status.³
- They are not friends with the target of the bullying.⁴
- Lack of knowledge about the individuals involved, the incident, and whether they perceive someone to be right or wrong in the situation.^{2,3,4}
- Awareness about a specific situation that takes into account the people involved and information about their on-going actions.³
- They do not believe teachers or school staff will address the bullying.³
- They believe that adults will make the bullying worse.
- They do not know what to do to intervene or address bullying.³

Bystanders **do** intervene or defend the targets of bullying because they:

- are friends with the target of bullying⁴
- are [morally engaged](#)³ and treat others with respect or believe “bullying is wrong”
- consider how serious or dangerous the behavior is and how frequently it occurs³
- view the target of bullying as innocent³
- have empathy and sympathy for the target of the bullying³
- believe teachers or school staff will appropriately address bullying³

Prevention and Intervention

Bystanders can take positive actions to prevent bullying and to address it while it is happening or after it occurs. Parents, teachers, and other caring adults can recommend safe ways that bystanders can prevent, intervene, or address bullying.

Prevention steps include:

- Being inclusive by welcoming or inviting others to join their activities and groups.²
- Being a role model for pro-social behavior by showing kindness, respect, and empathy for others.
- Walking or sitting with or near vulnerable kids who may be targets of bullying.
- [Getting involved](#) with bullying prevention efforts at school or in the community.

Bystander interventions during a bullying incident may include:

- Defending the target of the bullying.
- Intervening as a group.²
- Changing the subject.
- Questioning the bullying behavior.
- Using humor to lighten up a serious situation.
- Openly stating an objection to bullying.
- Stating approval of the victim and validating his or her social status.

Bystanders can address bullying after it happens by:

- Reaching out privately to the target of bullying to express support or concern.
- Reporting the bullying to a trusted adult, parent, teacher, or school administrator.
- Reaching out privately to the person doing the bullying to express concern, if they feel safe to do so.

Teachers and Schools

Teachers and schools play an important part in helping students understand their roles in bullying situations. When teachers and schools address bullying consistently, students have an expectation that the role they play in bullying matters. Teachers can conduct [activities](#) to enhance student’s social emotional learning and provide safe strategies for supporting their peers.² [Adults](#) in schools can also be role models, reward positive social behavior, and set the tone for healthy social relationships. By understanding the different roles they play in bullying situations, bystanders can take positive actions to address and reduce bullying.

1. Espalage, D., Pigott, T., Polanin, J. (2012) A Meta-Analysis of School-Based Bullying Prevention Programs’ Effects on Bystander Intervention Behavior. *School Psychology Review*, Volume 41, No. 1, 47–65
2. Salmivalli, C., (2014) Participant Roles in Bullying: How Can Peer Bystanders Be Utilized in Interventions?, *Theory Into Practice*, 53:4, 286-292, DOI: 10.1080/00405841.2014.947222 To link to this article: <https://doi.org/10.1080/00405841.2014.947222>
3. Forsberg, C., Wood, L., Smith, J., Varjas, K., Meyers, J., Jungert, T., and Thornberg, R. (2018) Students’ views of factors affecting their bystander behaviors in response to school bullying: a cross-collaborative conceptual qualitative analysis, *Research Papers in Education*, 33:1, 127-142, DOI: 10.1080/02671522.2016.1271001 To link to this article: <https://doi.org/10.1080/02671522.2016.1271001>
4. Thornberg, R., Tenenbaum, L., Varjas, K., Meyers, J., Jungert, T., & Vanegas, G. (2012). Bystander Motivation in Bullying Incidents: To Intervene or Not to Intervene? *Western Journal of Emergency Medicine*, 13(3), 247–252. <http://doi.org/10.5811/westjem.2012.3.11792> <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3415829/>

Source and Research Limitations

This report includes the most up to date research on bullying, but it is important to note that this research has several important limitations. Most of the research is cross sectional, which means it took place at one point in time. This type of research shows us what things are related to each other at that time, but cannot tell us which thing came first or if one of those things caused the other to occur.

Another limitation is that many of the studies use self reports to identify who bullied or was bullied and to capture symptoms or experiences. While the use of self report is common in bullying research, it can result in biases or errors. The study participants must report information accurately, and some children may not want to admit to others that they have been bullied or have bullied others.

stopbullying.gov



Support Groups @ Englewood Hospital

Englewood Hospital Events Calendar

Please check Englewood Hospital's Calendar of Events link for upcoming events at

<https://www.inglewoodhealth.org/calendar-events-classes>

Bariatric/Weight Loss Surgery Support Group

A free program for patients who have experienced the surgical solution to weight loss. If you are considering surgery, you are also welcome to join the group. The support group meets on the first Tuesday of each month at 6pm.

Bereavement Support Group

VNA of Englewood: Bereavement Support Group runs on Thursdays from 12pm – 1:30 pm at Englewood Hospital. Please check with the hospital main desk for the location on each Thursday. For additional information, please call Erica DiFrancisco at 201-894-333, group facilitator.

Cancer Support:

Breast Cancer Support Group

Relax your mind as you connect with other women living with breast cancer. Open to all women experiencing any stage of breast cancer. First timers should call Cathy Verhulst at 201-608-2162 prior to attending. The support group meets the first and third Friday of every month at 10:30 am.

Oral, Head and Neck Cancer Support Group

SPOHNC (Support for People with Oral, Head and Neck Cancer), a patient directed, self-help organization founded in 1991 by an oral cancer survivor. It is non-profit organization dedicated to meeting the emotional, physical and humanistic needs of oral head and neck cancer patients and their care givers. Bergen County Chapter meets from 7pm – 8:30pm at Englewood Hospital on the fourth Wednesday of the month in conference room "A". For inquiries, please contact Patrick Taaffee at 201-931-6394.

Cardiac – Visiting Hearts: A Support Program for Cardiac Patients

New patients are informed of the "Visiting Hearts" program prior to their day of Pre-Admission Testing. For more information, please call Robyn Giaccone at 201-894-3950.

Diabetes Education

A free program is open to individuals and their families. This group allows participants to share their experiences, learn from others and discuss how they live with diabetes. Guest speakers are often featured. This group meets on the fourth Tuesday of every month from 7pm – 8:30pm. (No meetings in July and August). An Insulin Pump Support Group is held quarterly for those using an insulin pump, those interested in pump therapy, and those using multiple daily injections. To schedule an appointment or for additional information, please call 201-894-3335.

Support Groups @ Englewood Hospital

Families Anonymous

Families Anonymous is a group of concerned relatives and friends whose lives have been adversely affected by a loved one's addiction to alcohol, drugs or related behavioral problems. All who have experienced the effects of a loved one's addiction are welcome.

The group meets at Englewood Hospital every Friday at 7:30pm. Call 917-836-3672 or email gerilam@msn.com for more information.

Neuropathy Support Group

This group meets on the third Thursday of March, April, May September, October and November at 7pm. Call Rich Booz at 201-587-1250, Mary Robertson at 973-226-1535, Tom McCullum at 201-692-9313 or Dean Lewis at 631-223-8416 for additional information.

Post Partum Services / Wellness Wednesdays

You and your newborn child are invited to attend our group, focused on adjustment to motherhood, coping with stress, and adapting to new family dynamics. A licensed clinical social worker facilitates the sessions, which provide comfort, emotional support, information, and referrals to resources for new moms who are adjusting to parenthood. The group meets every Wednesday at 1pm. Registration is required. Call 201-894-3092.

Support Groups @ Holy Name Medical Center

Free Support Groups meet monthly. To register call 1-877-465-9626, unless otherwise noted.

Bariatric Support Group

Support Group for Lap-band or Gastric Bypass patients

Location: Conference Room "1", Marian Hall Holy Name Medical Center. For additional information, please call 201-833-3336

Bereavement Support

Call 201-833-3000 ext 7580 for more information.

Breast Cancer Support and Discussion Group

The Breast Cancer Support and Discussion Group is a vehicle for information, encouragement and support that is facilitated by two clinical psychologists. The support group meets on the first and third Wednesday of every month at 5:30pm – 6:30pm.

Call 201-227-6008 for additional information. Registration is encouraged, but not required. Walk-ins are welcome.

Cancer Support Group

The Cancer Support Group provides an opportunity to meet with people who understand how you feel and what you are going through in a way that others cannot. The support group meets on the second and fourth Tuesday at 4:00pm – 5:00pm. The meetings take place in the Marian Hall Conference Center, Holy Name Medical Center. For additional information, please call 201-227-6008.

Support Groups @ Holy Name Medical Center

Men Living with Cancer Support Group

The Men Living with Cancer Support Group is open to men with the diagnosis of cancer at any time during treatment or post-therapy.

For additional information, please call 201-833-3392.

Support for Korean Cancer Patients

The Support group meets at Medical Affairs Conference Room, Holy Name Medical Center on the first Friday of every month at

10am – 12pm. For additional information, please call Hei Young Yoon at 201-833-3332.

Pregnancy and Newborn Loss Support Group

The support group meets on the first Tuesday of each month at 8:00pm. For additional information, please call 201-724-4093.

Blood Drive at Holy Name Medical Center

You can sign up for the blood drives online: <http://holyname.org/BloodDrive/>

Local Support Group - Miscellaneous

Dental Care at Southeast for Independent Living (SESCIL)

The Southeast Senior Center for Independent Living has fully equipped dental facility with a certified licensed dentist, a dental coordinator, and two dental hygienists, excellent equipment and a clean environment. Call the Center for an appointment.

There is an annual membership fee which entitles the member not only to receive dental care at cost but includes participation in all other class offerings. The Center, 228 Grand Avenue, Englewood, is handicapped accessible with ample parking.

For more information, call 201-569-4080 or [visit www.SESCIL.org](http://www.SESCIL.org)

Library Offers Continuing Education Courses Online

Teaneck Public Library is offering Universal Class, an online resource of more than 500 continuing education courses, to all Teaneck Public card holders. A wide range of subjects are offered including art, photography, office skills, test preparation, career training, as well as home schooling, self-help and science. Courses are accessible online 24/7 with real instructors, assignments and grades.

Up to five courses may be taken at a time. Participants who successfully complete a course will be issued a “Certified of Course” Completion.

To access the program, go to the library’s website at www.teaneck.org and click on “universal class” button on the right side.

For more information, call the Reference Department 201-837-4171.

Local Support Group - Miscellaneous

The Township of Teaneck Provides Free Transportation for Residents who are 65 or older and/or Disabled

This service is for medical appointments, food shopping and small errands (with Teaneck, Hackensack, Englewood, and fringes of Bogota, Bergenfield and River Edge). Call 201-837-7130 ext 7040 for more information.

Jewish Family Services at 201-837-9090 provides the following services:

- Kosher Meals on Wheels (at home delivery of meals)
- Care Management, support and advocacy
- Friendly Visitor, Adopt a Bubbe and Telephone Reassurance – Volunteer programs
- Joy Lunch Club
- Elder Care Workshop Series

The Teaneck Fire Department offers all Teaneck Residents the Free Service of a “Good Morning” Wake-up Call

This service is particularly appropriate for those facing significant illness, frailty/balance issues, and/or are shut-ins.

Call Lt. David Barrett or Lt. Richard Burchell at 201-837-2085 to activate this service. Calls can be pre-empted by the recipient at any time for convenience.

The Gallen Adult Day Care Center at the Jewish Home at Rockleigh will hold a

Caregiver support group every first Wednesday of the month, 10am – 11:30 am at 10 Link Drive, Rockleigh, NJ – Social Hall 1. FREE.

For additional information, please call Social Worker Shelley at 201-784-1414 ext. 5340. Share concerns in an informative group discussion and learn about available resources for you and your loved one.

Treatment Services

Seabrook House – Helping Families Find the Courage to Recover

Seabrook House is multi-level premier inpatient and outpatient facility, internationally recognized, and accredited by CARF (Commission on Accreditation of Rehabilitation Services), alcohol and drug rehabilitation center. Each facility offers every level of inpatient and outpatient care from partial through one-on-one counseling.

They offer the following services: Withdrawal Management (Detoxification), Residential Treatment, Partial Hospitalization, and Intensive Outpatient. They also offer Extended Care Programs: Seabrook House West, Changes for Women/Young Adult Program, Recovery Enhancement Program. They offer “The Family Matrix Program”, a three-day, structured experience designed to help families begin to heal and strengthen the bonds strained by addiction. They provide Holistic Approaches to Treatment such as Equin Therapy, Music Therapy, Yoga, Acupuncture, and many more. Please call for details. Seabrook House accepts many health insurance programs.

Treatment is covered by most insurances. For more information, visit www.Seabrookhouse.org or call 800-761-7575 ext. 1515