MAKING ROUNDS

CAPE FEAR VALLEY HEALTH and WELLNESS MAGAZINE

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> > Pictured on the cover are CAPE able hospitalists Hymavathi Padma, M.D.; Oby Obi-Gwacham, M.D.; and Frederick Asare, M.D.

MAKING ROUNDS[®]

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Letter from the CEO



Emergency department visits and hospitalizations due to diseases of the heart remain among the top concerns facing hospitals today.

That's why I was delighted to read a report from the N.C. Division of Public Health that emergency room visits due to heart attacks fell 21 percent across the state after the ban on smoking in bars and restaurants went into effect.

Dr. Jeffery Engel, the State Health Director, said similar results were seen in other communities where such regulations were enacted. He cited a case where smoking was banned in Helena, Mont., and heart attacks promptly fell. Then the ban was overturned, and the rates rose again.

It is now known that even brief exposure to tobacco smoke can trigger a heart attack in those with heart disease or who are at risk for it. Chemicals in smoke narrow blood vessels and raise blood pressure and pulse rates. Smoke also causes chemical changes in the blood that make cardiovascular problems, including heart attacks more likely, according to the U.S. Surgeon General's office.

On July 4, 2006, Cape Fear Valley's Fayetteville campuses became tobacco free. The reasons for this are many. Smoking slows the healing process in patients. It doubles the risk of wound infections after surgery. Broken bones take almost twice as long to heal in smokers, and post-anesthesia recovery time is 20 percent longer.

We wish all patients would use their hospital stay as a springboard to a tobacco-free lifestyle.

In this issue, you'll read about how the Transition of Care clinic can help patients with congestive heart disease remain healthy and avoid repeat hospitalizations. An important part of this care is encouraging smoking cessation. The clinic has created a brochure to help patients. You can have a copy of the brochure mailed to your home by calling (910) 615-6445 or e-mailing dbyers@capefearvalley. com.

I grew up in a home where both my parents smoked two to three packs a day. When my mom passed away from cancer, my dad quit cold turkey. I was lucky to have never taken up the habit.

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If you are currently a smoker, I encourage you to make 2012 the year you become tobacco free. There are many reasons to do so. Just pick the one that works for you.

Legenthing is Second and the second second

CPR IS GOOD TO KNOW BOTH IN THE CLASSROOM AND IN THE REAL WORLD

[BY DONNIE BYERS]

Brandon Nixon didn't know what to expect when he showed up for a CPR class at his high school recently. But he did know the skill could prove beneficial someday.

When he was younger, the 17-year-old Pine Forest High School senior witnessed his father save a baby's life by using CPR, also known as Cardio Pulmonary Resuscitation. His father learned the lifesaving technique while working in the medical field in the U.S. Air Force.

"Hopefully, I won't ever have to use it," the younger Nixon said, "but it's a nice skill to have."

He just might, however, because of the increasing number of Sudden Cardiac Arrests (SCAs) in the U.S. The American Heart Association says roughly 300,000 Americans suffer SCAs each year, with less than eight percent surviving the attack.

In simpler terms, SCAs kill almost 1,000 people a day or one person every two minutes. That's enough to make it the leading cause of death in the U.S., greater than colorectal cancer, breast cancer, prostate cancer, AIDS, house fires and auto accidents combined.

The condition occurs abruptly and without warning, with two-thirds of victims having no prior indication of heart disease. SCA is not a heart attack, however, which is considered a "plumbing problem" within the heart's blood vessel walls. It's more like an electrical problem where the heart suddenly stops beating, similar to an electronic device losing power.

Sudden Cardiac Arrest can occur in conjunction with a heart attack, however. Sufferers often collapse and stop breathing within seconds. Without treatment, brain death can occur within four to six minutes.

Studies show survival rates dramatically improve if someone begins administering CPR immediately. The rate jumps even higher if CPR is used in conjunction with electrical defibrillation to the heart.

There used to be a time when only EMS or medical staff had the necessary equipment and training to use defibrillators, but modern technology has changed this. Automated Electronic Defibrillators (AEDs) are becoming increasingly common in the U.S and are straightforward to use – meaning more lives can be saved.

Cape Fear Valley Health has more than 220 of the life-saving devices placed strategically throughout the health system just in case of emergencies. Many of the units are placed on walls in plain sight.

The portable devices can increase a patient's survival rate up to 90 percent if used within a few minutes of an attack. But simple chest compressions, even without breathing into the patient's airway, are better than nothing at all, according to Mark Turner, EMS System Development Specialist with Cape Fear Valley Emergency Medical Services.

"People often feel uncomfortable about the breathing part of CPR," Turner said. "But if you don't give early CPR or early defibrillation, our chances of bringing someone back are significantly lower."

In the past year, Cape Fear Valley EMS personnel have responded to 476 cardiac arrest calls. Of those, just 3.5 percent had nearby bystanders willing to perform CPR on the victim. As a result, just 70 of the 476 cardiac arrest patients survived.



Brandon Nixon hopes he'll never have to use CPR, but he admits it's a nice skill to have.



Automated Electronic Defibrillators (AEDs) are becoming increasingly common in the U.S. and are straightforward to use – meaning more lives can be saved.

PUBLIC CPR Class

Saturday, Feb. 11, 2012 5 Sessions: 9 a.m., 10 a.m., 11 a.m., Noon, 1 p.m. Cape Fear Valley Rehabilitation Center Auditorium Room A This FREE, one-hour class will offer basic training in hands-only CPR. To register, call (910) 615-LINK (5465). Michelle Keasling is the Acute Myocardial Infarction (AMI) Coordinator at Cape Fear Valley Health. She said data shows not enough people call 911 at the first sign of chest pain or heart attacks. Doing so would increase the chance victims receive the vital heart defibrillation they need. EMS dispatchers can also instruct callers on how to perform CPR over the phone.

"You're more likely," Keasling said, "to improve the patient's survival even if it's hands-only CPR before the first medical responder arrives."

CPR CERTIFICATION

The half-day-long class Nixon and more than 60 of his Pine Forest classmates participated in taught not only CPR, but also how to use AEDs, on both children and adults. The class, conducted by the Cape Fear Valley Chest Pain Center, also included training for Acute Coronary Syndrome and stroke care – making it far from an easy A.

Any giggles or nervous laughter students let out at the beginning were quickly replaced by collective sighs of relief every time a CPR practice round finished. Students were pumping out doublehanded chest compressions in furious fashion by themselves and in teams, while EMS CPR instructors shouted instructions.

The class was mandatory for most of the students, because they were participating in the school's new Academy of Emergency Medical Science. The inhouse program serves as a learning ground for students interested in entering medical or nursing fields.

Academy graduates gain a competitive advantage for healthcare jobs, because the program provides hands-on training through partnerships with local hospitals and colleges.

Enrollees start off in their freshman year with introductory healthcare courses. They later graduate to advanced precertification courses, like those required to become a CNA or EMT. They eventually undergo clinical training or shadow professionals in their chosen field during their final semester in school.

The one course required of all academy students is CPR certification, because of its understood importance within healthcare. The group CPR class became an in-school offering after Turner approached school officials earlier this year.

"We think every student should have this under his or her belt," said Michelle Quinn, RN, the academy's director. "Students can even become CPR instructors themselves, eventually, and go out and teach it in the community."

By the end of the class, students must pass testing on CPR dummies and a written exam before they can receive their CPR certification card. Nixon and his practice partner, Dakota Blackmon, also a 17-year-old senior, pass with ease.

Afterward, Nixon relaxes, eating some catered pizza before summing up his feelings about his new certification.

"It was a lot of work," he said. "But at the same time, it was a lot of fun. The instructors prepared us well. I still hope I never have to use it, though."

To learn more about Cape Fear Valley Health's CPR certification classes, call Mark Turner at (910) 615-5633.



It was a lot of work, but at the same time, it was a lot of fun. The instructors prepared us well.



Congestive Heart Failure

LEARN HOW TO HANDLE THIS SERIOUS BUT MANAGEABLE CONDITION

BY LIA TREMBLAY

Getting a diagnosis that contains the word "failure" can feel pretty bleak. But despite its ominous name, Congestive Heart Failure (CHF) is a manageable condition that doesn't have to ruin the life you've planned.

More than half a million Americans are affected by CHF. Some are elderly, and some are just starting out in life. Most can continue living happy and productive lives with the help of medication and simple lifestyle adjustments.

WHAT IS CONGESTIVE HEART FAILURE?

Congestive heart failure is a condition in which the heart isn't pumping as well as it should. That means it isn't able to supply enough blood to the body's cells, depriving them of the oxygen and nutrients they need.

The heart initially compensates for this by enlarging or pumping faster. Blood vessels do their part by narrowing, which increases blood pressure to compensate for the loss of heart-pumping power. The body may also divert blood away from less crucial areas to ensure major organs like the brain can get the blood they require.

Those changes only work for a while. Eventually, the lack of adequate pumping leads to symptoms that get your attention.

WHAT ARE THE SYMPTOMS?

Because the heart pumps blood to every part of your body, evidence it is failing includes a variety of symptoms:

Shortness of breath: As blood backs up in the vessels that travel from the lungs to the heart, fluid starts to leak into the lungs. This causes breathlessness, at first during periods of activity and later at rest. You may even wake in the night feeling panicky from the inability to breathe.

Persistent coughing or wheezing: The same backup of fluid can make your breathing labored and noisy. You may also cough up mucus tinged with blood.

Swelling: As blood empties more slowly out of the heart, blood returning to the heart through the veins backs up, causing fluid to flow back into the tissues. This is seen as swelling in the legs and feet. **Tiredness, fatigue:** Because the heart can't pump enough blood for your whole body, blood is diverted away from arm and leg muscles so there is enough for vital organs. Doing things like carrying groceries and climbing stairs suddenly take a lot out of you.

Nausea or lack of appetite: All the blood being diverted to your brain means that your digestive system is receiving less of it. So you may experience digestive difficulties, like feeling full or sick to your stomach.

Confusion and impaired thinking: As blood flow patterns change, fluctuating levels of substances like sodium can affect the brain and result in feelings of disorientation.

Increased heart rate: To compensate for the loss of pumping ability, your heart may simply beat more frequently. This can feel like your heart is racing or thumping in your chest.

WHO IS AT RISK?

All of us lose some heart-pumping ability as we get older, but CHF is the result of additional conditions or habits that particularly stress the heart. Most people with CHF also have coronary artery disease, diabetes, high blood pressure, history of a heart attack, abnormal heart valves, or heart muscle damage from viral infections or certain medications.

In some cases, the condition that led to CHF is not diagnosed until the CHF itself is. That's why regular doctor visits, and monitoring of your cholesterol and blood pressure, are so important.

HOW IS IT TREATED?

In rare cases, CHF is treated with surgery to correct a structural issue. More commonly, it can be managed through a combination of medications and lifestyle changes.

Prescribing medications depend on contributing factors for each patient's CHF. They may include anticoagulants (which decrease clotting in the blood), diuretics (which help the body rid itself of excess fluid) and statins (which control cholesterol in the blood).

Lifestyle changes include things generally recommended for cardiovascular health, like quitting nicotine, maintaining a healthy weight, and enjoying a heart-healthy diet. But CHF patients are especially urged to control excess fluid (which gives the heart more work to do) by keeping sodium intake to a minimum and monitoring changes in their weight.

The changes to your lifestyle and routine may seem daunting at first, but with the right support you can keep CHF under control. You can learn more about living with CHF by attending a free community education event on Feb. 23, at 2 p.m., in the Cape Fear Valley Education Center, located at 3418 Village Drive. For more information or to register, call (910) 615-LINK (5465).

the TRANSITION OF CARE CLINIC

To help people with congestive heart failure (CHF) live longer and healthier lives, Cape Fear Valley's Transition of Care Clinic now offers an education program for CHF patients being discharged from the hospital. In less than an hour, attendees learn how simple changes in their routines can help keep them safe and comfortable – and keep them from ending up back in a hospital bed.

"Little changes can mean a big improvement for patients with heart failure," says Jay Pedersen, RN, BNSc., the health system's Congestive Heart Failure Coordinator. "We teach them how to modify their diets, and to watch for signs that their medication may need some adjustment."

Pedersen says it's as much an education for family members as for the patients themselves.

"It's really important to educate the person who's doing the shopping and the cooking," he says. "For example, these patients need to watch their salt intake, but that doesn't mean just taking the salt shaker off the table. You have to know which foods already contain a lot of salt and avoid those as well."

Patients also learn how to track their daily weights for signs of fluid retention, which puts excessive stress on an already struggling heart.

The clinic has a dedicated pharmacist, nurse and physician assistant for CHF patients. In addition to helping with the education of patients and families, the team can communicate with the patient's primary care provider and assist with medication adjustments.

With a 100 percent patient-satisfaction rate, it's clear that people attending the program are happy with what they've learned. And the community as a whole benefits from a reduction in preventable readmissions to the hospital. Reports show that CHF patients who attended the program are half as likely to be readmitted as CHF patients who did not.

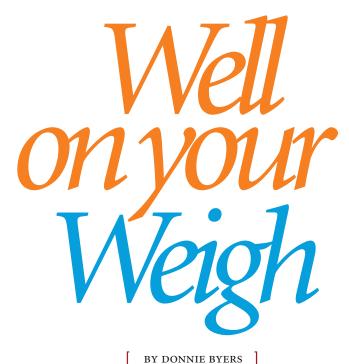
Cape Fear Valley offers a support group and education program to help patients and their family successfully manage CHF. [See page 28.]

Fore more information, call Jay Pedersen, RN, BNSc., at (910) 615- 4809.



An Easy Decision:





How a mother's concern

Like a lot of kids his age, Kenny Fulcher didn't have the healthiest of diets. It was often fast food and sodas for dinner or hearty steaks cooked on the family grill. What wasn't regularly on the menu were proper portions or healthy vegetables.

His mother, Robin, began worrying about his health after noticing his sizeable weight gain and expanding waist size. He was never a skinny child, but obesity had become a fixture in the family. She didn't want him to struggle with the condition all of his life, too.

By age 12, he was five-feet, three-inches tall and 197 pounds. He had also begun developing dark patches around his neck, a telltale sign of diabetes. A yearly physical confirmed his mother's fears: Kenny was diagnosed with obesity, as well as high cholesterol and borderline diabetes.

His family physician could have easily ordered dietary restrictions and more

exercise. But he referred Kenny to Cape Fear Valley's new Well on your Weigh program instead. The childhood weight loss program launched in April, and offers more comprehensive care to its young patients.

Well on your Weigh focuses on weight control and lifestyle changes and works in conjunction with Cape Fear Valley Pediatric Endocrinology. The program is led by Tahmida Jahangir, M.D., a boardcertified pediatrician, and has access to a team of health professionals including a dietitian, patient educator and pediatric endocrinologist.

Patients are often referred by pediatricians or primary care providers, but can also be referred by school nurses, guidance counselors, or even parents. New patients are given initial assessments that include fats from family meals, drinking water instead of sweet drinks, and getting at least one hour of physical activity a day.

The advice has helped many of Dr. Jahangir's patients lose noticeable weight in three months or less. The youngest of her patients is four years old.

Obesity at such a young age used to be a rarity in the U.S., but no longer. Statistics show that nearly one in five children



Robin Fulcher said taking her son to Dr. Jahangir has been a revelation. The pediatrician has done the seemingly impossible and gotten through to Kenny about the importance of losing weight.

The child used to be downright stubborn about diet and exercise. He has since turned into an exercise fanatic, taking up both karate and paintball.

"They call me 'Mad Dog Kenny," he said. "I got my name because the faster your trigger finger is, the louder your bark!"

His mother sheepishly grins and nods in approval.

Kenny's eating habits have also dramatically changed. He'll eat chicken and turkey now, instead of requesting something greasy or

over her son's weight turned into action

a medical history and a physical with appropriate lab tests.

Patients are then screened for everything from diabetes and high blood pressure to a variety of underlying medical problems. The program's team works with the patient on nutrition education and physical activity goals laid out in a personalized treatment plan.

Total family involvement is encouraged, so Dr. Jahangir meets with every family member to learn the family's history of obesity, eating habits, exercise routines and leisure activities.

"We want to make sure both the child and parents understand what's at stake," Dr. Jahangir said. "I try to explain to them that it's important to modify the entire family lifestyle."

That includes cutting out excess carbs and

between ages 2 and 19 are obese. It's the result of childhood obesity almost tripling in the U.S. in the past 30 years, according to the Centers for Disease Control and Prevention.

Closer to home, one in three children ages 10 to 17 are diagnosed as overweight or obese. That's enough to rank North Carolina the 11th highest in childhood obesity in the nation, according to the Eat Smart Move More program of North Carolina.

Dr. Jahangir knows the statistics all too well. It's why she agreed to lead the Well on your Weigh program, long before it opened its doors to patients.

"It was sort of like a leap of faith," she said. "Childhood obesity has become an epidemic in the U.S. I wanted to be the gatekeeper to help build a better future for our children." deep-fried. He still loves the steaks grilled up by his father, Kenny Sr. But the family limits grilling out to just once a week now.

One thing that hasn't changed is Kenny's distaste for vegetables and salads. But his mother will take what she can get. She 9 proudly boasts her son has gone down one shirt and waist size after just a month of joining the Well on your Weigh program.

His mother has also noticed a change in how other kids treat her son since he's begun slimming down.

"The kids are nicer now," she said. "That Dr. Jahangir sure is a life saver!"

Tahmida Jahangir, M.D. CAPE FEAR VALLEY WELL ON YOUR WEIGH



A New Approach:



HOW ULTRA-MODERN TECHNOLOGY IS HELPING TACKLE AGE-OLD PROBLEMS

BY ANNA HALEY

Just hearing the word hysterectomy makes many women cringe with fear. Whether it's the incision, the hospital stay or the lengthy recovery time, the subject seems to be one most women don't want to talk about.

Now there's a better option for women facing hysterectomies. Using the da Vinci[®] Robotic Surgery System, doctors can perform complex hysterectomies and other gynecologic procedures through the tiniest of incisions. Traditional open gynecologic surgery, using a large incision for access to the uterus and surrounding anatomy, has for many years been the standard approach to many gynecologic procedures. Yet with open surgery can come significant pain, trauma, a long recovery process and threat to surrounding organs and nerves.

Fortunately, less invasive options are available. Some gynecologic procedures enable surgeons to access the target anatomy using a vaginal approach, which may not require an external incision. But for complex hysterectomies and other gynecologic procedures, robotic-assisted surgery with the da Vinci® Surgical System may be the most-effective, leastinvasive treatment option. Through tiny, 1-2 centimeter incisions, surgeons using the da Vinci® System can operate with greater precision and control, minimizing the pain and risk associated with large incisions, while increasing the likelihood of a fast recovery and excellent clinical outcomes.

"Using the da Vinci[®] System," says Paul Sparzak, D.O., "we can do all the same surgeries we used to do with conventional methods, but with better results for the patients."

Dr. Sparzak says the da Vinci[®] System is better than a surgeon's hand in some ways.

"The robotic system seamlessly translates my hand movements into corresponding micro-movements of the miniaturized instruments positioned inside the patient," he says. "You can move tissue around more delicately causing less injury during a procedure."

Dr. Sparzak has been using the da Vinci[®] at Cape Fear Valley since April, but he has many years of da Vinci[®] experience under his belt. He completed a fellowship in minimally invasive gynecological surgery and robotic surgery at Halifax Medical Center in Daytona Beach, Fla.

"I saw firsthand patients who had suffered from female symptoms for years get relief from just a few small incisions," says Dr. Sparzak.

No one understands the benefits of having the da Vinci[®] Surgical System at Cape Fear Valley more than Mary Knadler. After years of suffering from heavy menstrual cycles and painful fibroids, Dr. Sparzak recommended a partial hysterectomy for her.

"At first I was reluctant to undergo a hysterectomy," says Knadler. "Having never been under general anesthesia, surgery was a huge deal for me. But after hearing the incisions would be minimal, the recovery time would be short and the fact that Dr. Sparzak had so much experience, I said: 'Let's go!'"

Knadler went into the surgery hoping for at least some degree of relief from her symptoms. Since having the operation and getting through the initial recovery process, Knadler feels like a different person.

"I went home from the hospital the day after the procedure," says Knadler. "Within two weeks I was pretty much back to normal and completely painfree."

Minimally invasive surgery using the da Vinci[®] robotic system isn't just for hysterectomy patients. Robotic surgery can be used to treat fibroids, abnormal periods, endometriosis, ovarian tumors, pelvic prolapse and female cancers. Gynecologists can

the da Vinci[®] System is better than a surgeon's hand in some ways.

perform hysterectomies, myomectomies and lymph node biopsies, virtually eliminating the need for large abdominal incisions.

"The da Vinci[®] system is somewhat more involved for the physician but it offers many big advantages for patients," says Arnold Barefoot, M.D. "Minimally invasive surgery is so much better because it means less pain, fewer complications, less blood loss, shorter hospital stays, lower risk of wound infections and quicker recovery times. It's really a winwin for the patient!"

Minimally invasive surgery isn't for everyone. If you've had previous abdominal surgeries, scar tissue sometimes prohibits this type of surgery. Anyone who needs gynecological surgery should discuss their options with their gynecologist.

Dr. Sparzak and Dr. Barefoot are currently the only physicians in Fayetteville who perform minimally invasive gynecologic surgery using the da Vinci[®] robotic system. Both take selfreferrals, so any interested patients can call for a consultation.

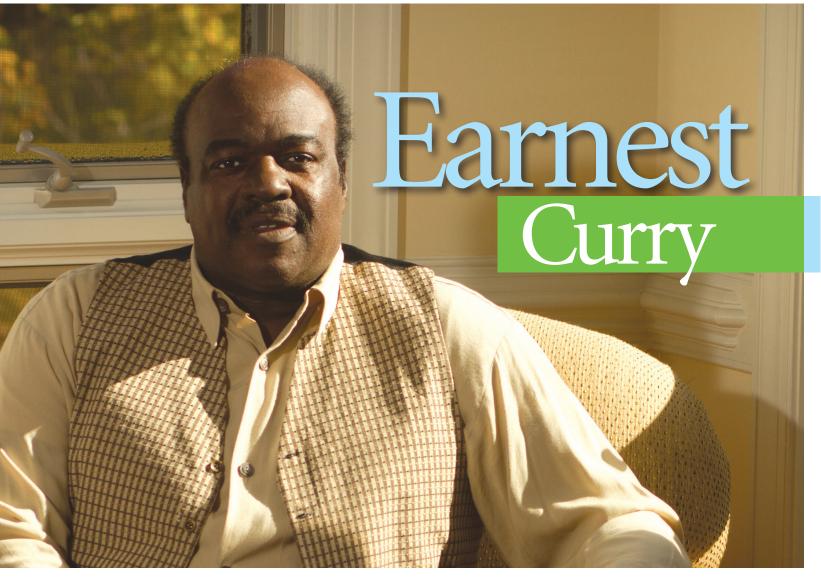
"I've seen laparoscopic hysterectomy come a long way since I performed my first one in the early 1990s," says Dr. Barefoot. "If someone needs gynecological surgery, da Vinci® robotic surgery can be a superior alternative to conventional surgical techniques."



Arnold Barefoot, M.D.



Paul Sparzak, D.O.



A Man For All Seasons

BOARD MEMBER EARNEST CURRY TAKES EVERYTHING HE DOES IN STRIDE

[BY DONNIE BYERS]

Earnest Curry may talk with a laid-back southern drawl, but he can hold an intelligent conversation with the best of them.

The retired computer programmer is equally adept at debating politics and technology as he is musing about the pleasures of baiting a fishhook or cooking up deep-fried southern cuisine.

The Mobile, Ala., native quickly learned the importance of a well-rounded education after his mother rebuked pleas by his high school football coach to let the budding star play. The elder Curry wasn't about to risk her son's future after his cousin suffered a serious neck injury on the playing field. "That ended my football career pretty quick," said Curry with a hearty laugh. "Luckily, I was still pretty smart."

Smart enough to graduate sixth in his class. Any college football scholarships he may have lost were easily replaced by academic scholarship offers. He eventually chose to go to Clark University in Atlanta, Ga., to major in mathematics.

The school had just 1,200 students at the time, but the cozy campus suited Curry's small-town tastes. He also met his future wife, Blanche, there. The two have since been married for almost 40 years.

After graduation, Curry decided to pursue his master's degree in mathematics at The Ohio State University. It's the largest public university in America, with an equally large student enrollment. But the campus numbers were miniscule compared to the exorbitant numbers he had to crunch in math class everyday.

In 1974, Curry left Ohio with his second degree and accepted an entrylevel programming job with IBM in Poughkeepsie, N.Y. He admits to stumbling into the field. He thought his future would be in the classroom teaching, not working on conference room-sized computer mainframes. But his interviewers were impressed by his knack for solving problems.

"That's what programming is all about," he said, while shrugging his shoulders.

His new job required him to learn programming languages for the first time, but Curry dove in with enthusiasm. Within two years, he had worked up the corporate ladder enough to transfer to IBM's Raleigh location. He worked there for a decade before transferring to Tampa, Fla. A few years later, he transferred back to Raleigh when his wife accepted a position at Fayetteville State University. The couple decided to live in Fayetteville with their two children, Langston and Saramarie, because Curry could telecommute from home.

The couple didn't plan on staying in Fayetteville forever, but the city and its friendly atmosphere quickly grew on them. Curry has since retired and now works as a technology consultant from home.

"I fell in love with the place," he said. "It reminded me of Durham two decades ago, before the big-city crime and traffic congestion set in."

Curry constantly talks up Fayetteville's All-American City designation and wants the city to continue to grow. He willingly serves on public boards and committees, such as Cape Fear Valley's Board of Trustees, to do his part.

I would want everyone to walk away from Cape Fear Valley having the same kind of feelings I had

He agreed to serve on Cape Fear Valley's board because of his positive experiences with the health system over the years. That includes a three-week stay in the Intensive Care Unit, which he describes as simply "fantastic."

"I want everyone to walk away from Cape Fear Valley having the same kind of feelings I had," he said.

Curry obviously has a strong interest in the health system's computer and medical technology, such as the new CyberKnife® robotic surgery system. He's also excited by the Cape Fear Valley's transformation into a true regional healthcare provider. He says more service locations are the key to providing better healthcare in any community.

If he's not at Cape Fear Valley then he's probably serving as a president or board member with Habitat for Humanity, TIPS (Teen Involvement Projects), Fayetteville State University's Foundation, 100 Black Men of America, or the Cape Fear chapter of Kappa Alpha Psi fraternity.

That's a pretty busy schedule for someone who still actually works for a living. But if Curry has learned anything in his 30 years working with computers, it's multitasking.

His love for technology creeps into his leisure time too. He's a fan of all things digital and enjoys serious couch-time with his remote control and HDTV. He giggles with almost childish delight while admitting to "eyeing" a larger, 3D highdefinition television as a future purchase.

"You can see the whiskers on the back of ______a person's neck," he said.

> Curry also loves spending time with his grandchildren, Danavan and Tatianna, whom he both adores, and watching his equally beloved Carolina Panthers play on fall Sundays. If there's no game on, then

you might catch him driving to the coast to go deep-sea fishing. It's not quite a contact sport, but it's as close as it's going to get for this avid fisherman.

Looking back, Curry doesn't regret having to give up the old pigskin in favor of leather-bound books after his mother put her foot down. Not one iota of regret, at all.

"I say get a bachelor's degree whenever and wherever you can," he said, "because then you'll be an achiever with a degree."



Cape Fear Valley Health Foundation supports the healing mission of Cape Fear Valley Health. Through the generosity of caring individuals and corporations in our community, the Foundation is able to provide help, hope and healing to families in need right here at home. The Foundation and its Friends groups work with granting agencies, area businesses, national corporations, community leaders, caring neighbors, parents, physicians, Cape Fear Valley employees and others to raise funds to support these programs and services.

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When her 15-year-old son, Alec Seeburger, was scheduled for brain surgery at Cape Fear Valley, Krista Ragsdale traveled 14 hours from her home in Indiana to be by his side.

But what started as a limited visit for a first surgery turned into an eightmonth stay at Cape Fear Valley's Stanton Hospitality House.

Alec's story was featured during the 28th annual Light of Life treelighting ceremony on Nov. 27. Guests watched as more than 100 lights were illuminated in honor or in memory of their loved ones. Lights were purchased for one season or for a lifetime. Money



Kathy Verkuilen, Administrative Director (left), and Alec Ragsdale, Honorary Guest, countdown to the Lighting of the Tree

raised from the event benefits Stanton Hospitality House, a temporary residence for those whose family members are hospitalized in Fayetteville.

Alec, who lives with his father in Fayetteville, was diagnosed with noncancerous brain tumors after he lost complete sight in his left eye and partial sight in his right. MRI scans showed three tumors. Two of the tumors were removed. But two days after surgery, Alec had a massive stroke that left his right side and his vocal chords paralyzed. He had trouble swallowing, talking and breathing and had to have a feeding tube.

"I've been on a leave of absence from my job in Indiana for the past eight months," Ms. Ragsdale said. "Alec's recovery is a long one. It would be nice if he just had to recover from a stroke. But his future is not that. And hopefully me being here makes a difference in his life. And I know that it does. If you ask him, he will tell you that it does."

> With the support of his family, and after months of physical therapy and treatment. Alec is able to once again eat without a feeding tube. He has also regained some mobility in his right side. But the steps to a full recovery are still long and uncertain.

> > "Alec still has

a tumor in his head that cannot be removed surgically," Ms. Ragsdale said. "So his life is, at some point, up to God. And he knows that, He's almost 16. He doesn't want to live his life in the whatifs. And he's always positive and he's never, ever, ever waivered."

While he recovers, Alec can count on continued support from his family.

"Without the Stanton House there is no way I could have stayed," Ms. Ragsdale said. "Everyone here has been wonderful. It is like my home away from home. And I am forever grateful."



LAURA BULLARD

Instead of gifts, eight-year-old Laura Bullard asked friends to donate books to Cape Fear Valley Health Foundation's Friends of Children for her birthday. Laura donated the books to Development Manager Veronica Coleman for hospitalized children to enjoy during the holidays.

SPIRIT HALLOWEEN

The Dickerson family, owners of Spirit Halloween Store, provided Halloween costumes and gifts for children hospitalized at Cape Fear Valley Medical Center. They also threw a Halloween party for children attending the Coming Together Children's Support Group at Cape Fear Valley Cancer Center. Spirit, located on Skibo Road, graciously supports Cape Fear Valley Health Foundation's Friends of Children through their Spirit of Children program each year. Over the past two years, they have donated more than \$6,000 to Friends of Children!

MARY DAYTON

Mary Dayton (center) recently donated an XBox 360 and Kinect gaming system and three games to Cape Fear Valley Health Foundation's Friends of Children. She is pictured presenting the system to Anna Diegmann, RN, (left) and Michelle Smith, RN, (right) from Cape Fear Valley Children's Center. The system will be used by hospitalized pediatric patients.



TO MAKE A CONTRIBUTION

We gratefully accept checks, credit cards and cash to support our patients in need. Checks (made out to Cape Fear Valley Health Foundation) may be sent to: 101 Robeson Street, Suite 106 Fayetteville, NC 28301 Attn: Donor Relations Coordinator

If you'd like your gift to be used for a specific area in the hospital, please make a notation on the memo line of your check.

If you'd like to make a gift by credit card, please contact our office at (910) 615-1358.

TRIBUTE GIVING

If you'd like your gift to honor or remember a loved one, or to celebrate a special occasion, please let us know. We will send an acknowledgement to the person you are honoring or to the family of those you are remembering. When sending a tribute gift, please let us know the name and address of the honoree or the name and address of the person you wish to receive acknowledgement of your gift. If you have questions, please call (910) 615-1285 and we will be happy to help you.

THIRD PARTY OPPORTUNITIES AND PROCESSES

Cape Fear Valley Health Foundation appreciates the many groups and organizations throughout our region who have raised money on our behalf. If your business, social club, civic group, church, sorority, fraternity, scout troop, sports team, class or other group plans to have a fundraiser on our behalf, please contact our office at (910) 615-1285. We ask for advance notice of at least one month prior to your planned event so that we may give you the paperwork and guidelines needed for approval to use our name, logo or other information.

Cape Fear Valley Health Foundation BOARD of DIRECTORS

Cape Fear Valley Health Foundation Board of Directors elected officers for the 2012 term and approved the selection or reappointment of board members.

ELECTED OFFICERS ARE:

Lucy Jones, President Thomas Costello, Vice President Duane DeGaetano, Secretary Jimmy Townsend, Associate Secretary Graham A. Bell, Treasurer John G. Buie, Jr., Associate Treasurer

BOARD MEMBERS ARE:

B. Ray Adcock Frances H. Bowyer William M. Brooks, Jr. Jesse H. Byrd Scott Cameron, M.D. Tony Cimaglia Katie Crenshaw Frank Dawkins John Dawson Alisa Debnam Michael Green Bill Hurley Joseph Levister, Jr. Susan Lock Maureen McNeill Lonnie M. Player Liza Shah Sanj<mark>eev Sleh</mark>ria, M.D. Margaret Stanton Kathy Fuller Wright

Cape Fear Valley Health Foundation supports and helps advance the healing mission of Cape Fear Valley Health by supporting services in a compassionate environment for all people in partnership with our community.







The annual Ribbon Walk & Ride took new steps this year with more teams and sponsors. (Photos on opposite page.)

On Saturday, Nov. 5, approximately 620 walkers and 40 riders set out on foot or motorcycle from Festival Park on a cold and blustery day to honor or remember cancer patients close to their heart. With 20 new sponsors and 15 teams, the Ribbon Walk raised more than \$60,000 with donations still coming in.

This year, the impact of the walk was felt as far away as Spain, where the Johnson family (pictured below) joined the walk aboard their cruise from Spain to Texas. Walking in honor of a friend who has breast cancer, Melissa Johnson and her husband, Jonathan, along with their daughter, Janell, set out around the upper deck track to complete their walk on the same day and time as the Ribbon Walk held in Fayetteville.

"People were interested in what we were doing," Melissa said. "I met a few people who wanted to share their own stories about cancer. My daughter and I talked about cancer and what the walk meant. She didn't know she had her own story about cancer. Her grandmother passed away from leukemia before she was born."



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PACER SPONSORS

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Express Employment ERA Strother Real Estate

Beasley Broadcasting Group Panera Bread (Fayetteville Location) Sew & Sews Place The Fayetteville Alumnae Chapter of Delta Sigma Theta Incorporated The Fayetteville Observer

Phi Beta Sorority Inc. Margaret Stanton Perkins Management, Inc. Pizza Hut Buffalo Wild Wings Chick-fil-A Fayetteville (Skibo Road & Ramsey Street Locations)

Family Medical Supply Fleur de Lis Design & Events Hendrick Chrysler Jeep 17 Highland House Rehabilitation & Healthcare Biostrategies Group, Inc. Matco Tools Medical Arts Family Practice Monkey Joe's Vause Equipment Company Twisted Jeweler M25 Ministries of NC Affordable Portables Little Caesers M.A.D. Moving Kickin'Chicken



DELTA SIGMA THETA

Members of the Fayetteville Alumna Chapter of Delta Sigma Theta Sorority participated in the Ribbon Walk & Ride for Cancer, raising \$1,000 in donations.



ERA STOTHER REAL ESTATE

Denise Strother, president and COO of ERA Strother Real Estate, (center left) presents a donation to Cape Fear Valley Health Foundation to sponsor the Ribbon Walk & Ride for Cancer and the Circle of Friends Gala. Accepting the donation are Janet Gibson-Uffinger (left) and Janet Leonard (center right) of the Ribbon Walk and Ride Committee and Nancy Duggins (right) of the Circle of Friends Gala Committee.

HEALTHKEEPERZ

April Dederick of HealthKeeperz presents members of the planning committee with a donation to sponsor the Ribbon Walk and Ride for Cancer. Pictured left to right are: Sandra Sonner, Janet Leonard, co-chair, Dineen Morton, co-chair, April Dederick, and Crystal Reynolds-Bell. The Ribbon Walk and Ride took place on Saturday, Nov. 5 at Festival Park in downtown Fayetteville.







EXPRESS EMPLOYMENT PROFESSIONALS

The staff of Fayetteville's Express Employment Professionals present a check in the amount of \$2,500 for the 2011 Ribbon Walk & Ride sponsored by Cape Fear Valley Health Foundation's Friends of the Cancer Center. Pictured left to right, Brad Loase, Johnny Mack, Janet Lee, Norma Loase, Cathy Jackson, "Mulligan Loase", Dick Loase, Cape Fear Valley Health Foundation's Friends of the Cancer Center Coordinator Tara Brisson Hinton, and Shanika Allen.



NORTHWOOD TEMPLE

Northwood Temple MOPS members present a check in the amount of \$1,079.75 for the 2011 Ribbon Walk & Ride, sponsored by Cape Fear Valley Health Foundation's Friends of the Cancer Center. Pictured left to right are: Suzanne Clark, Angela Lynch, Cape Fear Valley Health Foundation's Friends of the Cancer Center Coordinator Tara Brisson Hinton, Paigeann Mapley-Brittle, Amy Kormanek, Kimmi Nettles, Kim Wood, and Cape Fear Valley Health Foundation's Development Manager Veronica Coleman.

NEWS briefs









New Ambulances

Cumberland County EMS received seven new ambulances to help better serve the county's patient transportation needs. Cape Fear Valley Health plans to purchase five additional ambulances in February. Altogether, the 12 new ambulances will raise the health systems's EMS ambulance fleet count to 30. The health system's LifeLink patient transportation service has an additional 12 ambulances.

Prostate Cancer Screening

Cape Fear Valley Health held a free prostate cancer screening on Saturday, Sept. 24, in the Cancer Treatment and CyberKnife Center. The event was co-branded with the National Football League and American Urological Association Foundation. The screenings included a prostate specific antigen (PSA) blood test and digital rectal exam. Physicians and staff from Cape Fear Valley Urology and the Cancer Treatment and CyberKnife Center performed the screenings, assisted by Friends of the Cancer Center volunteers and others. Nearly 10 percent of the 198 men screened were advised to follow up with their physician. From left to right is screening participant Kenneth McIver with Ronnie Boyles, RN.

Local Students Thank ED

Sixth Graders from St. Patrick Catholic School in Fayetteville recently took a break from the classroom to visit Cape Fear Valley's Emergency Department. The trip was to thank Emergency Department staff as part of an ongoing, larger school project to show appreciation for public service workers in memory of the 10th anniversary of 9/11. The group, led by mathematics instructor Gary Southerland, presented a poster to the Emergency Department staff while touring the department.

Touchdown For Life

Cape Fear Valley Health employees recently held a footballthemed blood drive on the front lawn of Cape Fear Valley Medical Center. Called Touchdown For Life, the blood drive was designed to tackle local blood shortages. Senior administration personally recruited more than 213 employees to donate blood on behalf of their respective teams. More than 160 units of blood, plus blood platelets, were collected, making it the most successful employee blood-drive in the health system's history. The donated blood was collected by the Cape Fear Valley Blood Donor Center and will be used locally for transfusion, surgery and accident patients.



the Lung Nodule Clinic

A QUICKER DIAGNOSIS CAN BE THE DIFFERENCE BETWEEN LIFE AND DEATH

BY ANNA HALEY

Every year lung cancer takes the lives of more Americans than breast, colon and prostate cancers combined. Much of the time, lung cancer is found completely by accident, and patients start treatment when the cancer is advanced, leading to poor outcomes. This is especially true in Cumberland County, where most of the lung cancer patients seen are classified as stage 3 and 4.

In an effort to diagnose more patients at an earlier stage, Cape Fear Valley Health has opened the Lung Nodule Clinic. This new clinic, housed on the fifth floor of Highsmith-Rainey Specialty Hospital, is a one-stop shop for lung nodule patients. Its goal is to save patients from unnecessary surgery and to catch possible lung cancers when they are most treatable.

"We are here to help patients be seen and diagnosed more quickly so that treatment can begin as soon as possible," says Irlene Locklear, M.D., physician champion of the Lung Nodule Clinic. "Oftentime lung cancer patients fall through the cracks. By the time they are seen, it's too late for surgery, which is usually the best treatment option for lung cancer."

The clinic will address the growing number of patients being diagnosed with tiny round- or oval-shaped lesions or nodules on or in their lungs. A mass, or nodule, on the lung can be a scary discovery. These nodules, often found on a chest x-ray, can be early indicators of cancer, infection or other lung diseases.

Because chest x-rays help to identify such a wide variety of lung disorders, lung nodules must be thoroughly evaluated, diagnosed and treated appropriately. Even if the nodule presents no current threat, it must be regularly monitored for any change.

Prior to the Lung Nodule Clinic's opening, it could take patients several months to be seen by a pulmonologist for a lung nodule biopsy.

"Months can mean life or death for a lung cancer patient," says Paul Ford, Manager of Respiratory Therapy at Highsmith-Rainey Specialty Hospital. "We want to evaluate patients as quickly as possible so they can be seen and treatment can be started. The longer we wait, the more time the cancer has to grow and spread."

The person responsible for getting patients in quickly and through the often-complex healthcare system is Kim Martinez, RN, OCN, Lung Nodule Clinic Navigator.

Martinez works with patients referred to the clinic. She schedules necessary tests and scans, then sets up the appointment with the pulmonologist. After the patient meets with the pulmonologist, a biopsy is scheduled as quickly as possible, if necessary.

During the lung nodule biopsy, the pulmonologist uses state-of-the-art, GPS-like guided bronchoscopy to find the nodules in a patient's lungs and get a tissue sample for testing. The procedure is minimally invasive and can be done in the Lung Nodule Clinic. Once the sample is tested, a treatment plan is established.

In addition to Martinez and the pulmonologist, a number of other specialists work to formulate an individualized treatment plan for each patient, including pathologists, radiologists, thoracic surgeons, medical oncologists, radiation oncologists, clinical trials experts and oncology nurses. The goal of this multidisciplinary approach is to achieve seamless clinical care and create the best possible outcome for patients.

Through the process, Martinez is available to serve as the patients' advocate to guide them until a resolution is found.

"No matter the diagnosis, I will be the patient's point of contact whenever a question arises," says Martinez. "Even if a patient's lung nodule proves to be benign but needs routine follow-up checks, I will be the one making the call months down the road to remind them of an appointment."

Patient care and ease of treatment are the reasons the Lung Nodule Clinic was created. Now patients in Cumberland County can breathe a little easier knowing they have a committed team on their side in the fight against lung cancer.



Kim Martinez, RN, OCN CAPE FEAR VALLEY LUNG NODULE CLINIC NAVIGATOR



Irlene Locklear, M.D. CAPE FEAR VALLEY LUNG NODULE CLINIC

CAPE FEAR VALLEY HEALTH : TAKE CHARGE of your HEALTH



Lung Cancer Deadlier For ²²African Americans

BY GINNY DEFFENDALL

LUNG CANCER.

Two very dangerous words. Lung cancer kills three times as many men as prostate cancer and twice as many women as breast cancer.

According to the American Lung Association (ALA), there is a racial difference in the number of lung cancer occurences. Despite similar smoking rates, African Americans – particularly African American men – are more likely to develop and die from lung cancer.

The ALA's report shows that African American men are 37 percent more likely to get lung cancer than Caucasian men and are 22 percent more likely to die from it. So if the smoking rate is the same, why is there a difference in the rates of developing lung cancer?

Research suggests that while African Americans do not smoke more than their Caucasian counterparts, they are more likely to smoke menthol cigarettes. Menthol smokers tend to have higher levels of a nicotine byproduct in their blood called cotinine. This higher level of exposure causes higher levels of nicotine addiction in menthol smokers, making them less likely to quit smoking and more likely to relapse after quitting.

Smoking is not the only cause of lung cancer, however. Environmental Protection Agency (EPA) studies show that, because of lower income levels, African Americans tend to live in more polluted communities with higher levels of toxins, such as diesel exhaust and benzene. In fact, African American neighborhoods face close to 1.5 times higher levels of air toxins, exposing residents to nearly 200 different cancercausing air pollutants. The EPA has linked a 40 percent higher risk of developing lung cancer to people who are exposed to these kinds of toxins.

While it may not be possible to reduce your risk for lung cancer by moving your home, quitting smoking can definitely help. Smokers are six times more at risk for lung cancer than non-smokers. The longer you go without smoking, the more your risk is lowered. Individuals who quit smoking more than 10 years ago are 58 percent less at risk than patients who have recently quit.

African Americans not only have a higher risk of developing lung cancer, they also a higher risk of dying from the disease. The Lung Cancer Alliance attributes the higher mortality rate to a lack of access to care. More African Americans than Caucasians below Medicare age are uninsured. Uninsured patients are less likely to see a doctor.

Yet, when cancer is discovered in the early stages, the survival rate is much higher. Recent studies have shown that screening a high-risk population with CT scanners can yield a 10-year survival rate of 92 percent. Statistics don't show African American survival rates anywhere near 92 percent, though. In fact, the five-year survival rate for African American men is only 12 percent. This group is often diagnosed later when the cancer is less treatable. They tend to see physicians who are not board certified. They wait longer to seek treatment and often refuse treatment, such as surgery or chemotherapy, altogether.

The American Cancer Society predicts an estimated 23,220 cases of lung cancer and 16,700 deaths among African Americans this year.

These numbers don't have to be so high. Take charge of your health. If you smoke, quit. Schedule regular checkups with your physician and keep your screening appointments. If we take care of ourselves, the racial disparities in lung cancer death rates can disappear in our lifetime.



The estimated number of lung cancer cases among African Americans this year

12%

The five-year survival rate for African American men with lung cancer



CAPE FEAR VALLEY HEALTH : NEW PHYSICIANS





Nicole Shields, M.D.

Kari Lake, M.D.

FAMILY MEDICINE

Nicole Shields, M.D., has been approved for the Associate Staff in Family Medicine and has joined Cape Fear Family Medical Care. She received her medical degree from the University of Florida College of Medicine in Gainesville, Fla. Dr. Shields completed a residency in family practice at Southern Regional Area Health Education Center in Fayetteville.

Jessica Sloan, M.D., has been approved for the Associate Staff in Family Medicine and has joined Cape Fear Family Medical Care. She received her medical degree from the University of North Carolina in Chapel Hill.

Dr. Sloan completed a residency in family practice at Southern Regional Area Health Education Center in Fayetteville.

GERIATRICS

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Krishnamurthy Jonnalagadda,

M.D., has been approved for the Associate Staff in Geriatrics and has joined Cape Fear Valley Senior Health Services. Dr. Jonnalagadda received his medical degree from Rangaraya Medical College in Kakinada, India. He completed his residency in internal medicine at Brooklyn Hospital Center in Brooklyn, N.Y., and a fellowship in geriatrics at Montefiore Medical Center – North Division in the Bronx, N.Y. He is board certified in internal medicine.

Franklin Ohiagbaji, M.D., has been approved for the Associate Staff in Geriatrics and has joined Cape Fear Valley Senior Health Services. Dr. Ohiagbaji received his medical degree from the University of Nigeria in Nsukka, Nigeria, and a master's degree in Public Health from Tulane University School of Public Health and Tropical Medicine in New Orleans, La. He completed an internal medicine residency at North General Hospital in New York, N.Y., and a fellowship in geriatrics at Montefiore Medical Center North in the Bronx, N.Y. He is board certified in internal medicine.

PEDIATRICS

Ajenadoro Agbadudu, M.D., has been approved for the Associate Staff in Pediatrics and has joined Larry C. Harris, M.D. She received her medical degree from the University of Benin in Benin, Nigeria. Dr. Agbadudu completed a residency in pediatrics at Newark Beth Israel Medical Center in Newark, N.J. She is board certified in pediatrics.

Chitrabharathi Chandrasekaran,

M.D., has been approved for the Associate Staff in Pediatrics and has joined Rainbow Pediatrics of Fayetteville. She received her medical degree from Government Stanley Medical College in Tamil Nadu, India. Dr. Chandrasekaran completed a pediatrics residency at Brookdale University Hospital and Medical Center in Brooklyn, N.Y. She is board certified in pediatrics.

Kari Lake, M.D., has been approved for the Associate Staff in Pediatrics and has joined Cape Fear Valley Pediatric Care. She received her medical degree from Ross University School of Medicine in Roseau, Commonwealth of Dominica, West Indies. Dr. Lake completed a residency in pediatrics at MetroHealth Medical Center – Case Western Reserve University in Cleveland, Ohio. She is board certified in pediatrics.

Manu Sharma, M.D., has been approved for the Associate Staff in Pediatrics and has joined Hope Mills Pediatrics. She received her medical degree from Mymensingh Medical College of the University of Dhaka in Mymensingh, Bangladesh. Dr. Sharma





Krishnamurthy Jonnalagadda, M.D.

Brooklyn, N.Y.

completed a pediatrics residency at Brooklyn Hospital Center in

EMERGENCY MEDICINE

Marc Bartman, M.D., has been approved for the Associate Staff in Emergency Medicine and has joined Cape Fear Valley Medical Center Emergency Department. He received his medical degree from Creighton University in Omaha, Neb. Dr. Bartman completed a residency in emergency medicine at Hahnemann University Hospital – Drexel University School of Medicine in Philadelphia, Penn.

PEDIATRIC EMERGENCY MEDICINE

Warhees Muhammad, M.D., has been approved for the Associate Staff in Pediatric Emergency Medicine and has joined Children's Acute Care. Dr. Muhammad received his medical degree from the University of South Carolina School of Medicine in Columbia, S.C. He completed a residency in pediatrics at Medical Center of Central Georgia in Macon, Ga. Dr. Muhammad completed a fellowship at LeBoneur Children's Hospital in Memphis, Tenn. He is board certified in pediatrics.



Pearline Grant, M.D.

BLADEN COUNTY

Pearline Grant, M.D., has been approved for the medical staff of Bladen County Hospital and has joined Bladen Medical Associates' Bladenboro office at 106 4th Street. She received her medical degree from American International School of Medicine in Georgetown, Guyana. Dr. Grant completed a residency in family practice at Meharry Medical College – Nashville General Hospital in Nashville, Tenn. She was previously affiliated with Duke University Medical Center.

Chidebe Udeozo, M.D., has been approved for the medical staff of Bladen County Hospital and has joined Bladen Medical Associates' Bladenboro office. He received his medical degree from Ross University School of Medicine in Picard, Commonwealth of Dominica, West Indies. Dr. Udeozo completed a family practice residency at Aurora St. Luke's Medical Center in Milwaukee, Wisc.



Chidebe Udeozo, M.D.



Kathleen Heer, D.O.

BLADEN COUNTY

Kathleen Heer, D.O., has been approved for the medical staff of Bladen County Hospital and has joined Women's Health Specialists in Elizabethtown. She received her medical degree from Philadelphia College of Osteopathic Medicine in Philadelphia, Penn. Dr. Heer completed a residency in obstetrics and gynecology at Philadelphia College of Osteopathic Medicine in Philadelphia, Penn. She is board certified in obstetrics and gynecology. Dr. Heer was previously affiliated with Southeastern Regional Medical Center in Lumberton.

PHYSICIANAWARDS2011

Golden Stethoscope Award



– Irlene Locklear, M.D.

Dr. Locklear was honored for going above and beyond in order to care for patients in the Intensive Care Units (ICU), offering her services even when she is not on call. A true patient advocate, Dr. Locklear frequently meets with families to discuss their loved one's care and is always willing to answer any questions that may arise.

Physician Leadership Award



- Leo Davidson, M.D. Dr. Davidson was honored for his service as chairman of the Patient Safety Team. His leadership has been an instrumental part of the success of the committee. He has championed efforts to engage physicians and staff toward continuous quality improvement. He frequently seeks out opportunities to "make a difference" and encourages others to do the same.

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Physician Leadership Award



– Brandt Wood, D.O.

Dr. Brandt Wood was honored for his service as chairman of the Pharmacy and Therapeutics Committee (P&T). As Chair, Dr. Wood is very open to the differing viewpoints and has effectively led the P&T through many controversial issues. He is always open to new ideas and willing to go the extra mile to help with implementation.



of providing **SPECIALTY CARE** right here at home

Whether they are seeing a patient in their office, delivering a baby, performing surgery, or treating a stroke patient in the Emergency Department, Cape Fear Valley's specialty practices fill a special need in our community.

> There's no need to travel long distances for quality specialty care. We've got our community covered.



www.capefearvalley.com

cape FEAR VALLEY HEALTH in the • Community

CLASSES

BREASTFEEDING CLASSES

Wednesdays, February 1, 15, 29 March 14, 28 April 11, 25 6 – 7:30 p.m. **FREE!** Classes taught by an International Board-Certified Lactation Consultant. Fathers are welcome and encouraged to attend. To register, call 615-LINK (5465).

PREPARED CHILDBIRTH CLASSES

Mondays, February 4, 11, 18 & March 5 Mondays, March 19, 26, April 2 & Tuesday, April 10 Monday, April 23, 30 & May 7, 14 6 – 9 p.m. \$30 per couple This series of four classes will help you and your birthing partner prepare for your special delivery! To register, call 615-LINK (5465).

SATURDAY ACCELERATED CHILDBIRTH CLASSES

February 4, March 3, April 14 9 a.m. – 5 p.m. \$30 per couple To register, call 615-LINK (5465).

FAMILY BIRTH CENTER TOURS

Tuesdays, February 7, 14, 21, 28 Tuesdays, March 6, 13, 20, 27 Tuesdays, april 3, 10, 17, 24 5-6 p.m. Take a tour to see the safety and security of the Family Birth Center. Fathers are encouraged to attend. **FREE!** To register, please call 615-LINK (5465).



CONGESTIVE HEART FAILURE

Thursday, Feb. 23 at 2 p.m. Cape Fear Valley Education Center 3418 Village Drive Christopher Aul, M.D., Associate Chief Medical Officer for Quality and Safety at Cape Fear Valley Health System, will present a free seminar on risk factors and treatment options for congestive heart failure. Dr. Aul will also discuss lifestyle changes you can make to lead a healthier lifestyle. Participants will also enjoy educational exhibits from a variety of community organizations. To register, call 615-LINK (5465).

ARTHRITIS OF THE HIP & KNEE

Does arthritis cause you pain and limit your mobility? An orthopedic surgeon will discuss the signs and symptoms of arthritis and available treatments. For Dates, time, location and to register, call 615-LINK (5465).

WARM WATER WELLNESS

Monday, Wednesday and Friday 4 p.m. Tuesday, Thursday and Friday at 4 p.m. Tuesday and Thursday at 11 a.m. Cape Fear Valley Rehabilitation Center Pool This is low-intensity water aerobics for all ages and fitness levels. \$30 per month. \$25 automatic draft. This class requires a physician's referral. To be placed on the waiting list, call Casey at 615-7812.

ARTHRITIS WATER CLASSES

Monday, Wednesday and Friday 11:30 a.m. and 12:15 p.m. Tuesday & Thursday at Noon Cape Fear Valley Rehabilitation Center Pool This class helps improve flexibility, strength, balance, coordination and posture, while increasing range of motion, vitality and energy level. \$30 per month. \$25 automatic draft. This class requires a physician's referral. To be placed on the waiting list, call Casey at 615-7812.

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CANCER SUPPORT GROUPS

Facing Forward, a support group for women living with cancer, meets the second Tuesday of each month in the conference room at the Cape Fear Valley Cancer Center from 6 to 7:30 p.m. Facing Forward discusses cancerrelated topics and issues dealing with women's wellness in a supportive group setting. For more information, please call (910) 615-6791.

Coming Together Children's Support

Group meets on the third Thursday of every month (except July, August and September) from 6 to 7:30 p.m. in the Cape Fear Valley Cancer Center conference room. The support group helps children whose parents are diagnosed with life-threatening illnesses, and is open to children ages 5 through 18. Parents are invited to attend and learn how they can best assist their children during this difficult time. Please call (910) 615-6791 to register or for more information. **Man Talk** holds informative meetings for male cancer patients and survivors. The group meets on the first Tuesday of each month from 6 to 7:30 p.m. in the Cape Fear Valley Cancer Center conference room. For more information, please call (910) 615-4626.

The Look Good, Feel Better program

meets on the third Monday of each month at 9 a.m. in the Cape Fear Valley Cancer Center conference room and at 6 p.m. in the Health Pavilion North Cancer Center. Licensed cosmetologists help women with cancer learn how to apply make up and style wigs or scarves to compensate for the changes in the skin and hair that cancer treatment may cause. To register, please call (910) 615-1434.

Taking Charge Of Your Care meets on the first Thursday of every month from 6 to 7:30 p.m. in the conference



room at Cape Fear Valley Cancer Center and the fourth Tuesday of every month from 11:30 a.m. to 1 p.m. in the Health Pavilion North Cancer Center. It is an educational group for cancer patients and their families or caregivers. Topics include information on community resources, stress management, fatigue, relationships and caregiving. There are opportunities at each meeting for sharing and support. The group is facilitated by a licensed social worker and is open to the public. For more information, please call the Oncology Social Worker at (910) 615-3849.

OTHER CAPE FEAR VALLEY SUPPORT GROUPS

Healthy Eating, a support group for anyone interested in developing, practicing and maintaining healthy eating habits, meets every third Thursday of every month from 6:30 to 7:15 p.m. in Classroom C at HealthPlex fitness and wellness center. HealthPlex is located at 1930 Skibo Road. Participants will learn about nutrition, and share and receive professional and peer support. For more information, please call (910) 615-6778.

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A.W.A.K.E., a support group for those with sleeping disorders and their family members, meets every third Tuesday in March, May, July, September and November from 6 to 7 p.m. in the Carolina Room of the Cape Fear Valley Education Center at 3418 Village Drive. For more information, please call (910) 615-6389.

Defibrillator Support Group meets on the second Thursday of January, April, July and October from 6:30 to 8 p.m. in Room 102 of the Medical Arts Center at 101 Robeson Street. For more information, please call Laurie Costello at (910) 615-8753.

Stroke Support Group meets on the third Wednesday of every month from 6:30 to 8 p.m. in Room 102 of the Medical Arts Center at 101 Robeson Street. For more information, please call Vicky Parker at (910) 615-6972.

Spinal Cord Injury Support

Group meets on the first Monday of every month at 3 p.m. in the Patient Cafeteria at Cape Fear Valley Rehabilitation Center. For more information, please call James Jones at (910) 615-4051 or Shequitta Massenburg at (910) 615-6066.

Congestive Heart Failure Support

Group meets on the first and third Thursday of every month from 3:30 to 4:30 p.m. in the Cardiac Rehab Classroom at Cape Fear Valley Rehabilitation Center. For more information, please call Jay Pedersen, RN, BNSc., at (910) 615-4809.

CAPE FEAR VALLEY HEALTH *in the* Community

COMMUNITY SUPPORT GROUPS

Alzheimer's Caregiver Support

Group, for those caring for loved ones with Alzheimer's disease, meets on the third Tuesday of each month at Life St. Joseph of the Pines at 4900 Raeford Road. For more information, please call Sam Hutchinson at (910) 615-1633.

Arthritis Support Group meets on the fourth Monday of every month (except February, July and December) at 7 p.m. at Cape Fear Valley Rehabilitation Center, Auditorium Room A. For more information, please call Diana Coppernoll at (910) 488-9352.

Bereavement Support Group meets at Cape Fear Valley HomeCare and Hospice in the Bordeaux Shopping Center Professional Center, Suite 203, at 1830 Owen Drive, on the first and third Thursdays of every month from noon to 2 p.m. The group is for those who are coping with the death of a loved one. For more information, please call (910) 609-6710 or (910) 689-2395. **Compassionate Friends**, a support group for families who have experienced the death of a child, meets on the first Tuesday of the month at 7:30 p.m. in Room 102 of the Medical Arts Center at 101 Robeson Street. For more information, please call Jennifer German at (910) 245-3177.

Fayetteville Brain Injury Support

Group meets on the second Tuesday of each month at 6:30 p.m. in the Patient Dining Room at Cape Fear Valley Rehabilitation Center, located behind Cape Fear Valley Medical Center in Fayetteville. For more information, please call Ellen Morales at (910) 486-1101.

Parkinson's Disease Support

Group meets on the second Saturday of each month at 10 a.m. in Room 102 at the Medical Arts Center at 101 Robeson Street. No meeting will be held in January. For more information and location confirmation, please call Kent Rosborough at (910) 483-1875.

Hepatitis & Chronic Liver Disease Support and Education Group meets

on the third Wednesday of January, March, May, July, September and November at 6:30 p.m. in Suite 102 of the Medical Arts Center at 101 Robeson Street. Those with hepatitis or liver disease, and their family members and friends, are invited to attend. For more information, please call Billie Kennedy at (910) 864-7828.

Marfan Syndrome Support Group

meets the last Saturday of every month from 2 to 5 p.m. in Cape Fear Valley Rehabilitation Center Auditorium B. For more information, please call Karen Moore at (910) 583-5518.





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