



Keeping in Touch

news & updates October 2023

A Nurse Debunks a Hospital Myth

by Sherie Hatton, BSN, RN, Professional Bowenwork Practitioner and Associate Instructor who lives and works in Mount Ida, Arkansas.



Is Bigfoot real? I cannot say with any certainty. But, as a nurse who worked the night shift for many years, I can tell you one of the biggest myths I have encountered: *while in a hospital, patients get plenty of rest and sleep all night.*

A nurse's job is to look in on patients regularly, monitor vital signs, administer medications, change dressings, bring blankets or drinks, assist to the bathroom....I could go on. Combine that with the patient's own anxiety, pain, confusion, and restlessness and it's no myth: no one sleeps at night in a hospital. The fact is that sick people have to go home to get any rest.

There are patients for whom nursing staff would secretly trade our firstborn if they would just stay in bed and sleep. We have been known to coerce, beg, plead, and even resort to bribery to get these patients to simply sleep. A typical patient in this category is tiny and frail, usually over 90 years of age, strong as a crocodile, and always very confused. The more we encourage and coerce them to stay in bed and fall asleep, the more determined they are to do exactly the opposite!

Here is where I insert a twist on the saying, "If you can't beat them, join them." Many shifts find staff taking turns sitting at the bedside to keep patients occupied. We nod at appropriate times during the rambling conversation, laugh with the wide-awake patient through countless episodes of *Golden Girls* (thanking the heavens for Nick at Nite), or stroll arm-in-arm with them down the empty darkened hallways. We have also been known to sit said patient in a chair at the nurses' station with a pile of towels to fold.

It was on such a night shift that I, as a new Bowenwork Practitioner, decided to see just how relaxing a few moves could be on a medical patient under my care. Normally I do not bring Bowenwork to my nursing table. As a nurse, I am in a professional relationship with the patient and their physician and I do not interfere with that trust and rapport. But after hours of trying to keep a very confused, very unsteady elderly patient from falling, I asked her if she minded if I made some gentle

relaxing moves on her upper back. In response, she leaned forward in her chair (we had given up trying to keep her in bed hours before.) With that consent, I did Lower Back 1 and 2, then Upper Back 1-4.

I will admit, I was surprised when the nurse's aide came to me about an hour later to tell me the patient had finally dozed off while in her chair. We then made her more comfortable, tip-toed out of her room, and peeked in on her for the rest of the shift.

At that hospital, nurses were responsible for drawing the blood for lab tests physicians ordered. The night shift did this in the wee hours of the morning so the results were available to physicians during their morning rounds. I dreaded waking up this patient to draw her early morning lab, but she actually slept through the procedure!

But here is the best part: before that shift ended, the lab called to speak with the nurse who drew the blood for the patient. When this happens, usually it is either to request a re-draw due to the blood sample clotting, the specimen not being enough quantity to gain result, or the result is critical and the physician needs to be notified. We dread getting these calls. To my surprise, the lab technician had taken time from the most hectic and busiest part of her day to praise and thank me! She told me that the blood specimen I drew was one of the best specimens she had seen in her many years of practice. She explained the individual blood cells were full and rounded, not clumped together and nothing hemolyzed (clotted). She was very impressed and wanted me to know. Wow!

Lest you think this was just a nice coincidence, I was able to use Bowenwork on another patient around the same time and produced the same results. This time it was an elderly gentleman who was not confused at all but could not rest due to tremendous pain.

I had cared for this patient several nights in a row and my heart went out to this man who kept me so fascinated with amazing stories of his life experiences. I asked him if I could do a gentle move on his knees that might help him relax and get some rest. He readily agreed. I did "Hit the Lat." A few hours later, I drew his blood and once again received basically the same phone call from the lab. Even more remarkable, he was what we call a "hard stick." In other words, it was very hard to find a vein and then almost impossible to get enough blood to result.



Bigfoot, also known as Sasquatch- a mysterious mythical hairy creature reported to inhabit forests in North America,

Now, as for Bigfoot being real, my verdict is still out. And, as for patients being able to rest in a hospital, that is a myth I can personally lay to rest. But when it comes to the miracle of Bowenwork, the effects are real. I may not be able to "see" what it does under the skin, but I have seen evidence in both microscopic and gigantic ways that Bowenwork creates change in a body, which changes the quality of life for so many of my clients. I have learned to never underestimate how such gentle moves, even one or two, can set in motion effects on the body down to a cellular level.

In-Person:

Bowenwork for Women's Wellness November 11-12th,
9 am - 6 pm. Roseville, CA.
16 CE hrs.

Equine Bowen Level II - Intermediate Equine Bowenwork October 21-22,
9 am - 6 pm. Brainerd, MN.
16 CE hrs.

Online:

These online classes can be started anytime. For more information, click on the class names.

Business Skills for a Successful Bowenwork Practice Online. Ongoing,
16 CE hrs.

Distance Bowenwork Online. Ongoing, 8 CE hrs.

Ethics for the Bowenwork Practitioner Online. Ongoing,
8 CE hrs.

Anatomy by the Modules Online. Ongoing, 6 CE hrs.

Deep Anatomy of SP2 Part 1 Iliacus Release, Gluteal Release, Adductor Magnus Release. Online. Ongoing,
3 CE hrs.

Anatomy and Physiology for Bowenworkers Online. Ongoing,
120 CE hrs.

Workplace Hygiene Health and Safety. Online. Ongoing,
6 CE hrs.

Looking for a class?

Click **here** to use our Find a Class tool. Search by the class you want or your favorite instructor, or search by dates or even by state to find the latest listings of classes available.



Above: Instructor Sandra Gustafson demonstrates the Pelvic move. The pelvic move is an important move in the Bowenwork for Women's Wellness course.

Bowenwork for Women's Wellness

This 2-day, 16-hour CE course focuses on female health issues, from conception towards the end of life, and how Bowenwork may support and optimize well-being at all ages and stages, from teens, pregnancy, menopause, and the elderly. Women comprise a large number of a Bowenwork practitioner's client base, and this class incorporates a paradigm shift from disease management to health and wellness promotion, advocating for empowering women to become aware of and make informed health choices.

Pre-requisite: Module 9. This class involves SP1 procedures in addition to Modules 1- 8.



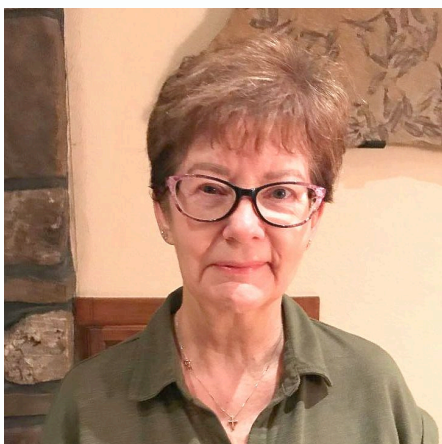
Understanding Bowen from an Ayurveda Perspective

Farida Irani is bringing her CE class, Understanding Bowen from an Ayurveda Perspective to the US in April and May 2024. Farida is a Bowtech instructor teaching in India, Australia, and Taiwan, an Ayurveda practitioner and instructor, and a clinical aromatherapist and teacher. She is the creator of Bowtech Ease, author of The Magic of Ayurveda Aromatherapy, and founder of Subtle Energies, which manufactures and supplies skin-care products and high-grade therapeutic prescriptive blends.

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Practitioner Milestones September and October 2023

Congratulations On Your Achievement!



Professional Bowenwork Practitioner Certification

Dani Hudspeth, TX
(pictured above)
Brenda King, VA
Milena Osborne, TX

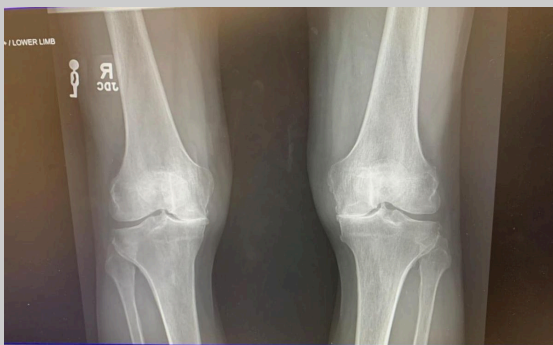


SP-1 Certificate

Amanda Bogle-Oliphant, MO
(pictured above)
Lana Pope, CA
Dvinder Mand, CA



Module 10 and SP1 Review class practitioners in Roseville, CA, September 2023.
Left to right: Dvinder Mand, Jane Sarro, Lana Pope, Nicki Moffatt, Teri Rutherford, Janet Craft, Instructor Sandra Gustafson.



Bone-on-Bone: X-ray of Tom's knees, 6/30/22.

Can I Fix "Bowed Legs?" Tom "Kneaded" to Know

by Maggie Simpson-Ralls,
Professional Bowenwork
Practitioner, who lives and works in
Glendale, Arizona

*The following is part one of two articles that focus on Maggie's work with her client, Tom. Look for part two of the series, **The Bowenwork/Bowtech Aging Process: From 82 Years Old to 82 Years Young!** in the November issue of Keeping in Touch.*

"Tom" has written more than one testimonial since becoming a client. I am sharing his story by merging excerpts from his testimonials here. His comments, with unedited wording, are in *Italics*.

When I came for my first treatment, I had three major health issues. The first issue was severely bowed legs, with walking issues resulting from worsening knee joints, called "bone on bone" by my physician. This caused extreme pain and limited my mobility and ability to function. My second issue was a periodically painful deltoid muscle of the right shoulder... My last issue was lower back pain, a condition I've lived with since I was a teenager.

When Tom first walked into my clinic, his problem question surprised me: "Can you fix bowed legs?"

I said, "I'm not sure, I have not dealt with it before, though my Bowen text says yes, it can be helped."

When questioned further, Tom explained that he'd just been diagnosed as having bone-on-bone deterioration in both of his medial knees. The doctor wanted to do surgery, which he had refused. I should mention that Tom is 80+ years old.

He presented with numbness down his right arm and very bowed legs. I did BRMs 1 and 2, Kidney, Respiratory, Gallbladder (my gut told me to), and the Lats, in order. Following this, he stated his back was humming and that the sensation was going down his legs in waves. Four minutes later it had eased and I did Pelvic, followed by BRM 3. Tom was given our take-home sheet of basic "Bowenwork Client Instructions" which we had read through together.



4/12/23: Tom reports, "I can't believe they don't hurt at all!"

I also gave him instruction and a sheet on the Pelvic exercises to be started in the morning. Pertinent information was reviewed during each successive session. Pelvic and Knee procedures were done in two successive visits. I often do this early on as a "balancer" for the lower body.

During the first treatment with Maggie, I could immediately feel freedom in my upper back and shoulders. As I started to drive home that day, I was able to rotate my head freely without stiffness or pain in my upper back and shoulders. However, as I reached my first stop sign on the drive, I felt a strong muscle discomfort in my right deltoid. From the instructions given at the clinic, I knew this was 'Bowen at work,' so I tolerated this discomfort, careful to not put extra stress on the right side of my upper body. I remember her saying 'Let the body heal itself.' Within 15 minutes the discomfort had subsided totally. ... As you imagine, I was delighted with this outcome.

Within the first two days of the first treatment with Maggie, I began to experience moderate left leg pain above and below the knee. I had done nothing to cause this pain but the muscles began to ache. This pain lasted for about 3 hours and then disappeared completely. I had been instructed that the body would be healing things. It has now been several weeks since that pain occurred, and it has not come back. However, in looking at my legs, they are not as significantly bowed as when I started treatment. The knees are now closer together and I have no fatigue in the muscles around the knees. I am delighted. With the third clinic visit, Maggie confirmed the corrective improvement in the legs was noticeable.

As to the discomfort in my low back, it would depend upon how much I had stressed my muscles and if I was postured correctly or slouching. I noticed after just the first treatment that I no longer had trouble standing from a sitting position and the discomfort was minimized. This was yet another sign to me that the treatment was or is working and that the cause of the discomfort is being resolved.

I am extremely satisfied with the results of my healing sessions and look forward to the continued healing of several more issues using the Bowen Technique as practiced by Maggie and Ray.

Tom shared with me during a recent visit for other issues that he had gone to a Wildlife Park over the weekend and had walked through most of the park, for over

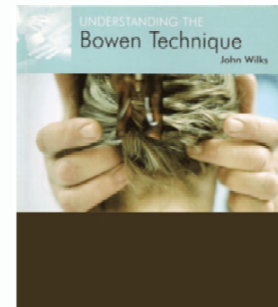
three hours, only sitting at intervals. He expressed his elation and profound wonder at walking comfortably with friends and seeing the sights. He smiled and stated that he actually noticed more than once that he'd forgotten about worrying about the pain. He was almost giddy about being mobile again without being forced to stop or seek help due to knee pain issues. He commented, "I have my life back!"

Looking for some helpful tools to support you in promoting your practice?

PRODUCTS:

Many practitioners find this little book by British author, John Wilks, to be a helpful way to educate clients and new students about the benefits of Bowenwork.

To find this book and other educational materials, or to pay your annual administrative fee, click [here](#).



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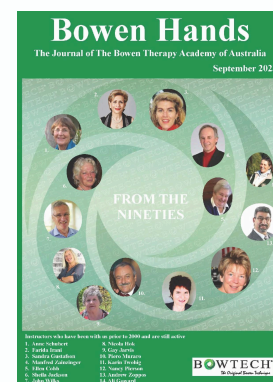
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