

MATURE Lifestyles

Mind & Spirit

June 2014

The Retreat: A place for older adults to solidify sobriety

**BY SUE WEBBER
CONTRIBUTING WRITER**

Fay M., now 64, said she had been “drinking and having fun for 45 years.” But then it wasn’t fun anymore.

“As you get older, it doesn’t get better,” said Fay, whose first marriage ended as a result of her drinking. “I didn’t want to do it the rest of my life. I wanted to enjoy life and not be a hopeless drunk.”

In April 2013, Fay decided to join the Older Adults Program at The Retreat in Wayzata. The Retreat is a residential recovery program that relies on the Twelve Steps of Alcoholics Anonymous. It is not a treatment center, nor does it offer clinical or medical services. It is designed to offer support and education to people over 60 who have been addicted to alcohol or drugs.

The Retreat’s Older Adults Program is an eight-week outpatient program offered each Monday and Wednesday.

“It’s based on spirituality, serenity and service, something I’d never found before, even though I had quit drinking several times,” Fay said. “This time I accepted and embraced addiction recovery and it finally made sense to me. It’s the best thing I’ve ever discovered.”

The first person she met when she came to The Retreat was Mike Jamison, director of Non-Residential Programs.

“He asked me to stand up and push against the wall as hard as I could,” Fay said. “Then he said, ‘Did you move it?’ When I told him I didn’t, he said, ‘See, you can’t do it alone.’

“That has always stuck with me,” she said.

Fay has been married to her second husband for 12 years, and she continues to attend Alcoholics Anonymous meetings.

Even though Fay has completed The Retreat’s program, she continues to return as an alum.

“I’ve made so many friends there,” Fay said. “Going back keeps me in the program. The more people I tell about what I’m doing, the better it is for me. This is really the ticket. I can’t say enough about it.”

She and other alums like to welcome new people to the program because they know it’s sometimes hard to face a new group when you have physical, emotional and even legal issues to handle.

“We’re a welcoming group; that’s a big part of my life,” Fay said.

The Retreat’s program stresses service to others, and Fay has found that giving back makes her feel better, too. So she volunteers through her church and other organizations.

John Curtiss, president of The Retreat and the Community of Recovering People board of directors, said the board spent a year researching everything they could find on senior citizens and chemical dependency.

“We found that aging is a tsunami as baby boomers approach 65 and over,” he said. “There will be 10,000 persons turning 65 every day for the next 19 years. That will amount to a huge shift in aging and complexities of society.”

That population is much more likely to take multiple prescription drugs and be much more vulnerable to addiction, Curtiss said.

“Seniors are using more and more mood-altering sleep and pain medications and combining those with alcohol,” he said. “Maybe Dad has four or

five drinks a day, but now his body is less able to metabolize that. Now one drink may have a much more significant effect.”

In addition, those seniors have gone from running businesses, raising families and being active in the community, to a time when the phone has stopped ringing, he said.

The Retreat wanted to do something to offer support, Curtiss said.

“We want to help redefine the next step of life for them,” he said. “We want to help them find meaning, purpose and mission.”

The Retreat has found it is dealing with three critical levels of denial in society:

- People who are used to using alcohol every day say, “I don’t have a problem.” They see it as a moral failing and sign of weakness.
- The family is in denial and shies away from addressing the problem.
- Institutional denial sometimes even occurs, for example, at an assisted living facility that refuses to accept the fact that there might be a problem in their community.

“They have happy hour from 5-6 p.m. that puts everybody to sleep, but no one wants to face it,” Curtiss said.

The Retreat’s Older Adult day program runs from 9 a.m. to 3 p.m. each Monday and Wednesday, and includes lunch.

“You get to be surrounded with others in your same age group, and they’re talking about real issues like dependence, loneliness and anxiety,” Curtiss said.

Some AA meetings at The Retreat are specially designed for Older Adults, ages 55 to 80. The average age is upper 60s and into the 70s, according to Curtiss.

Participants must be at least detoxified and sober, and must be physically and psychologically stable, he said.

Steve Crane, coordinator of the Older Adults Program, said participants often come to The Retreat as an after-care program, following a stint in a detox facility or a 30-day residential program.

“Our older adults program has a really good track record of helping people stay sober longer,” Crane said.

Mike Jamison, director of The Retreat’s Non-Residential programs, said some participants are motivated to join the program because of legal trouble, such as a DWI. Others may come because a son or daughter will ask them to get help for their addiction.

“My satisfaction is seeing people who have found long-term relationships and friends to do things with,” Jamison said, adding that many alumni come back regularly for well over two years after leaving the program.

Statistics show that 57 percent of the general population at The Retreat is clean and sober 12 months after leaving, Curtiss said.

Half of the facility’s inpatient program serves people from outside Minnesota; 10 percent are from other countries.

The cost of the eight-week program is \$1,500, and scholarship help is available.

The Retreat is at 1221 Wayzata Blvd. E., Wayzata. Information: 951-476-0566, www.theretreat.org, or www.facebook.com/theretreatonline

Background: A peaceful path on the grounds at The Retreat is a place to seek serenity. (Submitted photo)

The image features a man in a workshop, focused on hammering a wooden chair. The background wall is covered with a complex flowchart of Medicare-related questions and terms. A prominent yellow callout box is overlaid on the chart, containing the following text:

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The flowchart includes the following text elements:

- Can I keep my doctor?
- Late enrollment penalty
- Premiums?
- Coinurance and copays
- Brand name drugs
- Generic drugs
- Deductibles
- Part D Prescription Drug Coverage
- Who covers what?
- Part C Combines Part A, Part B and usually, but not always, Part C
- Covered vs. non-covered services
- How do I enroll in Part D?
- Is original Medicare enough?
- Service areas
- Do I need a referral to see a specialist?
- Coverage gap
- Do Medicare plans have dental coverage?
- Benefit periods

Mobility assist dog brings daily joy to Apple Valley woman

**BY SUE WEBBER
CONTRIBUTING WRITER**

When Sue Youngberg moved into a retirement center in Lakeville, she said, “I had an empty hole in my heart. I’d always had a pet.”

Youngberg uses a power wheelchair because she has had syringomyelia for almost 40 years. It is a rare neuromuscular disorder that has resulted in her now having triplegia. She has lost the use of both legs and one arm.

She’d had a pet Sheltie dog that had to be put down, and then she tried to work with a little dog she adopted from a shelter, but she wasn’t able to train it.

“I was resigned to thinking I couldn’t get another dog because the training was so difficult,” Youngberg said.

But then a maintenance man who worked at her retirement facility and is a member of the Lions told her about Can Do Canines, a New Hope-based firm that trains mobility assist dogs.

Youngberg applied and was accepted, and then moved to an Apple Valley living facility in 2011. She waited a year before meeting her new canine partner in 2012.

“It was hard not to call every day,” Youngberg said.

The wait was well worth it, she said. Her partner, Bali, a black Labrador retriever who was 16 months old when Youngberg got her, was the first Can Do Canines graduate dog to be raised by inmates at the Sandstone Federal Prison in Sandstone, Minn.

While Bali worked with inmates at the prison, the dog got furloughs to go home with prison employees and become more socialized in stores and restaurants.

The prison inmates who worked with Bali taught her to give puppy kisses, and the dog has stuck to her regimen of a kiss for her owner each night before bed, always rewarded with a doggie treat.

A Minnesota native with a degree in international relations from the University of Minnesota, Youngberg worked in marketing and sales during what she calls the computer industry’s “heyday” in Silicon Valley until her disability meant that she could no longer do the extensive offsite traveling that was part of her job. She quit working in 1997 and returned to Minnesota later to be closer to family.

When she first went to meet Bali,

Youngberg said, “She was everything I’d wanted. We had instant bonding. Bali came up and put her head on my lap and that was it.”

What followed was some specialized training at Youngberg’s home, so Bali could adapt to her needs.

“I’m paralyzed on my right side, and sometimes my arm slips off my wheelchair,” Youngberg said. “Bali was trained to put her nose under my arm and lift it so I could grab the arm with my other hand and pull it over.”

At first, Bali thought it was a game, and then Youngberg started laughing. The fun and laughter has continued to be a big part of their relationship.

“After you get used to the dog, you take a public accessibility test at the mall,” Youngberg said.

Bali had to be able to push hand-capped buttons. In the food court, she had to follow instructions to leave a bag of French fries on the floor where she found them, rather than to pick them up.

Now, the dog is able to retrieve water from the refrigerator for Youngberg by tugging on a rope tied to the handle, opening the door, getting the water, and nosing the door shut. Bali also retrieves Youngberg’s phone for her.

Bali helps with the laundry, too, by tugging a rope tied to the laundry basket in the bedroom and pulling it through Youngberg’s apartment to the washer. Then she removes each piece of dirty clothing and gives it to Youngberg to place in the front-loading washer.

“When the wash is done, Bali pulls each piece out of the washer one by one and gives it to me to put in the dryer,” Youngberg said. “She’s literally my right hand. I can’t imagine life without her.”

Now that she has an assist dog, Youngberg is able to go out more. She is available for demonstrations, speaking to Lions groups, and other public appearances as needed.

In the meantime, she and Bali continue to perfect new ways of working together. And they have fun at the same time.

“She loves going to the dog park, and she has play dates with another assist dog that lives in the building,” said Youngberg, who has enlisted the help of a friend to make a video about Bali.

“Bali is like my child,” Youngberg said. “She’s a real ham.”

Can Do Canines provides five different types of specially trained dogs: Mobility



Sue Youngberg gets lots of affection from Bali, her black Labrador retriever. Bali, who was raised by inmates at the Sandstone Federal Prison, came to live with Sue Youngberg in 2012. (Submitted photo)

Assist, Hearing Assist, Autism Assist, Seizure Response, and Diabetes Assist, and works one-on-one with each client and his or her dog.

Dogs are placed with clients free of charge. The only thing the client pays is a \$50 application fee. Each client must be responsible for the care of the dog once it is placed, so they must have the financial ability to buy food, and cover veterinary expenses once the dog is with them.

Julianne Larsen, director of training at Can Do Canines, said all of the clients have to go through an application process before they are accepted into the program.

“Once the paperwork portion is com-

plete we schedule an interview with them in their home,” Larsen said. “During the interview we discuss the applicant’s individual situation and how a dog might be able to help them in their daily life. We also answer any questions they may have and discuss what working with an assistance dog entails. At that time we also assess their ability to care for a dog and their living environment to ensure it is safe for a dog.”

There is monthly follow-up on each Can Do Canines client for six months, either by mail or by phone. After that, follow-ups are conducted yearly.

Help is available anytime a client needs assistance, Larsen said.

Mary Jo Copeland: 'Minnesota's Mother Teresa,' Ramstad says



Mary Jo Copeland, above, prays with clients at Sharing and Caring Hands, after washing their feet. She provides new shoes and socks for clients, if necessary. (Submitted photos)

**BY SUE WEBBER
CONTRIBUTING WRITER**

Mary Jo Copeland, a 25-year resident of Brooklyn Center, arrives at St. Alphonsus Catholic Church by 2 a.m. each day. She spends the next five hours praying and then attending daily Mass before her workday of service to the needy begins.

“My energy comes from God,” said Copeland, 71, who has been serving the poor for decades. She founded Sharing and Caring Hands 29 years ago in Minneapolis.

Before 8 a.m., Copeland arrives at the location on North 7th Street near downtown Minneapolis where she feeds and ministers to poor people – especially children – each day. The facility serves 20,000 people a month. Clients in need can get help there with clothing, shelter and bill-paying assistance if necessary.

Before 1985 Mary Jo had been a regular volunteer at Catholic Charities, an organization that helps the poor. She was recognized that year for her volunteer service by KARE-TV, as one of their “Eleven who Care.”

Using a \$2,200 stipend that came with the award, she began her own outreach to the homeless and poor.

Her plan was to provide services through volunteers, from local churches and organizations.

Sharing and Caring Hands’ first location was in a storefront on Glenwood Avenue on the edge of downtown Minneapolis. To gain support for the operation, Copeland undertook a campaign of preaching to church congregations at their Sunday services.

She set up showers and a free clothing store in the basement of the building, where the poor and homeless could clean themselves. She bought gloves, mittens and shoes to supplement the donated clothing in the Free Store.

Sharing and Caring Hands bought its first building in 1988, and its clientele changed from predominantly male street transients to mothers with small children.

“People come to us so sad and broken,” Copeland said. “We talk with the people who come to us and try to give them some joy and peace.”

In the early days, Copeland began a tradition she carries on even today. She washes the feet of the poor, and provides new shoes and socks if necessary.

“It’s a humbling way to serve,” she said. “Their feet are so bad; sometimes in the winter they’re frostbitten.”

In 1990, the facility was expanded; the work was

completely paid for by private donations.

Copeland is, as she always has been, the main fundraiser, the recruiter of volunteers and director of the shelter. She has recruited different church groups for each day of the month to buy, prepare, bring in and serve 1,000 noon meals each day. After 29 years, some of the original groups still are serving today.

In addition to meals and housing, the facility offers free dental and medical care, and helps clients buy eyeglasses. Copeland also assists some needy people with buying uniforms, work boots or bus cards so they can work. She has even paid for caskets and funeral flowers for families who are unable to afford them.

Her facility receives no funding from the state or federal government, or the United Way, she said.

“Everything is from individual donations,” said Copeland. “I just need to keep focused on opening the doors and taking care of my people.”

A native of Rochester, Minn., Copeland graduated from the Academy of Holy Angels in Richfield in 1960. She and her husband, Dick, a DeLaSalle graduate and St. Thomas College student, were married in 1961. The couple has 12 children, and Mary Jo stayed

How to handle the telephone scam call

The favorite tool of many scammers is the telephone. Each and every day, shady operators work the phones to defraud consumers and business owners. Though there's no way – short of disconnecting your phone – to protect yourself completely from phone scams, there are things you can do to reduce your risk of becoming the next victim, according to the Better Business Bureau of Minnesota and North Dakota.

If you receive a phone call from someone who makes threats, tells you that you've won a cash prize (or sweepstakes) or demands immediate payment in regards to a debt you're unfamiliar with, those are all signs the call is likely fraudulent. If you receive calls like this, or requests for personal information, BBB advises the following:

- Don't panic. If the calls are abusive or if the callers threaten you with arrest, stay calm. Keep in mind that scammers are hoping that you'll pay them off quickly just to make the matter go away. Always get verification of any alleged debts in writing. Remember, legitimate collection agents cannot threaten you with arrest, and even if you owe a debt, you still have rights through the Fair Debt Collection Practices Act.

- Never give out any financial information, such as your bank account, credit card or Social Security numbers over the phone.

- Be realistic. You can't win a lottery or contest you

didn't enter, and if you have to pay money upfront to receive your "winnings," you haven't won anything.

- Think about what you're being told. If a caller claims to be with your bank or your credit card company and wants your account information so they can verify it, they aren't telling the truth; your bank and your credit card company already have this information.

- Listen closely. If the caller uses poor grammar and/or has a heavy accent, be on alert. Many fraudulent calls originate overseas.

- Trust your instincts. If something doesn't seem right to you, end the call or ask the caller to call back later, after you've had time to research their claims.

- Don't rely on caller ID. Another phone scam which has been making the rounds again lately is the "one-ring" scam. This scam targets cellphone owners and tries to entice people to dial an unknown number back by ringing just once and then disconnecting. People who return these calls don't realize they're calling international numbers – with normal-looking prefixes such as 473, 809, 876, 284 and 268 – in the Caribbean, where charges can add up quickly. If you receive a call from an unknown number, it's best to let it go to voicemail.

Suspicious phone calls can be reported to BBB (bbb.org) or the Federal Trade Commission (ftc.gov). Contact the BBB at bbb.org or 651-699-1111 for more info.



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Left: In February 2013, Copeland was selected to receive a Presidential Citizens Medal from President Barack Obama in Washington, D.C. Above: Copeland with children. (Submitted photos)

Copeland

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home with them until they were all in school.

“When the kids were all in school, I needed to give to the world,” she said. “So I started volunteering.”

She said she promised God that she would further his kingdom if he would give her a spot in which to do it.

“God has blessed this work,” she said.

Her work has been noticed nationally. In February 2013, Copeland got a call from the White House, saying she’d been selected to receive a Presidential Citizens Medal, the second highest civilian honor. It was given to just 17 of 6,000 nominees in 2013.

The plaque Copeland received from President Barack Obama credits her with “sparkling hope in those who need it most.”

“Her unyielding vision for stronger neighborhoods has inspired people nationwide and her compassion for the poor and the marginalized speaks to the depth of the human spirit,” the plaque said.

Copeland said she cried on stage when the president presented the award to her.

“I didn’t want to cry, but I couldn’t help it,” she said. “I couldn’t believe I was there. It was God’s honor. He’s given me the grace to do what I do. I told the president I prayed for him.”

Jim Ramstad of Wayzata, who represented Minnesota’s Third District in

the U.S. House of Representatives from 1991-2009 (and also served in the Minnesota Legislature from 1987-90), said he first met Copeland in 1991.

According to Ramstad, Copeland “really is Minnesota’s Mother Teresa.”

“Mary Jo personifies the words of President John F. Kennedy’s inaugural address in 1961, when he said, ‘Here on Earth God’s work must truly be our own,’” Ramstad said.

Copeland subsequently was one of two principal speakers at the National Prayer Breakfast in Washington, D.C., when George W. Bush was president.

“She did a magnificent job,” Ramstad said. “It was so inspirational. I’ll never forget it.”

“Retirement” is not a word in Copeland’s vocabulary.

“You can rest in eternity,” she said. “I won’t retire. I’ve got to complete the work God gave me to do, and then he will take me home.”

Until her work with the needy is done, Copeland relaxes by walking and watching a little TV, and she and her husband spend some time at their “hideaway”: Broadway Pizza in Maple Grove. She’s in bed by 6 p.m. each night, ready for an eight-hour respite before she rises again to go to church and then on to work.

Copeland’s husband Dick, formerly a buyer at Rainbow Foods, joined the Sharing and Caring Hands staff 13 years ago.

“I needed someone to help me,” Mary Jo said.

Currently, Sharing and Caring Hands has 14 paid staff members. Copeland takes no salary for her work.

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Hearing Loss and Dementia Linked in Study

Seniors with hearing loss are significantly more likely to develop dementia over time than those who retain their hearing, a study by Johns Hopkins and National Institute on Aging researchers suggests. The findings, the researchers say, could lead to new ways to combat dementia, a condition that affects millions of people world-wide and carries heavy societal burdens.

Although the reason for the link between the two conditions is unknown, the investigators suggest that a common pathology may underlie both or that the strain of decoding sounds over the years may overwhelm the brains of

people with hearing loss, leaving them more vulnerable to dementia. They also speculate that hearing loss could lead to dementia by making individuals more socially isolated, a known risk factor for dementia and other cognitive disorders.

Whatever the cause, the scientists report, their finding may offer a starting point for interventions — even as simple as hearing aids — that could delay or prevent dementia by improving patients' hearing.

"Researchers have looked at what affects hearing loss, but few have looked at how hearing loss affects cognitive brain

function," says study leader Franklin, M.D., Ph.D., assistant professor in the Division of Otolaryngology at Johns Hopkins University School of Medicine. "There hasn't been much crosstalk between otologists and geriatricians, so it's been unclear whether hearing loss and dementia are related."

To make the connection, Lin and his colleagues used data from the Baltimore Longitudinal Study on Aging (BLSA). The BLSA, initiated by the National Institute on Aging in 1958, has tracked various health factors in thousands of men and women over decades.

The new study, published in the February Archives of Neu-

rology, focused on 639 people whose hearing and cognitive abilities were tested as part of the BLSA between 1990 and 1994. While about a quarter of the volunteers had some hearing loss at the start of the study, none had dementia.

These volunteers were then closely followed with repeat examinations every one to two years, and by 2008, 58 of them had developed dementia.

The researchers found that study participants with hearing loss at the beginning of the study were significantly more likely to develop dementia by the end. Compared with volunteers with normal hearing, those with mild, moder-

ate, and severe hearing loss had twofold, threefold, and fivefold, respectively, the risk of developing dementia over time. The more hearing loss they had, the higher their likelihood of developing the memory-robbing disease.

Even after the researchers took into account other factors that are associated with risk of dementia, including diabetes, high blood pressure, age, sex and race, Lin explains, hearing loss and dementia were still strongly connected. "A lot of people ignore hearing loss because it's such a low and insidious process as we age," Lin says. "Even if people feel as if they are not affected,

we're showing that it may well be a more serious problem." Warning signs of hearing loss include difficulty hearing in noisy situations, like restaurants, trouble understanding women's and children's voices, needing to ask people to repeat themselves, problems hearing on the telephone and having to turn the radio and television louder. If you suspect there may be a problem, it is recommended that you get your hearing tested.

The research was supported by the intramural research program of the National Institute on Aging

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