

CAPE FEAR VALLEY HEALTH *and* WELLNESS MAGAZINE

# MAKING ROUNDS

SPRING 2016



CAPE FEAR VALLEY HEALTH

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## MAKING ROUNDS

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Marketing & Outreach Department  
Cape Fear Valley  
P.O. Box 2000  
Fayetteville, NC 28302-2000

[www.capefearvalley.com](http://www.capefearvalley.com)

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**EDITOR :** Donnie Byers  
PUBLIC RELATIONS COORDINATOR  
[dbyers@capefearvalley.com](mailto:dbyers@capefearvalley.com)

**DESIGNER :** Jason Brady  
MARKETING COORDINATOR  
[jbrady@capefearvalley.com](mailto:jbrady@capefearvalley.com)



A Joint Commission  
**TOP PERFORMER**



## LETTER *from the* CEO

Cape Fear Valley's founders would be surprised to see what kind of growth the health system has undergone in 60 years. It now provides healthcare directly to five counties and serves a region much larger than that.

With eight hospitals and 916 patient beds, its 850 physicians on staff, encompassing 53 specialties and sub-specialties, offer everything from cancer care and trauma services to pediatric intensive care and geriatric care.

Just as our operations have grown, so has our quality and patient safety record. Last October, the Leapfrog Group awarded Cape Fear Valley Medical Center an "A" for hospital safety. Less than 30 percent of all hospitals nationwide received a similar grade from the national independent hospital watchdog group.

The Joint Commission recognized Cape Fear Valley Medical Center as a Top Performer on Key Quality Measures® for the second consecutive year. The areas were for:

- ▶ Heart Attack
- ▶ Heart Failure
- ▶ Pneumonia
- ▶ Surgical Care
- ▶ Stroke
- ▶ Perinatal Care

Cape Fear Valley Medical Center also topped the *U.S. News & World Report's* list of Best Hospitals in North Carolina with six awards, making 2015 quite a year for us.

You can read more about our quality, growth, and extensive scope of services in this issue of *Making Rounds*. You'll find Cape Fear Valley Medical Center's Emergency Department is by far the busiest in the state with 130,000 visits a year.

There's also information about our growing patient volumes at our Hoke Hospital in Raeford, as well as specialty services growth at Harnett Health's two hospitals, Central Harnett Hospital in Lillington and Betsy Johnson Hospital in Dunn. Cape Fear Valley manages both under an agreement with Harnett Health.

All the growth is good news for area residents, because we don't believe you should have to travel long distances for quality care. With eight hospitals in the Cape Fear Valley family, you're sure to find one close to home.

Mike Nagowski  
CEO, CAPE FEAR VALLEY HEALTH



# *What* **QUALITY** **HEALTHCARE** *Really Means*

Cape Fear Valley Health is making a national name for itself when it comes to quality

Michael C. Hodges, MD



:: by Donnie Byers

When it comes to healthcare, nothing matters more than quality. Obtaining high quality care during a hospital visit can mean the difference between life and death or lingering health issues versus a speedy recovery. But quality doesn't come easily or naturally.

There are approximately 5,600 hospitals in the U.S., each providing a different level of care to the public. *U.S. News & World Report* publishes an annual list of the nation's Best Hospitals, as well as a state-by-state list, to let patients know what's available in the marketplace.

Cape Fear Valley Health made the North Carolina list for 2016. The health system did it by earning five quality distinctions. No other hospital in the state earned more.

To the average person, rankings from national publications may seem insignificant. But industry experts understand what it takes to be mentioned alongside prestigious medical centers like the Mayo Clinic, Johns Hopkins Hospital and UCLA Medical Center.

So how did, Cape Fear Valley Health, the state's 8<sup>th</sup> largest health system, pull off such an improbable achievement? By reinventing itself over the years in an effort to become a world-class hospital. The strategy involved greater teamwork, continually upgrading to the latest medical technology, and always putting patients at the center of everything the health system does.

CEO Mike Nagowski championed the transformation effort soon after joining Cape Fear Valley in 2008. It was a bold decision because of the imploding U.S. economy at the time. Hospitals nationwide were either closing their doors or contracting in size. But Nagowski bet that committing to greater excellence would pay off in the long run.

He was right.

The U.S. economy has rebounded, Cape Fear Valley has steadily grown its service footprint across southeastern North Carolina, and *U.S. News & World Report's* latest Best Hospitals list has Cape Fear Valley's name on it.

The health system has received a number of other recent quality recognitions, as well. They include a letter grade "A" in 2015 for patient safety from The Leapfrog Group. The hospital watchdog group rates U.S. hospitals for patient care with a simple letter grading system.

Ranging from "A" to "F" grades are based on research of each facility's approach toward patient safety. Less than 30 percent of all hospitals nationwide received an "A" last year. Cape Fear Valley was the only hospital in southeastern North Carolina to receive the superior grade.



No one is happier about the “A” than Cape Fear Valley’s CEO.

“We earned that letter grade,” Nagowski said, “because over the last four to five years, our employees have been on a journey, making this grade of ‘A’ occur. I want to congratulate them. Very few hospitals accomplished what we did.”

## The Joint Commission Recognition

The most important honor Cape Fear Valley Health received last year may have come from The Joint Commission. The national healthcare accrediting body ranked the health system as a Top Performer in six treatment categories: Heart Attack, Heart Failure, Pneumonia, Surgical Care, Stroke and Perinatal Care.

Top Performer status means Cape Fear Valley provides the most up-to-date, scientific evidence-based care, as compared to anywhere else in the nation. The recognition comes on the heels of The Joint Commission bestowing eight different Disease-Specific Care certifications upon the health system in recent years.

Launched in 2002, the Disease-Specific Care certification program evaluates hospital clinical programs across the continuum of care, not just for one or two areas of a patient’s stay.

To date, Cape Fear Valley has received certifications for Hip Replacement Surgery, Knee Replacement Surgery, Heart Failure, Advanced Stroke, Acute Myocardial Infarction (AMI, or heart attack), Pneumonia, Wound Care and Sepsis. Bladen County Hospital also received Sepsis certification. It is the first critical access hospital in the nation to do so.

All the certifications help rank Cape Fear Valley Health among the top 25 hospitals in the nation for patient care quality.

The certifications didn’t come by chance.

Over the years, Cape Fear Valley has created various Centers of Excellence that focus on the very treatment areas for which it received certifications. One of the first was for the health system’s award-winning hip and knee replacement surgery program.

Bradley Broussard, M.D., is an orthopedic surgeon and Cape Fear Valley’s Chief of Staff. He says joint

replacement surgery is fairly standardized now, but every patient recovers differently. Having nurses, physicians and physical therapy staff on the same page when treating patients helps ensure the best outcome.

“Everyone strives for excellence here,” Dr. Broussard said. “Not only in the area of patient care, but also in the results. Our crew does a good job of providing personalized care to everyone who comes here for surgery.”

Jose Delgado, M.D., Associate Medical Director at Highsmith-Rainey Specialty Hospital, agrees with the teamwork sentiment. He works with the hospital’s wound care program and says the staff works closely together for a reason.

Treating extensive or lingering wounds can be extremely complicated. Everyone from dietitians and pharmacists to physical therapists and pastoral care staff may be called upon.

“These kinds of wounds are so complex they simply require a more intensive approach,” Dr. Delgado said.

Patients suffering from advanced diabetes, vascular disease or traumatic injuries can require months of treatment. Even more specialty care, such as wound vacuum or hyperbaric oxygen therapy, may be necessary if wounds are infected.

The staff’s goal is to ensure each patient can manage their wound on an outpatient-level before discharging the patient home.

Kelly Steere is Highsmith-Rainey’s Nursing Director. She said obtaining Disease Specific Certification for Wound Care through The Joint Commission has galvanized her staff.

“It’s taken our wound care program and the clinical services we provide to another level,” she said.

## ED Gateway

Cape Fear Valley Medical Center’s Emergency Department is easily the busiest in the state and among the busiest in the nation. Many patients arrive suffering from pneumonia or sepsis. Both can be fatal if left untreated.

Most people have heard of pneumonia. The severe lung infection often kills older adults, babies and people with

.....“.....

We now have a culture of providing quality care. We know we're doing good work. We've known that for years. Now we're just being recognized on a national level for our efforts.

Michael Hodges, MD



weakened immune systems. But sepsis can be just as deadly. It affects more than 1 million Americans annually. Up to half eventually die.

The serious medical condition is caused by an overwhelming immune response to an infection in the body. Chemicals released into the blood to fight the infection trigger a widespread inflammatory response.

The inflammation may cause organ damage and blood clotting, which reduces blood flow to limbs and vital organs. This robs them of nutrients and oxygen. Organs fail and blood pressure plummets in advanced cases, which can lead to complete organ shut down.

“It's one of our biggest killers in our ICUs,” said Amanda Atkinson, M.D., M.H.A., an Emergency Medicine and Critical Care physician. “We really take things like sepsis seriously.”

Quickly recognizing symptoms, such as low blood pressure and lactic acid build-up in the blood, increases recovery chances. Sepsis patients are often dehydrated and require intravenous fluids. Clinicians can use bedside ultrasound to determine the level of fluids needed. Powerful antibiotics and other medications are then prescribed to reduce the source infection and the body's corresponding response.

Pneumonia is treated in a similar fashion. Doctors work to find the source infection in the lungs using various methods, including X-rays, ultrasound and blood tests. It's then treated with antibiotics.

Most people fully recover. But if the illness is severe enough, it can lead to lasting side effects – even if the condition was properly treated.

“In the ICU, many other organs beside the lungs can suffer when someone gets pneumonia,” Dr. Atkinson said. “That's why it's important to treat it as soon and as aggressively as possible.”

Heart failure and heart attack patients are frequent visitors to the Emergency Department. Cape Fear Valley has had a Chest Pain Center of Excellence for years, but it was originally accredited through the Society for Chest Pain Centers.

Michael Hodges is the Director for Cardiac Quality and Chairman of the Clinical Performance Improvement Committee at Cape Fear Valley. He says the chest pain center designation was a way to show Cape Fear Valley could compete with any other hospital in the state when it came to cardiac care.

Cape Fear Valley still maintains the Chest Pain Center accreditation. But the health system has also pursued Disease Specific Care certification for Heart Attack and Heart Failure treatment through The Joint Commission, as an overall quality strategy.

Maintaining both accreditations means extra work for an already busy cardiac care staff. But it's that commitment to continually pursue quality that defines what Cape Fear Valley Health is today.

“We now have a culture of providing quality care,” Dr. Hodges said. “We know we're doing good work. We've known that for years. Now we're just being recognized on a national level for our efforts.”





:: by Anna Haley

# A change of scenery

More patients are turning  
to Cape Fear Valley's cancer  
centers for treatment.



**The cancer treatment landscape in southeastern North Carolina is in a state of flux**, thanks to two area cancer centers recently closing. The situation has forced patients to seek treatment elsewhere, including at Cape Fear Valley Cancer Centers.

The patient shuffling started in the summer of 2014 after The Blood and Cancer Clinic closed to join Cape Fear Valley's cancer treatment program. The Fayetteville practice's two physicians, five staff members and large patient base came with the acquisition.

Most of the patients chose to continue their care at Health Pavilion North Cancer Center, where their former physicians ended up. Brenda Hall, Cape Fear Valley's Cancer Director, said the rapid influx of new patients strained Health Pavilion North resources.

"We literally tripled our patient volumes overnight," Hall said, "and we haven't slowed down since."

Staff had to be re-arranged to better meet patient needs, while renovations were started to ease patient flow. More rooms were added, a separate blood work area created, and the facility's clinical space and chemotherapy infusion area expanded. Work will soon begin on the facility's second floor to accommodate future growth.

Cancer Centers of North Carolina (CCNC) added to the upheaval, when the company closed its Dunn outpatient treatment center soon after The Blood and Cancer Clinic closed. Seeing neighbors in need, Cape Fear Valley Health quickly stepped in and agreed to reopen the Harnett County facility.

Located across from Betsy Johnson Hospital, the shuttered cancer clinic was quickly renovated and re-opened as Cape Fear Valley Cancer Center at Harnett. But former patients weren't as quick to return. The facility averaged just 20 patient visits a month at first.

"We knew there was a need for our services," Hall said. "But we weren't sure how long it would take to get patients back from CCNC's multiple Wake County offices, where they were sent after the Dunn office closed."

Shirish Devasthali, M.D., volunteered to help reopen the Dunn clinic. The Cape Fear Valley oncologist had experience opening a clinic from the ground up. Cape Fear Valley administrators then put a plan in motion to help him bring patients back.

The plan included providing experienced physicians, expert staff and convenient access to several services. They include chemotherapy, an onsite pharmacy, lab, support programs, oncology social workers and dietitians.

It worked. Within six months, Dr. Devasthali and his new team were seeing more than 700 patient visits a month. The rapid growth led to another oncologist and mid-level provider being hired.

## Growth Trends

Cancer treatment services have grown nationwide, as more advanced treatment options became available. Even patients with cancers once thought untreatable now have options.

"Twenty years ago, people with advanced cancer would have died within a year," Dr. Devasthali said. "Now we're seeing patients live for years with more effective treatments."

The growth in cancer treatment led to Cape Fear Valley's decision to build a full-service cancer center at Central Harnett Hospital in Lillington. Slated to open in 2018, the facility will be located behind the main hospital and offer an array of services. They will include diagnostic imaging, radiation therapy, chemotherapy and infusion therapy with onsite pharmacy, social workers and cancer survivor support. It will serve as a one-stop shop for cancer patients.

Cape Fear Valley's own Cancer Center in Fayetteville is also seeing a steady increase in patients. Starting last summer, the center's Radiation Oncology department went from treating 80 to 90 patients a day to 130. The surge came after a fire temporarily closed Gibson Cancer Center in Lumberton.



“Integrating so many patients at once wasn’t a simple task,” said Margaret Coates, Radiation Oncology Clinical Manager. “But our team knew these patients had to be helped.”

Cape Fear Valley took on most of the Gibson Cancer Center patients within a week of the fire. That allowed patients to resume radiation therapy treatments without disruption. Taking on new patients normally takes weeks, but Cape Fear Valley physicians and staff worked around the clock to make it happen.

The health system’s Medical Oncology program has also grown in recent years. Since 2012, patients receiving chemotherapy and infusion therapy at Cape Fear Valley’s main Fayetteville campus rose from 22 patients per day to 54, more than doubling patient volumes.

All the growth has forced Cape Fear Valley to take a hard look at expanding and upgrading equipment at its Cancer Treatment and CyberKnife Center. The in-house pharmacy was already expanded last year.

Next on the upgrade list is the Medical Oncology unit’s infusion space. Built in 1981, the space will eventually offer eight new infusion chairs. An old linear accelerator used for treatment by the Radiation Oncology department will also be replaced.

Twenty years ago, people with advanced cancer would have died within a year, now we’re seeing patients live for years with more effective treatments.

In time, Highsmith-Rainey Specialty Hospital’s Lung Nodule Clinic will be relocated closer to the Cancer Treatment and CyberKnife Center. The change is being made for greater patient convenience and coordinated care.

The move will be a challenge, because space at the main Cancer Center’s Fayetteville campus is already at a premium. But Hall feels it will be well worth it.

“All the groundwork being laid now,” she said, “will eventually provide more convenience and greater capacity for growth at the Cancer Center.”

With cancer incidence rates increasing every year, the Cancer Center will be ready.



## U.S. cancer incidence rates continue to climb, but so has the survival rate, thanks to a greater emphasis on catching and treating the disease early.

Mammograms help detect breast cancer, while colonoscopies can do the same for colon cancer. But detecting early stage lung cancer has traditionally been more difficult. That's because there was no widely accepted screening tool for the disease until recently.

The American Society of Clinical Oncologists now recommends smokers and former smokers receive annual low-dose CT scans to check for developing lung problems. These scans are far more accurate at showing small abnormalities, which normal X-rays can miss.

"With these new guidelines," said Angie Syphrit, "we have a screening tool in place that can potentially help us cure a patient's cancer, rather than just offering palliative care once the disease is too far advanced."

Syphrit is Cape Fear Valley Health's Lung Nodule Coordinator. It's her job to be the single point of contact between patients and their families and the health system's Lung Nodule Clinic team.

The role includes explaining unfamiliar terms and treatments to patients, guiding them through the treatment process and helping them access the various treatment resources available. The goal is to catch possible tumors at their smallest and most curable state. Doing so can save lives.

In 2015, roughly 221,000 new lung cancers were diagnosed in the U.S., according to the American Cancer Society. More than 158,000 Americans died from the disease that same year.

Active smokers and former longtime smokers, age 55 to 74, are urged to get lung cancer screening. Low-dose CT scans are usually covered by insurance for this age group.

Benign nodules require no treatment, other than monitoring for changes over time. Malignant nodules can be treated through radiation therapy, traditional surgery or CyberKnife robotic surgery. Syphrit and her team at Cape Fear Valley's Lung Nodule Clinic provide follow-up care, no matter the screening outcome.

"Closely monitoring any changes we see in the tumors, helps us stay ahead of the cancer fight," Syphrit said. "It's exciting to finally have a tool that gives so many smokers access to treatment options in the cancer's early stages."





## GROWTH CAN BE GOOD. But Doesn't Always Come Easy

The Heart and Vascular Center is easily one of Cape Fear Valley Health's largest service lines, offering everything from cardiac rehabilitation to award-winning open-heart surgery and heart attack treatment.

The comprehensive offerings have led to numerous national awards and recognitions, such as Chest Pain Center Accreditation and Disease Specific Certification for Acute Myocardial Infarction (Heart Attack) care from The Joint Commission. As a result, patients from across southeastern North Carolina come to the center seeking treatment.

Business has been so good that the Heart and Vascular Center is beginning to run out of treatment space. Not being able to meet demand is an enviable position in most industries, but healthcare is different. Patients are always the primary focus. If their needs aren't being met, they will inevitably have to go elsewhere.

Michelle Keasling, RN, BSN, MSN, is the service line director for cardiac services at Cape Fear Valley. She knows all about the delicate balancing act between promoting a valuable service and then being able to provide it.

"Our patient volumes have really gone up," Keasling said. "Our struggle now is to find enough space to do all the procedures and utilize the space more wisely."

The Heart Center's biggest growth area has been cardiac catheterizations. The procedure involves inserting a catheter into a patient's coronary arteries to diagnose or treat problems.

In 2013, the Heart and Vascular Center's three cardiac catheterization labs performed 2,500 procedures. Last year, the number soared to 4,300. Keasling said the skyrocketing

numbers have led to growth in nearly every other area at the Heart Center, including coronary bypass surgeries and stent procedures.

New procedures, such as coronary arterectomy, have also driven growth. Similar to angioplasty, the procedure widens the coronary artery to allow more blood flow to the heart and to ease chest pain.

Angioplasty uses a tiny balloon to open blocked areas inside arteries. A stent is then inserted to keep the passageway from collapsing back inward.

Coronary atherectomy differs by physically removing the offending plaque build-up. The procedure starts with a guide catheter being inserted into the femoral artery near the groin, up to the blockage site.

A special catheter is then inserted to cut away the plaque build-up. A mesh stent is then placed into the treated passageway to keep it open.

Coronary atherectomy gives patients with severely blocked arteries a new option, because it works on the hardest plaque build-up.

The Heart and Vascular Center has also begun performing endovascular abdominal and thoracic stent graft placements. The similar procedures work by placing stents inside aortas or arteries bulging from an aneurysm, without having to remove tissue from the aorta wall.

The grafts resemble tiny fabric tubes, supported by metal mesh, that allow blood to flow easily through. This alleviates pressure from the surrounding aorta wall, preventing the aneurysm from bursting.

## EP Lab Growth

The Heart and Vascular Center's electrophysiology (EP) lab has begun performing a new procedure of its own: Cryoablation. The process uses extreme cold to treat certain areas of the heart to stop cardiac arrhythmias. It's particularly effective at treating patients with atrial fibrillation, or A-fib.

The EP lab already uses a similar procedure called radio frequency ablation. Both work by destroying errant electrical pathways along the heart outer wall that causes A-fib. Once the targeted pathway is destroyed, the heartbeat should normalize.

A-fib is the one of the most common serious abnormal heart rhythm conditions in the U.S. It affects roughly 3 percent of the population, so there is growing demand for ablation procedures.

A new EP physician recently joined Cape Fear Valley's medical staff, which should help with increased procedures.

"We definitely anticipate our EP numbers going up," Keasling said. "But in a lot of ways, we've run out of space. We only have a certain number of procedure rooms, so we're really trying to work on patient flow."

Cape Fear Valley had a similar problem with chest pain patients. These are the patients who tend to come through the Emergency Department (ED) and have relatively low to moderate risk for coronary disease.

Once seen in the ED, they are often brought upstairs to the Chest Pain Center. Keasling said assigning a physician assistant to their case while still in the ED helped patient flow tremendously.

The provider follows the patient throughout his or her stay at Cape Fear Valley. This ensures patients receive every test or screening needed. Patients can be cleared faster and back home recovering, as a result.

"The sooner we can get an answer as to why they're having chest pain, the better," Keasling said. "In fact, our average length of stay on the Chest Pain Center for these patients is below 24 hours."

Despite the quicker turnaround, the Heart and Vascular Center could still use more space to accommodate all the potential patients in the region. Hiring experienced staff must also be considered.

Cape Fear Valley's continued expansion into neighboring counties has only compounded the growth problems. Hoke Hospital's recent opening is a perfect example.

The Raeford facility is already experiencing high patient volumes from its recently-introduced on-site cardiac stress testing service. Some of those patients may have to go to Cape Fear Valley Medical Center for more advanced procedures or surgery.

Combine that with heart disease being the number one killer of men and women in the U.S., and you have a recipe for continually high patient volumes at the Heart and Vascular Center.

The silver lining is that more cardiologists and electrophysiologists have joined the health system's growing medical staff in recent years. They should help ensure the Heart Center will be ready for all comers, no matter what part of the region they call home.

## Quick and Compassionate Care

Cape Fear Valley Heart and Vascular Center is successful at treating heart attacks, because it doesn't work alone. It's a team effort.

The Heart and Vascular Center conducts Cardiology Grand Rounds regularly to teach area physicians about cardiac issues and updates. It also works with Cumberland County EMS and other area facilities in following a single protocol for treatment and transport of patients to the center. The goal is for patients to be seen fast and treated fast.

A strong community outreach program is also in place. It is committed to educating the community on how to identify heart attacks and how to treat them. One way is through Hands-Only CPR.

Studies show the technique improves survival chances significantly if started right after cardiac arrest begins. Staff members teach the technique at every opportunity at local community events, health fairs and churches.

Cape Fear Valley Health Foundation also embraces patient education, with its work with the Heart Center's Mended Hearts volunteer program. The support group is led by Chapter President William Farr, and was recently granted charter status as a national chapter.

The group's trained volunteers provide support to heart patients by visiting them in the hospital and helping answer treatment questions. The volunteers are knowledgeable on the subject, because many of them are previous heart patients.

The Health Foundation has also donated scales for patients to take home. The devices help monitor patients' weight to control edema and further heart failure. Patients who better manage their water weight are less likely to be readmitted.

"The volunteers are a tremendous resource for us," said Michelle Keasling, Cape Fear Valley Cardiac Services Director.



# under the skin

## Surgery is a vital service, for both the community and Cape Fear Valley Health

People have surgery for a variety of reasons. Sometimes it's to diagnose a problem. Other times it's to treat a disease or disorder. In many cases, the surgery can save a life.

Cape Fear Valley Health performs more than 15,000 surgeries a year, both inpatient and outpatient. That makes surgery one of the health system's busiest and most important service lines.

As the flagship hospital, Cape Fear Valley Medical Center performs a majority of the health system's inpatient surgeries. The number hovers around 4,500 annually.

Susan Dees, Corporate Director of Surgical Services, says the steady performance is impressive, due to the recent economy and insurance industry changes.

"Most people are just putting off surgery," she said. "It's like that at hospitals nationwide. We've been very fortunate we haven't seen a big dip."

What's more impressive is how the main hospital's general surgery volumes are actually growing. Often considered a hospital's "bread and butter" service line, these procedures focus on abdominal organs, such as the gastrointestinal tract, liver, pancreas and gall bladder. They can also deal with the skin, soft tissue, trauma and vascular surgery.

Dees says gastric bypass, ear, nose and throat (ENT), and neurosurgical procedures are doing particularly well. She expects vascular surgery to do the same this year, thanks to a returning surgeon.

One of the area's only two Cleveland Clinic-accredited cardiothoracic surgeons briefly left the area, but has since returned. It has allowed heart procedures, such as coronary bypasses and open-heart surgery, at the Heart & Vascular Center to resume at a steady pace.



Hoke Hospital in Raeford is also experiencing a rise in surgeries. The new facility's ORs now operate three days a week to accommodate demand. Bladen County Hospital in Elizabethtown should see similar growth with the arrival of a new general surgeon at Bladen Healthcare.

## Ambulatory Care

Outpatient procedures at Cape Fear Valley are growing just as fast, if not faster, than general surgeries. The insurance industry's move to lower patient treatment costs and a greater willingness by patients to recover at home is fueling the growth.

Treating patients without hospitalization is called outpatient or ambulatory care. The number of ambulatory procedures has tripled over the past 30 years to more than 54 million annually. Eye operations, joint and muscle repairs, lumpectomies, nerve treatments and gall bladder removals, are the most common.

The popularity of ambulatory care centers, which specialize in outpatient procedures, has followed suit in the U.S. Cape Fear Valley's facility is called the Short Stay Center, and it's located at Cape Fear Valley Medical Center.

Dees says plans are to renovate the second floor unit to accommodate expected growth. The goal is to keep the Short Stay Center competitive with other ambulatory centers in the region.

Highsmith-Rainey Specialty Hospital also performs outpatient procedures at its SurgiCenter. Cataract surgeries have quickly become the hospital's biggest growth market. In 2014, the hospital's operating rooms performed 2,000 cataract procedures. That number climbed to 2,700 last year.

## Specialty Procedures

All the outpatient growth excites Dees, but inpatient surgeries are her primary focus. It's her job to keep Cape Fear Valley Medical Center's main ORs busy and on schedule.

The medical center's busiest operating rooms may be the two assigned solely for joint replacement procedures. Dickson Schaefer, M.D., says the dedicated rooms have helped his practice greatly. His hip and knee replacement cases have doubled in recent years.

"My surgery volume has grown significantly," he said. "They are able to clean one room and get it ready for another case while I am operating in the other room."

Dr. Schaefer has begun discharging joint replacement patients the same day to reduce time patients have to spend in the hospital. He says many patients prefer to recover at home.

He modeled the practice after an Ohio-based healthcare system's discharge model. The goal is to get patients back on their feet and moving as quickly as possible.

"We're doing wellness surgery, not sick surgery," Dr. Schaefer said. "Getting them home faster helps them psychologically to feel better, faster."

Cape Fear Valley's urology numbers are also on the rise, especially kidney stone procedures. Juan Lopez, M.D., with Cape Fear Valley Urology, says the growth stems from North Carolina residing in the "Kidney Stone Belt."

The term refers to a region in the Southeast, where the rate of kidney stones is excessive. North Carolina reportedly has the highest incidence of kidney stones in the nation. Caucasian males are particularly at risk for the condition.

"The summers are just hot and humid, here," Dr. Lopez said. "People get dehydrated, leading to kidney stones. They keep us pretty busy."

The urologist and his colleagues use everything from special endoscopes to laser lithotripsy to treat the painful mineral formations. The practice also treats plenty of prostate and bladder cancers, incontinence and other minor conditions, using Highsmith-Rainey's ORs.

Urology procedures at Cape Fear Valley Medical Center look to also increase with the arrival of Landon Nguyen, M.D., a robotic surgery specialist. Robotic surgery can perform several types of complex procedures, often with more precision, flexibility and control than conventional techniques.

Dr. Nguyen will use Cape Fear Valley's da Vinci robotic surgery system. It's capable of treating a number of urology conditions, including prostate cancer, kidney disorders or cancer, urinary blockages and bladder cancer.

Cape Fear Valley Ear, Nose and Throat welcomes a new physician, as well: Jennifer Tartaglia, M.D. The ENT specialist and her new colleagues perform a wide range inpatient and outpatient procedures. They include thyroid treatment, salivary gland procedures, tonsillectomies, and repair of sinus and intranasal diseases.

# More Is Better

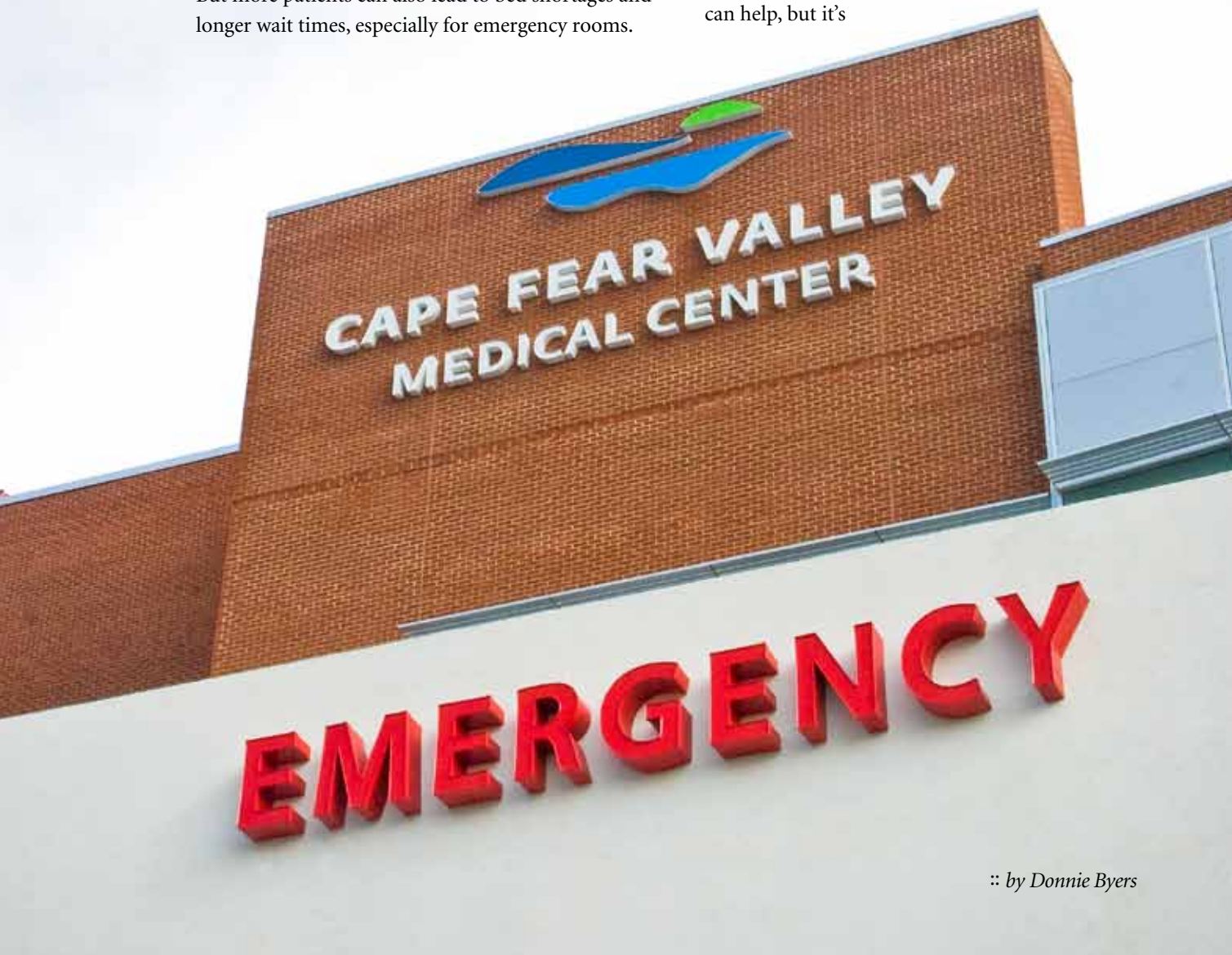
New beds and construction should ease patient flow

**Safety net hospitals like Cape Fear Valley Medical Center are never short of patients. That can be good and bad.**

High patient numbers mean physicians and staff get plenty of hands-on experience. This leads to better patient quality scores, ultimately benefitting patients. But more patients can also lead to bed shortages and longer wait times, especially for emergency rooms.

Cape Fear Valley Medical Center's Emergency Department is one of the busiest in the nation, with roughly 10,000 patient visits a month. The patient wait times often bear that out.

Patient backlogs aren't easy to fix. They're a natural byproduct of increased demand for services and too few beds. Adding beds can help, but it's



:: by Donnie Byers

never an easy proposition. It requires lots of planning, manpower and resources.

Cape Fear Valley Medical Center recently opened 17 new beds in its Adult ED. Five are “fast track” beds. Like the name implies, they’re designed to move lower-acuity patients through the ED faster to alleviate backlogs.

The remaining 12 beds are multi-purpose. They can be used for whatever is required at the time. That includes minor care, higher acuity treatment, or holding patients for temporary observation.

All 17 beds are housed in what used to be the ED administration area. The sliding glass entrance door leading to the area will become the main entrance after all renovations are done. The layout change will better accommodate ED traffic and increase security.

Construction took three months. Susan Phelps, Cape Fear Valley’s ED Service Line Director, said the results will be worth it.

“Having the additional bed space will definitely impact our throughput,” she said, “and help patients be seen in a more timely manner.”

The ED parking lot has also been revamped. It now has only one way in and one way out, to ease parking and traffic flow. Security guards have begun patrolling the entrance to ensure entering motorists have legitimate business in the lot.

## More construction

Work crews have since turned their attention to Cape Fear Valley Medical Center’s first floor in the Valley Pavilion wing. Construction there will create a new 28-bed observation unit to accommodate patients waiting for an inpatient bed.

The work is expected to take eight months and will essentially close in an exposed floor of Valley Pavilion, directly above the ED. The area was left unfinished when Valley Pavilion opened in 2008 to allow for future expansion.

At the time, only metal support stanchions and ceiling beams were erected, while the floor was covered with pebbles. The unfinished appearance eventually led the area to become known as the “birdcage.”



When complete, the new unit will provide an additional 17,500 square feet of space for patients and staff. It will look just like other Valley Pavilion floors, with their long, expansive hallways and modern design and lighting.

The construction work won’t end there. Cape Fear Valley Medical Center is also slated this year to open a similar 10-bed observation unit on the opposite side of campus. Like its counterpart, it will accept admitted ED patients waiting for a patient room in the main part of the hospital.

The second observation unit will be housed in what used to be the hospital’s old chest pain unit and ED trauma treatment area. It is located near the Children’s Emergency Department. When complete, it will add another 5,000 square feet of useable space.

Brian Pearce is Cape Fear Valley’s Corporate Director of Engineering. He says completing three major construction projects in a year is a lot to ask for, even for a large health system. But Cape Fear Valley can handle the growth, he said, because of his expert staff.

“Having engineers on staff allows us to coordinate multiple projects,” he said. “They also ensure we get the best design and high quality construction, while also saving us time and money. It’s all part of an effort to get patients into a hospital bed faster.”





# Bigger and Better

:: by Donnie Byers

## Cape Fear Valley Is Starting To See Growth In New Markets

A lot can change over a decade, especially in the healthcare field. Medicine changes, technology advances, and facilities often grow to keep up with the times. Some just grow at a faster pace.

Between 2005 and 2015, Cape Fear Valley Health went from four hospitals and 616 licensed beds to seven hospitals and 916 beds. The physician staff grew even faster, from 364 physicians to 605.

The prodigious growth has helped the health system become the state's 8<sup>th</sup> largest, with more than 1 million patient visits a year. Not surprisingly, many of those patients now come from outside Cumberland County. That makes Cape Fear Valley a truly regional provider.

But being regional has its drawbacks: massive amounts of time, energy and money are required every time

services are introduced to new areas. That hasn't slowed Cape Fear Valley's growth, however.

The health system's expansion effort picked up major steam in 2012 with the purchase of Bladen County Hospital in Elizabethtown. Cape Fear Valley Health could have been complacent after the purchase. But it has steadily invested in its new acquisition by bringing in new physicians, introducing more services and performing upgrades and repairs at the hospital and its outpatient clinics.

The most recent work was at Bladen Medical Associates' Dublin Clinic. The yearlong project essentially built a new satellite office, from the ground up, with double the floor space. The finished product now houses six exam rooms and room for two care providers instead of one.

A \$265,000 Kate B. Reynolds Charitable Trust grant helped pay for the construction. It will also help pay for the additional care provider's salary and new asphalt for the clinic parking lot.

Bladen County Hospital is growing, as well. It recently added a new general surgeon and six staff hospitalists for better inpatient care. Hospitalists are physicians whose primary focus is to provide general medical care to admitted patients.

The hospital has also begun marketing its multi-purpose medical/surgical beds to patients requiring rehab from surgery, strokes and other debilitating conditions.

"Some people just don't want to go to a traditional skilled nursing facility," said Debbie Morris, a Bladen Healthcare case manager. "They can rehab right here, instead."

Bladen ExpressCare is also benefiting from Cape Fear Valley's larger presence in the county. Its patient volumes are currently up 40 percent over last year.

The dramatic uptick has allowed Bladen County Hospital's Emergency Department to concentrate on treating patients needing more-acute care. Combined, the ED and ExpressCare have seen an 11 percent increase in patients over 2014.

## Hoke and Harnett

Cape Fear Valley's operations in Hoke County under the Hoke Healthcare banner are showing results, too. From March to November, Hoke Hospital's ED patient volume grew 143 percent.

The rapid growth will require hiring more ED nurses and physicians, according to Sheri Dahman, Hoke Healthcare's Chief Nursing Officer.

"The ED is ramping up pretty fast," she said. "Some days we'll have more than 100 patients a day, when we were projected to have just 40 a day at this point."

As a result, Hoke Hospital's patient numbers have also increased. In six months, the average daily census has gone from eight patients a day to more than 20. More staff is being recruited, just like in the ED.

On the surgery side, two general surgeons have begun providing around-the-clock coverage for the ED and hospital.

Hoke Hospital has also begun offering 24-hour cardiology service coverage and on-site stress testing, through its nuclear medicine testing program. Patients with chest pain and other heart-related symptoms can now be admitted to Hoke Hospital for cardiac diagnostic testing, as well.

Numbers in Harnett County are also improving. Figures show ED patient enrollment is up 6 percent over the past year.

Administrators hope the increase translates to more inpatients at Betsy Johnson Hospital in Dunn and Central Harnett Hospital in Lillington, which comprise Harnett Health.

Cape Fear Valley Health agreed to manage Harnett Health in late 2014 to help turn around its bottom line. Cape Fear Valley has set a plan in place to reduce spending and grow patient volumes. That includes adding more specialty services, such as cardiology, gastroenterology and ear, nose and throat (ENT).

Ferncreek Cardiology of Fayetteville has already followed Cape Fear Valley's lead into the county. The practice now offers outpatient services and inpatient consults, five days a week, at both hospitals.

The move has helped spur surgery volume growth at both hospitals in recent months. Two new general surgeons have been brought in to help with the growing demand.

Kevin Jackson, Harnett Health President, hopes to eventually see a cardiac catheterization laboratory come to the county, as well as radiation oncology services.

"The key here," Jackson said, "is to continue to grow so we can provide the services patients need here in Harnett County."

2005 to 2015

4 to 7  
Hospitals

616 to 916  
Licensed Beds

364 to 605  
Physicians



## *Strong Hospitals Need* **Strong FOUNDATIONS**

:: by Ginny Deffendall

**To the average patient**, terms like federal sequestration, Medicaid cutbacks and Medicare reform mean very little. But to healthcare providers, they mean everything.

Federal healthcare reform has become a difficult reality for U.S. hospitals in recent years. In Cape Fear Valley's case, the movement has already cost millions in annual reimbursement revenue.

Cape Fear Valley receives 74 percent of its insurance reimbursements from government payers, such as Tricare, Medicare and Medicaid. All three have been affected greatly under healthcare reform.

"This is why when federal programs get cuts," said Cape Fear Valley CEO Mike Nagowski, "we feel it more than other hospitals."

This is where Cape Fear Valley Health Foundation makes a difference. The health system's philanthropic arm tries to fill in the gaps by funding equipment, facilities and programs that might otherwise fall through the cracks during a tough budget year.







The Health Foundation, and its generous donors, have shown their importance in a variety of ways in recent years. They include funding more than \$500,000 in renovations to Cape Fear Valley's Children Center, and another \$550,000 in care enhancement grants for various services throughout the health system.

Last year alone, the foundation provided more than \$200,000 in support to more than 500 cancer patients with non-medical needs. It also established a scholarship fund to help Cape Fear Valley nurses further their education.

But it's not just about distributing money. The foundation also works with local, state and federal agencies to secure funding for Cape Fear Valley and its companion network of healthcare service providers. They include Cumberland County Medication Access Program (CCMAP) and Cumberland HealthNet.

Another vital service the organization provides is helping set up endowment funds. These can be used across hospital service lines, providing an ongoing source of funding.

"Endowed funds support activities not just for one year," said Sabrina Brooks, Health Foundation Executive Director, "or even one generation, but forever. They make a lasting impact on the health and wellness of our community."

The foundation established the Irene Thompson Byrd Cancer Care Endowment last year and the Charles B. C. Holt Diabetes Endowment in 2014. It hopes to establish more in coming years, especially for heart and Alzheimer's patients.

"Strong hospitals are backed by very strong foundations," Nagowski said. "The capital funding requests of the hospital always outpace our ability to fund all of them. The Foundation really helps bridge that gap."

Brooks agrees.

"Investing in philanthropy makes sense," she said.

"Healthcare philanthropy offers a meaningful, sustainable and potentially transformational revenue source. Supporting Cape Fear Valley Health Foundation is an investment in our community."

Each year, through the Employee Giving Campaign, employees make a difference by donating to Cape Fear Valley Health Foundation.

Employee donors may direct their donation to the Lighthouse Society (which aids Cape Fear Valley Health employees in times of emergency), one of the Health Foundation's Friends groups, or to the Foundation's greatest need.

This year, 770 employees pledged to donate more than \$235,000. More than 130 employees joined the Hour Club by pledging to donate an hour's worth of pay each paycheck to Cape Fear Valley Health Foundation.

*This year* BY THE NUMBERS:

770

employees pledged to donate in 2015

\$235,000

raised in the 2015 campaign

130

employees joined the Hour Club by pledging to donate an hour's worth of pay each paycheck to Cape Fear Valley Health Foundation.

# Suspect Sepsis



Every year, more than  
**200,000** Americans  
 die from a condition  
 most people have  
 never heard of.

:: by Ginny Deffendall

It's called sepsis and its symptoms may be confused with the flu.

Patients can suffer from fever, chills and weakness. The symptoms stem from the body's attempt to fight off an underlying infection, such as pneumonia or urinary tract infections. But even a simple paper cut or minor burn can lead to sepsis.

It occurs when the body has an inflammatory reaction to chemicals released in the body to fight off the infection. If left untreated, the inflammation becomes widespread, leading to leaky blood vessels, blood clots and a drop in blood pressure.

Decreased blood flow to organs follows, depriving organs of vital oxygen and nutrients. Organ failure can result, sometimes leading to death.

"It's a very serious illness," said Anthony Grello, D.O., a Cape Fear Valley Emergency Department physician. "It contributes to as many as half of all hospital deaths."

Dr. Grello says early detection is the key to fighting sepsis, which leads to better patient outcomes. His colleague, Cheryl Colvin, M.D., agrees.



CAPE FEAR VALLEY HEALTH



She routinely sees patients come through the ED with abnormal vital signs that could indicate sepsis. They include elevated white blood cell counts, fever or low temperatures.

“We always say ‘suspect sepsis,’ to be safe,” Dr. Colvin said. “That’s why we started a comprehensive sepsis prevention program in Cumberland County.”

As a result, Cape Fear Valley Medical Center recently became the first hospital in the state to receive Disease Specific Care Certification for the treatment of Sepsis from The Joint Commission. Bladen County Hospital received the same certification. The Elizabethtown facility is the first critical access hospital in the nation to earn the distinction.

The Disease Specific Care Certification is a symbol of quality reflecting a hospital’s commitment to meeting certain performance standards when treating sepsis patients.

Cape Fear Valley’s treatment strategy starts with its Emergency Department medical team. Members look for certain indicators to determine if patients are septic. If so, they begin a sepsis protocol, involving blood tests and IV hydration. Once the blood work is drawn, antibiotics are given.

“If infection is even suspected, we’ll give broad-spectrum antibiotics,” Dr. Grello said, “so we can treat any infection, while we find out what is causing the problem.”

Anyone can get sepsis, but some are at higher risk. They include people who:

- Have a weakened immune system
- Are age 65 or older
- Have a chronic disease such as diabetes, AIDS, cancer or kidney disease
- Have severe burns or trauma
- Have a long-term catheter

Specific symptoms include fever or low body temperature, chills, rapid breathing, rapid heart rate, confusion, decreased urine or dark-colored urine, weakness, lightheadedness, and skin color changes.

Many of these can mimic symptoms of other illnesses, making sepsis difficult to diagnose early. Patients who exhibit such symptoms should follow up with their physician immediately to be safe. Doing so, could avoid a long and costly hospital stay, or even death.

“Always suspect sepsis,” Dr. Colvin said.





# SecondChances

## Becoming an organ donor can make a real difference in someone's life

:: by Donnie Byers

**Kelvin Culbreth was just 40 years old when doctors unexpectedly told him he needed a new liver.** It was the shock of his life, to say the least.

"They come in one day and say: 'Boom! You've got liver disease – and it's end-stage,'" Culbreth said. "I wasn't some raging alcoholic or had anything traumatic going on. It just happened. I got sick."

The year was 2003, and he had somehow contracted non-alcoholic steatohepatitis (NASH). Often called "silent liver disease," it resembles alcoholic liver disease but occurs in people who don't drink. It was slowly killing him by allowing over-accumulation of fat in his liver.

The liver is the second largest organ in the body. Its sole purpose is to process anything eaten or consumed as a liquid to filter harmful substances from the blood. Too much fat in the liver interrupts the process.

Unlike most organs, livers can regenerate damaged cells if the damage is caught in time. But it was too late in Culbreth's case. He was referred to Duke University Medical Center in Durham for treatment.

His hope was to eventually be placed on an organ transplant list. But his doctors wanted to see how treatment fared first.

The days turned into weeks, and the weeks into months. Before long, years had passed. His liver continued to deteriorate, as did his health. Normally 6 feet tall and well over 200 pounds, Culbreth became rail-thin and almost unrecognizable to friends.

It was hard for them to watch the 52-year-old disc jockey and radio program manager waste away. Better known as "The Greek" on Fayetteville's ROCK 103, Culbreth had always possessed an upbeat, easygoing on-air personality. He eventually had to leave the broadcast booth, because of his diminishing voice and lack of energy.

But leaving the air still wasn't as bad as waiting to be placed on an organ transplant list. His life had become one long waiting game. And the wait really was killing him.

Medical bills were racking up, and his mother's church knew Culbreth would someday need a transplant. The group threw a barbecue plate fundraiser to help, eventually selling more than 2,000 plates.

God must have been listening that day, because in 2010 Culbreth changed jobs. That led to new health insurance and eventual treatment at the Medical University of South Carolina in Charleston. Doctors there immediately placed him on an organ waiting list. Then he was told to keep a packed suitcase in his car, so he would be ready for "the call."

Nine months later, it came.

It was 3:30 on a chilly February morning in 2011. Culbreth was told to be in Charleston by 9 a.m. because a matching liver had been found. He, his wife, Kelly, and his mother, Martha, hopped into a car soon after and sped off into the early morning darkness.

Martha Culbreth was her son's designated caregiver, so she had to come along. Having such a designee is a requirement to be on an organ waiting list. But more importantly, she was also her son's hero, so there was no way she was staying behind.

When Culbreth woke from surgery, all he could think about was food. His appetite astounded his doctors and nurses. They brought him broth and Jell-O, and then marveled at his will to eat.

"It was my gift," he said. "I woke up hungry and never really lost my appetite. That makes everything better, from your actual recovery to your mental state. Transplant patients who don't eat, struggle."

Fast-forward to today and Culbreth has regained the lost weight. He's also back at work after just six weeks of recovery time. He can thank his new liver, which is working better than even his doctors had hoped.

Culbreth's experience has been so positive that he's become an organ and tissue donation advocate. He often tells people waiting for organ transplants to do what he did and stay positive.

"I never went home to a sick bed," he said. "Living life, as normal as possible, is a big part of surviving."

## The Numbers

Culbreth's extraordinary recovery is a testament to the importance of organ donation. Last year alone, organ donors made 280,000 transplants possible. Another million people received donated corneas and other tissue transplants, helping them recover from trauma, vision loss, spinal injuries, bone damage and major burns.

But thousands more died last year because they couldn't get a new organ in time. Currently, there are 120,000 Americans waiting for an organ transplant. More than 30,000 live in North Carolina.

"We have a critical need for organs," said Taylor Anderton, a community relations coordinator with Carolina Donor Services. "Every 10 minutes, someone is added to the waiting list. But 22 people die every day waiting."

Carolina Donor Services helps locate potential organ donors throughout North Carolina and Virginia and then facilitates transplantation of those organs.

The hardest part of her line of work is approaching families with loved ones near death. But the work is vital – and a continual race against time. Organs like the heart and lungs are so fragile they have just hours to be transplanted.

"Chances are they won't leave the state they're found in because of the time constraints," Anderton said.

The biggest need is for kidneys due to the explosive growth of diabetes, kidney disease and extreme hypertension among Americans. But every organ is valuable. The good news is that every organ donor has the potential to save up to eight lives. And anyone can donate, regardless of age.

More than 120 million people have already signed up to donate in the U.S. Here in North Carolina, more than 4.6 million have registered.

To donate, simply check a box when obtaining or renewing a driver's license, or go online and register on the state donor registry list at [www.donatelifenc.org](http://www.donatelifenc.org). Youths age 13 to 17 can register, but parents will have final say about the requested organ donation. People who live outside North Carolina can register at [www.donatelifenet.net](http://www.donatelifenet.net).

Potential donors can also provide directions through advance directives, such as healthcare power of attorneys and living wills. Donors should also notify family, friends and faith leaders of their decisions to avoid confusion when the time comes.

## So why become a donor?

Becoming an organ donor means giving the gift of hope. It also provides a second chance at life for someone you may or may not know. On average, 81 people a day receive an organ transplant in the U.S. That's 81 second chances.

Culbreth got his. He will never be able to personally thank his organ donor. But he would like to meet his donor's family someday. If he does, he'd tell them about the years of struggle to finally get a new liver.

"I wouldn't be here without it," Culbreth said. "But my story is remarkable because it's so unremarkable. Organ transplants happen every day. The challenge is to demystify organ donation among the public."

"There are a lot of myths out there. Whatever happens after you die, you can't take your organs with you. You can help so many people by just being a donor."



# QUALITY HEALTHCARE

## How Do We Compare?

With more than 100 hospitals in North Carolina, patients have many options to choose from for their healthcare needs. Always choose a hospital with validated quality from a trusted source. These two pages show some of those criteria. Page 28 shows how Cape Fear Valley compares with three other hospitals.

### The LeapFrog Group

The LeapFrog Group is a leading independent hospital watchdog group. Their Hospital Safety Score rating system is considered the gold standard for patient safety.

### U.S. News & World Report : 2016 Best Hospitals

#### Cape Fear Valley Medical Center

Heart Failure Gold  
Resuscitation Award Silver  
Mission: Lifeline Award Gold Receiving  
Stroke Award Gold  
Target: Stroke Honor Roll  
AHA/ASA/TJC Primary  
Stroke Center Certification

#### University of North Carolina Hospitals

Mission: Lifeline Award  
Gold Receiving Plus  
Stroke Award Gold Plus  
Target: Stroke Honor Roll  
AHA/ASA/TJC Comprehensive  
Stroke Center Certification

#### Duke University Hospital

Heart Failure Award Gold Plus  
Target: Heart Failure Honor Roll  
Mission: Lifeline Award Gold Receiving  
AHA/ASA/TJC Comprehensive  
Stroke Center Certification

#### FirstHealth Moore Regional Hospital

*Not listed*

A

B

C

D

F

Cape Fear Valley Medical Center

.....  
Duke University Hospital

First Health Moore Regional Hospital

.....  
University of North Carolina Hospitals



## The Joint Commission



An independent not-for-profit organization, The Joint Commission accredits and certifies nearly 21,000 health care organizations and programs in the United States. It is recognized nationwide as a symbol of quality that reflects an organization's commitment to meeting certain performance standards.

### Cape Fear Valley Medical Center

*Advanced Certification in:*  
Stroke (Primary Stroke Center)

*Certification in:*

Acute Myocardial Infarction (Heart Attack)

Heart Failure

Joint Replacement – Hip

Joint Replacement – Knee

Pneumonia

Sepsis

Silver Get With The Guidelines – Stroke

Silver Get With The Guidelines – Heart Failure

Metabolic and Bariatric Surgery Accreditation and Quality Improvement Program

### Duke University Hospital

*Advanced Certification in:*  
Comprehensive Stroke Center  
Ventricular Assist Device

*Certification in:*

Joint Replacement – Hip

Joint Replacement – Knee

Medal of Honor for Organ Donation

ACS National Surgical Quality Improvement Program

Gold Plus Get With The Guidelines – Heart failure

Gold Plus Get With The Guidelines – Stroke

Silver – The Medal of Honor for Organ Donation

Magnet Award

### FirstHealth Moore Regional Hospital

ACS National Surgical Quality Improvement Program  
Magnet Award

### University of North Carolina Hospitals

*Advanced Certification in:*  
Comprehensive Stroke Center  
Ventricular Assist Device

The Medal of Honor for Organ Donation

ACS National Surgical Quality Improvement Program

Gold Plus Get With The Guidelines – Stroke

Silver – The Medal of Honor for Organ Donation

Metabolic and Bariatric surgery Accreditation and Quality Improvement Program

Magnet Award

## The Joint Commission's Top Performer on Key Quality Measures (released November 2015)

### Cape Fear Valley Medical Center

Heart Attack

Heart Failure

Pneumonia

Surgical Care

Stroke

Perinatal Care

### Duke University Hospital

*Not Listed*

### FirstHealth Moore Regional Hospital

*Not Listed*

### University of North Carolina Hospitals

Heart Attack

Heart Failure

Pneumonia

Surgical Care

Stroke

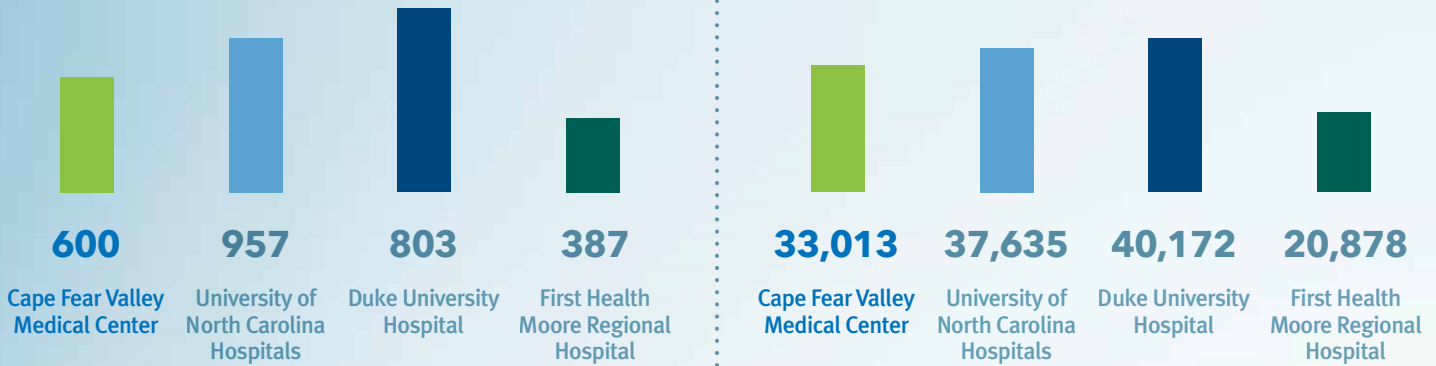
Perinatal Care



## Number of Patient Beds



## Number of Admissions



## Number of Employees



4,721

Cape Fear Valley Medical Center



7,100

University of North Carolina Hospitals



10,024\*

Duke University Hospital

\*Includes Residents & Faculty



2,700

First Health Moore Regional Hospital

## Number of Physicians on Medical Staff



605

Cape Fear Valley Medical Center



1,100

University of North Carolina Hospitals



1,925

Duke University Hospital



249

First Health Moore Regional Hospital

## Number of Surgeries



15,371

Cape Fear Valley Medical Center



29,946

University of North Carolina Hospitals



40,056

Duke University Hospital



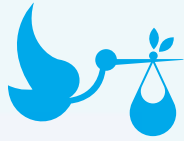
9,879

First Health Moore Regional Hospital



## Number of ED Visits





Births



ED Visits



Outpatient Visits



Inpatient Discharges



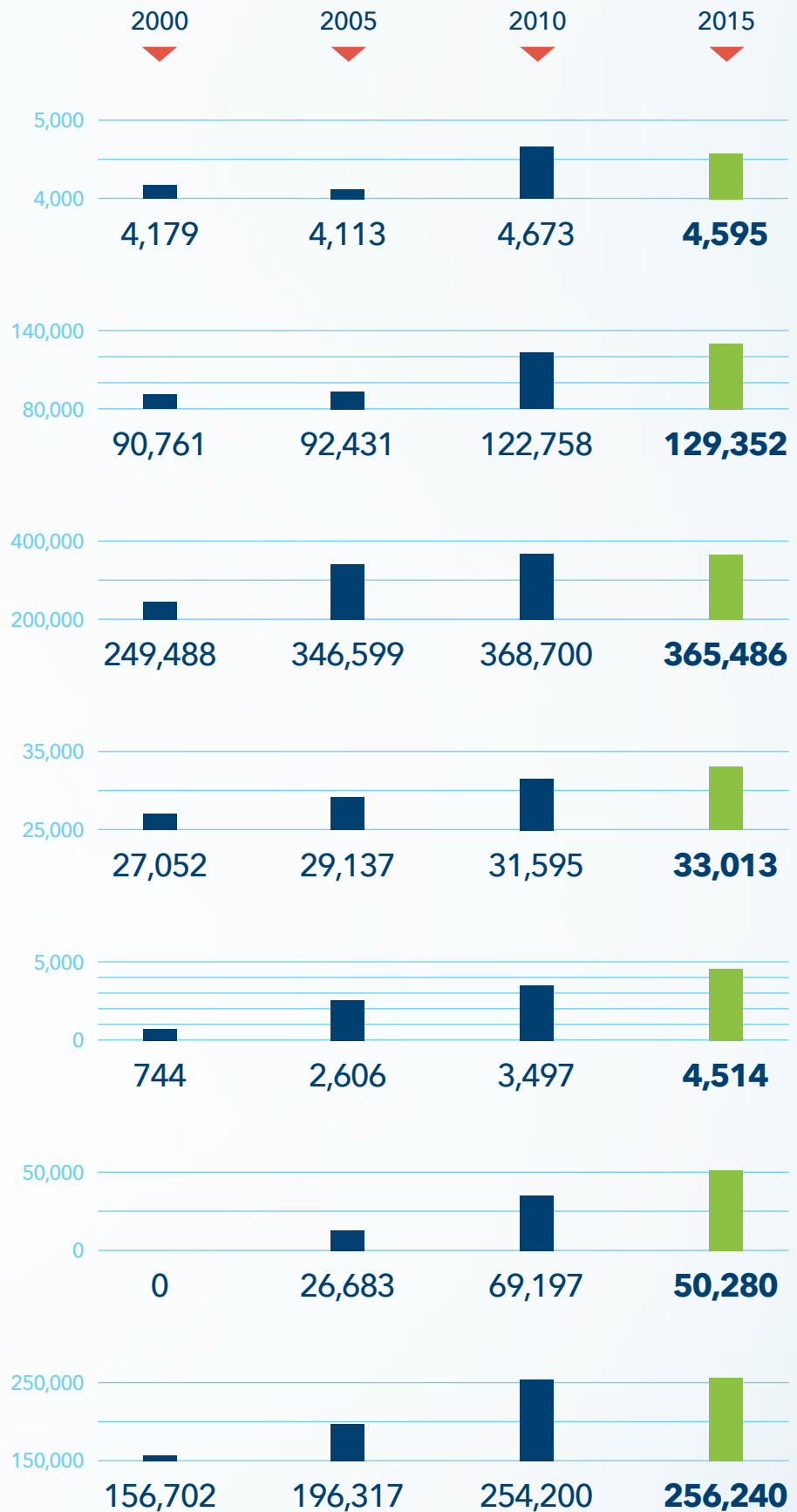
Cardiac Caths



ExpressCare Visits



Physician Clinic Visits







## Patient Letters



Dear Mr. Nagowski,

My name is Edryce Tucker and I am writing concerning the care that the Community Paramedics have rendered to my 84-year-old mother.

She has lived with our family for over 16 years and has battled congestive heart failure for several years. My mom has been hospitalized four times this year.

When she was discharged two weeks ago, she was enrolled in the Community Paramedics program. Robyn McArdle, one of the paramedics in the program, visited with my mother shortly after she was discharged. Robyn and the other paramedics who visited with my mom were wonderful. They were professional and extremely compassionate.

My mother is a very private, shy person, but each person involved with Community Paramedics who has served her made her feel special. Robyn facilitated mom enrolling in the “medicine in a box” program with Stedman Pharmacy. Prior to mom’s meds being moved to Stedman Pharmacy, we utilized Health Pavilion North Pharmacy.

The rest of our family members continue to use Health Pavilion North Pharmacy. They are the most caring, highly professional, genuine group of people we have the pleasure to know and do business with since 2007.

Thank You,

Edryce Tucker  
Fayetteville, N.C.

Dear Mr. Nagowski,

I have been a patient of Dr. Manesh Thomas since 2012. I live in Wilmington, but spend my weekdays in Fayetteville as an employee of a local general contractor.

Until recently, all was fine with my heart health. I had my yearly follow-up visit with Dr. Thomas in July, and based on some subtle symptoms, Dr. Thomas suggested I have a cardiac catheterization.

The catheterization was performed at Cape Fear Valley Heart & Vascular Center in August. To my surprise, several blockages were discovered. One stent was placed to correct two of the blockages in the right coronary artery. Two other blockages were discovered in the left anterior descending artery with significant hardened calcium build-up. A second procedure was scheduled for September to correct these blockages. Calcium was removed with atherectomy and two additional stents were placed. All procedures went well and I am currently doing fine.

This is certainly to sing the praises of Dr. Thomas. He is a compassionate individual with an ability to communicate to his patients I have rarely seen in most physicians. After both procedures, Dr. Thomas took significant time to inform my family of the procedures, outcome and prognosis in such an insightful and compassionate way.

The experiences at Cape Fear Valley Heart Center were significantly and markedly superior to a recent stay at another hospital. Not only did I notice the difference as a patient, but my family, as onlookers, recognized it as well. I cannot isolate one experience that was below excellent in my two stays and certainly commend your leadership in providing a facility of this caliber.

Respectfully,

Patrick Paluso  
Wilmington, N.C.

Manesh Thomas, MD



To the CICU Staff,

To everyone who cared for our beloved Laura “Lori” Worster, we thank you.

The care and compassion shown by each and every one of you was an immense comfort to us and assured us that she was in the best possible hands.

Dr. Patel and Dr. Barnhorst – thank you for all your efforts on Lori’s behalf and for always being honest with us.

Felicia – thank you for putting up with my meltdowns. You were a calming voice to us during our most desperate times.

Tiffany – thank you for the way you spoke to Lori as you cared for her. It meant so much to her Dad to hear you call her “Miss Laura.”

Derrick – just thank you. Thank you for being with us, for talking to us, joking with us and being there with us (for the record, I really liked the curls).

Shannon, Cassandra, the night shift who worked so hard to get us food while we sat vigil at Lori’s bedside during her final hours, and to all those whose names we don’t know and may not have met – thank you.

Each and every one of you touched us so during our darkest hours. We will never forget the care you gave to our beloved Lori or the compassion you showed to us.

With Sincere Gratitude,

Patricia and Ralph Rogers  
Red Hook, N.Y.



## CAPE FEAR VALLEY HEALTH : *NEW physicians*

### EMERGENCY MEDICINE

**Ellyn Meshel, M.D.**, has been approved for the medical staff of Hoke Hospital and has joined Hoke Hospital Emergency Department. Dr. Meshel received her medical degree from Chicago Medical School in Chicago, Ill. She completed a residency in internal medicine at Evanston Hospital in Evanston, Ill. and a fellowship in allergy and immunology at East Carolina School of Medicine in Greenville. Dr. Meshel is board certified in internal medicine.

**Sean Ray, M.D.**, has been approved for the medical staff of Cape Fear Valley Medical Center and has joined Cape Fear Valley Medical Center Emergency Department. Dr. Ray received his medical degree from Marshall University School of Medicine in Huntington, W. Va. He completed a residency in emergency medicine at San Antonio Military Medical Center in San Antonio, Texas. Dr. Ray is board certified in emergency medicine.

### HOSPITALISTS

The following hospitalists have been approved for the medical staff of Cape Fear Valley Medical Center and have joined Cape Fear Valley Hospitalist Group:



Kelechi Aruogu, M.D.

**Kelechi Aruogu, M.D.**, received his medical degree from University of Nigeria in Enugu, Nigeria. Dr. Aruogu completed a residency in internal medicine at Saint Joseph Hospital

in Chicago, Ill. He is board certified in internal medicine.



Surinder Bahia, M.D.

Regional Area Health Education Center in Fayetteville, N.C. He is board certified in family medicine.

**Surinder Bahia, M.D.**, received his medical degree from Kasturba Medical College in Manipal, India. Dr. Bahia completed a residency in family medicine at Duke/Southern



Stacy Blecher, M.D.

medicine at Hahnemann University Hospital in Philadelphia, Penn. She is board certified in internal medicine.

**Stacy Blecher, M.D.**, received her medical degree from American University of the Caribbean in Sint Maarten, Netherland Antilles. Dr. Blecher completed a

residency in internal medicine at Hahnemann University Hospital in Philadelphia, Penn. She is board certified in internal medicine.



Hima Challa, M.D.

Mich. She is board certified in internal medicine.

**Hima Challa, M.D.**, received her medical degree from Gandhi Medical College in Secunderabad, India. Dr. Challa completed a residency in internal medicine at St. Joseph Mercy Oakland in Pontiac,



Lokesh Marigowada, M.D.

medicine at McLaren Regional Medical Center in Flint, Mich. He is board certified in internal medicine and hospice and palliative care.

**Lokesh Marigowda, M.D.**, received his medical degree from Rajiv Gandhi University of Health Science in Bangalore, India. Dr. Marigowda completed a



Dana Marrero, M.D.

Hospitals in Philadelphia, Penn. She is board certified in internal medicine.

**Dana Marrero, M.D.**, received her medical degree from Creighton University School of Medicine in Omaha, Neb. Dr. Marrero completed a residency in internal medicine at Thomas Jefferson University



Nafisa Saleem, M.D.

Hospital Medical Center in Brooklyn, N.Y. She is board certified in internal medicine.

**Nafisa Saleem, M.D.**, received her medical degree from Jahurul Islam Medical College in Bajitpur, Bangladesh. Dr. Saleem completed a residency in internal medicine at Brookdale University





Kalyan Uppaluri, M.D.

**Kalyan Uppaluri, M.D.**, received his medical degree from Gandhi Medical College in Secunderabad, India. Dr. Uppaluri completed a residency in internal medicine at McLaren Regional Medical Center in Flint, Mich. He is board certified in internal medicine.

## INTENSIVISTS

The following intensivists have been approved for the medical staff of Cape Fear Valley Medical Center and have joined Cape Fear Valley Intensivist Program:



Samuel Kimani, M.D.

**Samuel Kimani, M.D.**, received his medical degree from University of Nairobi in Nairobi, Kenya. Dr. Kimani completed a residency in internal medicine and a fellowship in pulmonary and critical care medicine, both at Indiana University in Indianapolis, Ind. He is board certified in internal medicine, pulmonary disease and critical care medicine.



Esteban Mery-Fernandez, M.D.

**Esteban Mery-Fernandez, M.D.**, received his medical degree from Universidad CES in Medellin, Columbia. Dr. Mery-Fernandez completed a residency in internal medicine at Geisinger Medical Center in Danville, Penn. He completed a fellowship in critical care medicine at University of Pittsburgh Medical Center in Pittsburgh, Penn.

Dr. Mery-Fernandez is board certified in internal medicine and critical care medicine.



Roshan Patel, M.D.

**Roshan Patel, M.D.**, received his medical degree from B.J. Medical College in Ahmedabad, India. Dr. Patel completed a residency in internal medicine at Wyckoff Heights Medical Center in Brooklyn, N.Y. He completed a fellowship in critical care medicine at Mount Sinai Hospital/Icahn School of Medicine in New York, N.Y. Dr. Patel also completed a fellowship in nephrology at Elmhurst Hospital in Elmhurst, N.Y. He is board certified in internal medicine.

**Carl Pavel, M.D.**, received his medical degree from Medical College of Wisconsin in Milwaukee, Wisc. Dr. Pavel completed a residency in internal medicine at Brooke Army Medical Center in San Antonio, Texas. He completed a residency in pulmonary disease and critical care medicine also at Brooke Army Medical Center. Dr. Pavel is board certified in internal medicine, pulmonary disease and critical care medicine.

## OBSTETRICS & GYNCOLOGY



Landon Todd Williams, M.D.

**Landon Todd Williams, M.D.**, has been approved for the medical staff of Cape Fear Valley Medical Center and has joined Fayetteville Woman's Care. Dr. Williams received his medical degree from East Carolina University Brody School of Medicine in Greenville. He completed a residency in obstetrics and gynecology at University of Tennessee Health Sciences Center in Memphis, Tenn.

## OPHTHALMOLOGY



Brandon Phillips, M.D.

**Brandon Phillips, M.D.**, has been approved for the medical staff of Cape Fear Valley Medical Center and has joined Carolina Vision Center. Dr. Phillips received his medical degree from Medical College of Wisconsin in Milwaukee, Wisc. He completed a residency at Walter Reed National Military Medical Center in Bethesda, Md. He is board certified in ophthalmology.

## PEDIATRIC CRITICAL CARE

**Loay Abdulsamad, M.D.**, has been approved for the medical staff of Cape Fear Valley Medical Center and has joined Cape Fear Valley Pediatric Critical Care. Dr. Abdulsamad received his medical degree from King Faisal University in Dammam, Saudi Arabia. He completed a residency in pediatrics at IWK Health Centre in Halifax, Nova Scotia. Dr. Abdulsamad completed a fellowship in pediatric critical care at Boston Children's Hospital in Boston, Mass. He is board certified in pediatrics.

## UROLOGY



Lang Nguyen, M.D.

**Lang Nguyen, M.D.**, has been approved for the medical staff of Cape Fear Valley Medical Center and has joined Cape Fear Valley Urology. Dr. Nguyen received his medical degree from University of Virginia in Charlottesville, Va. He completed a residency in urology at George Washington University in Washington, D.C. Dr. Nguyen completed a fellowship in robotic surgery at Hartford Hospital in Hartford, Conn.

CAPE FEAR VALLEY HEALTH : *PHYSICIAN* *briefs*

Khalid Aziz, M.D.

**Khalid Aziz, M.D.**, of Carolina Diabetes & Obesity Center, has been appointed an Affiliate Associate Professor in the Department of Internal Medicine at East Carolina University Brody School of Medicine.

For an appointment, please call (910) 484-7722.



Issa M. Elgendy, M.D.

**Issa M. Elgendy, M.D.**, was appointed to the faculty of Campbell University School of Osteopathic Medicine as an Assistant Professor of Pediatrics. Dr.

Elgendy, a Lead Physician, practices at Cape Fear Valley Pediatrics Care. For an appointment, please call (910) 615-4801.



Samar S. Elgendy, M.D.

**Samar S. Elgendy, M.D.**, was appointed to the faculty of Campbell University School of Osteopathic Medicine as an Assistant Professor of Family Medicine. Dr. Elgendy

practices at Westside Medical Care. For an appointment, please call (910) 482-3000.



Kalpana Krishna, M.D.

certified by the American Board of Obesity Medicine. For an appointment, please call (910) 488-6337.

**Kalpana Krishna, M.D.**, has relocated her practice, Ramsey North Medical Clinic, to 1212 Walter Reed Road. Dr. Krishna was recently



Brandt Wood, D.O.

of Osteopathic Medicine in Blacksburg, Va. The students are training alongside area physicians through Southern Regional Area Health Education Center.

**Brandt Wood, D.O.**, of Fayetteville Woman's Care, has been named "Preceptor of the Year – Fayetteville Region" for his work with medical students from the Edward Via College

**Rodney Sessoms, M.D.**, has relocated his practice, Sessoms Medical Associates, to 518 Beaumont Rd. For an appointment, please call (910) 779-2564.



Dominic Storto, M.D.

**Dominic Storto, M.D.**, has opened Highland Surgical Associates at 1565 Purdue Dr., Suite 201A. For an appointment, please call (910) 491-1188.



## The 10th Annual Ribbon Walk & Run

Lace up your running shoes and meet us at Festival Park for Cape Fear Valley Health Foundation's 10th annual Friends of the Cancer Center Ribbon Walk & Run for Cancer.

The event will take place on Sunday, April 10, at 3 p.m. Register in advance at [www.ribbonwalkforcancer.org](http://www.ribbonwalkforcancer.org). Registration the day of the event starts at 1 p.m.

The event also offers a sanctioned 5K race this year. Runners participating in the timed race will start promptly at 3 p.m., just before others begin.

Proceeds from the Ribbon Walk help provide hundreds of cancer patients in our local community with emotional support, informational resources, free mammograms, food supplements, wigs, gas vouchers, free hats and turbans, massages and reflexology, Artful Reflections art therapy and emergency needs funding.



## Diabetes Ball

Find the perfect mask and join us for “A Night of Disguise” at this year’s Cape Fear Valley Health Pediatric Diabetes Spring Ball.

Parents and children, age 10 and older, are invited to Highland Country Club on Saturday, April 16, at 6 p.m. Tickets are \$75. All proceeds help fund a weekend pediatric diabetes camp held each summer.

For more information or to purchase tickets, please call (910) 615-1885.



## New Year, New Online Look

Cape Fear Valley launched its redesigned website in December with a new look and easier functionality. The overhaul took six months and updated more than 500 pages.

The redesign includes a new, easier-to-use “Find a Physician” search engine. To see the changes and updated look, visit [www.capefearvalley.com](http://www.capefearvalley.com).



## Honoring Cape Fear Valley Veterans

Cape Fear Valley’s Nursing Congress and Administration hosted a Veteran’s Day breakfast to honor employees who previously served in the Armed Forces.

More than 450 veterans from every health system campus attended. Each was presented with a specially engraved pen. Westover JROTC members presented the flag, while a bagpipe played Amazing Grace to honor fallen, MIA and POW soldiers.



## Support Services Academy

Cape Fear Valley’s Support Services Academy December graduates included four from Patient Transportation, five each from Food and Nutrition and Environmental Services and eight nursing assistants. The nursing assistants were the first to graduate in the nation. The yearlong academy explored topics related to job performance, such as personal values, workplace ethics, accountability and the decision-making process. Transporters who complete the Service Academy program receive national certification. Cape Fear Valley Health has the largest number of Certified Transporters in the U.S. and Canada at 83.





The 20th Annual Friends of Children Golf Classic took place on Thursday, Oct. 8, 2015. The event raised \$150,000 to purchase updated lighting in Cape Fear Valley Medical Center's Labor & Delivery suites.

## THANK YOU *for your* SUPPORT

*Cape Fear Valley Health Foundation is grateful for the ongoing support from our community! Through the generosity of donors, volunteers and many others, the Foundation helps ensure that our community's hospital is able to provide world-class healthcare.*



The 10th Annual Circle of Friends Gala was held on Jan. 23, at Highland Country Club. Over the course of 10 years, the Gala has provided more than \$1.5 million in support to the Foundation's Friends groups and special projects.



On February 24, Ryan's Reindeer Run presented a check for \$3,000 to Cape Fear Valley Health Foundation's Friends of the Cancer Center.

# More than a health fair, a total **wellness experience!**



FREE health screenings  
Vendors  
Demonstrations  
Giveaways  
Entertainment

**FREE  
Expo!**



**Saturday, May 14**

11 a.m. to 3 p.m.  
Crown Expo Center

The Fayetteville Observer's



**Thrive**

A Total Wellness Experience

Presented By



**FayObserver.com/Thrive**



## CAPE FEAR VALLEY HEALTH *in the* Community

### COMMUNITY CLASSES

#### FOR EXPECTANT PARENTS

##### BREASTFEEDING CLASSES

This class covers all the basics, including practical solutions to common problems. Classes are held, from 6 to 7:30 p.m., in the Cape Fear Valley Education Center, 3418 Village Dr.

April 6 & 20

May 4 & 18

June 1, 15 & 29

**FREE!** Fathers are encouraged to attend.

To register, call (910) 615-LINK (5465).

##### PREPARED CHILDBIRTH CLASSES

Series of three classes meets May 3, 10 & 17, from 6 to 9 p.m.

Saturday Accelerated Childbirth Classes meet from 9 a.m. to 5 p.m. and are held on May 7 and June 4.

Classes meet in the Cape Fear Valley Education Center, 3418 Village Dr.

Cost is \$30 per couple.

To register, call (910) 615-LINK (5465).

##### FAMILY BIRTH CENTER TOURS

Held every Tuesday at 5 p.m.

**FREE!** Fathers are encouraged to attend.

To register, call (910) 615-LINK (5465).

#### FOR ADULTS

##### ARTHRITIS OF THE HIP & KNEE

Thursday, April 28

6:30 – 7:30 p.m.

Cape Fear Valley Education Center

**FREE!** An orthopedic surgeon will discuss the signs and symptoms of arthritis and available treatments.

To register, please call (910) 615-7996.



CAPE FEAR VALLEY  
BLOOD DONOR CENTER

### MOBILE BLOOD DRIVES

#### FAYETTEVILLE

##### FTCC

Tony Rand Center

2201 Hull Rd.

Wednesday, April 13 8:30 a.m. – 3 p.m.

##### CARMIKE MARKETFAIR

1916 Skibo Rd., suite 300

Saturday, April 16, Noon – 5 p.m.

##### DRAGON'S LAIR

6243 Yadkin Rd.

Saturday, May 7, Noon – 3 p.m.

##### THRIVE HEALTH FAIR

Crown Expo Center

1960 Coliseum Dr.

Saturday, May 14, 11 a.m. – 3 p.m.

##### HIGHLAND PRESBYTERIAN CHURCH

111 Highland Avenue

Sunday, May 15, 9 a.m. – 1 p.m.

##### BLOOD DONOR CENTER HOURS:

**MONDAY – FRIDAY**

**9 A.M. – 5 P.M.**

**3RD SATURDAY**

**9 A.M. – 3 P.M.**

For more information, please  
call (910) 615-5433 or visit  
[www.savingliveslocally.org](http://www.savingliveslocally.org)

#### IN THE REGION

##### BEAVER DAM VOLUNTEER FIRE DEPT.

11042 N.C. Hwy. 210 South

Roseboro

Tuesday, May 3, 3:15 – 7:45 p.m.

##### MIDWAY MINISTRIES ASSOCIATION

Midway Elementary

15375 Spiveys Corner Hwy

Dunn

Saturday, May 7, 10 a.m. – 2 p.m.





## SUPPORT GROUPS

### Look Good, Feel Better

Meets the third Monday of each month, 9 to 11 a.m., at Cape Fear Valley Cancer Treatment & CyberKnife Center and Cape Fear Valley Cancer Center at Health Pavilion North. Licensed cosmetologists help women with cancer learn how to apply make-up and style wigs or scarves to compensate for changes that cancer treatment may cause. Registration is required.

To register, please call (910) 615-6791.

### Mended Hearts of Fayetteville

Meets the second Thursday of each month, 6 to 7:30 p.m., in the Cape Fear Valley Rehabilitation Center Auditorium, Room B. Patients with heart disease and heart failure, as well as their families, are invited to attend.

For more information, please call (910) 615-6580.

### Defibrillator Support Group

This support group meets quarterly, 6:30 to 8 p.m., in the Carolina Room of the Cape Fear Valley Education Center, 3418 Village Drive. Meetings for 2016 are Thursday, Jan. 14; Thursday, April 14; Thursday, July 14; and Thursday, Oct. 13.

For more information, please call (910) 615-8753.

### Scleroderma Support Group

Meets the third Saturday of each month, 10 a.m. to noon, in the Medical Arts Center, Room 106A, 101 Robeson St.

For more information, please call (910) 308-9792 or (910) 237-2390.

### Stroke Support Group

Meets the third Monday of each month, 3 to 4 p.m., in the Cape Fear Valley Rehabilitation Center Physical Therapy Gym.

For more information, please call Vicky Parker at (910) 615-6972.

### Spinal Cord Injury Support Group

Meets the first Monday of each month, 3 to 4 p.m., in the Cape Fear Valley Rehabilitation Center Patient Cafeteria.

For more information, please call (910) 615-4051 or (910) 615-6066.

### Alzheimer's Caregiver Support Group

Meets the third Tuesday of each month, 2 to 3 p.m., at Heritage Place, 325 North Cool Spring St.

For more information, please call Sam Hutchinson at (910) 615-1633.

### Arthritis Support Group

Meets the fourth Monday of each month, 7 to 8 p.m., in Cape Fear Valley Rehabilitation Center Auditorium, Room A. There will be no meetings in February, July or December.

For more information, please call Stacia Brittonat (910) 615-4078.

### Bereavement Support Group

Meets the first and third Thursdays of each month, noon to 2 p.m., at Cape Fear Valley Hospice and Palliative Care, Bordeaux Professional Center, Suite 203, 1830 Owen Dr.

For more information, please call (910) 609-6710.

### Fayetteville Brain Injury Support Group

Meets the second Tuesday of each month, at 6:30 p.m., in the Cape Fear Valley Rehabilitation Center Patient Dining Room.

For more information, please call Ellen Morales at (910) 486-1101.



8 HOSPITALS. 7,000 skilled PROFESSIONALS. more than 850 PHYSICIANS. with one FOCUS... OUR PATIENTS



**2015 LEAPFROG  
SAFETY SCORE**



Nationally Ranked for  
**PATIENT SAFETY: A\***  
No other hospital in the Cape Fear  
Region earned a grade of A for  
keeping patients safe from harm.

\*graded by The Leapfrog Group, a leading  
independent hospital watchdog group. A score of A  
is considered the Gold Standard for Patient Safety.

*When seeking a hospital to care for your family, choose one with quality that's verified by trusted outside sources. You won't find another health system from the triangle to the coast with the quality and scope of services offered at Cape Fear Valley. And you won't find one as committed to your family's health.*

