

# MAKING ROUNDS

WINTER 2023

## Comfortable in her own skin

Photographer Rachael  
Santillan is living her best  
life after bariatric and  
body-contouring surgery

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CAPE FEAR VALLEY  
HEALTH



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Making Rounds is the official magazine of Cape Fear Valley Health, a 1,000+ bed, 8-hospital regional health system, with more than 1 million inpatient and outpatient visits annually.

A private not-for-profit organization with 7,400 employees and 1,000 physicians on our medical staff, it includes Cape Fear Valley Medical Center, Highsmith-Rainey Specialty Hospital, Cape Fear Valley Rehabilitation Center, Behavioral Health Care, Bladen County Hospital, Hoke Hospital, Health Pavilion North, Health Pavilion Hoke and Harnett Health.

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## LETTER *from the* CEO

When the Association of Medical Colleges warned us that 31,000 more primary care physicians will be needed in the United States by the end of this decade – and North Carolina alone will need 1,800 – we knew Cape Fear Valley had to address this looming physician shortage. And when we learned that a quarter of our region's rural communities are lacking doctors in many critical specialties, we were spurred into action to create several plans to meet this need.

Last month, we saw one of those plans come to fruition when we hosted a grand opening gala for the Center for Medical Education and Neuroscience Institute. It was an evening of celebration for the new building, the learning and patient care that will take place inside, and the donors who made it a reality. It also marked the first return of the Gala since the COVID-19 pandemic paused the event.

Cape Fear Valley Health Foundation has been fundraising for this facility or its programs in one way or another since 2015. Since then, we also partnered with Campbell University's Jerry M. Wallace School of Osteopathic Medicine and launched our very first postgraduate residency program in 2017 with a mission to recruit and retain the many new doctors our growing and aging populations will need in the years ahead.

We have continued to grow the program, expanded to eight residency programs and two Fellowships at Cape Fear Valley's main campus. Paired with residencies at Harnett Health, now incorporated into the Cape Fear Valley Health system, and over 100 medical students from Campbell

University training alongside our faculty and residents – we now have 400 learners across the health system. Last year, we welcomed our first students from Drexel University College of Medicine for their student rotations.

Cape Fear Valley Health Foundation launched the Caring for the Future campaign to unite our community of supporters around the idea that, together, we can cultivate a new generation of physicians to transform the landscape of healthcare in southeastern North Carolina. This ambitious fundraising initiative allowed Cape Fear Valley Health to construct the Center for Medical Education and Neuroscience Institute – and build our capacity to serve more patients, address physician shortages and ensure that we can continue to provide exceptional care to all our patients, today and tomorrow.

If you couldn't make it to the Gala or the ribbon cutting that was held the next day, we hope that as you are reading this you will take a personal moment to also join us in celebrating the momentous achievement that over 500 employees, community members, elected officials, businesses and foundations throughout North Carolina have helped us accomplish: raising \$35 million to construct the Center for Medical Education and Neuroscience Institute. This facility, and the doctors that it is going to help create and draw to our area, will benefit our entire region. We thank each and every one of you for joining us as we care for the future of healthcare in our communities.

Mike Nagowski  
CEO, CAPE FEAR VALLEY HEALTH



# Specialized heart care ... without skipping a beat

Electrophysiology keeps  
heart in rhythm

*by Kim Hasty*

**Sirisha Reddy, MD, had already put in a long day's work as a cardiologist at Fayetteville Heart Center.** But as evening turned to night, Reddy nevertheless took the time to pull up a chair next to Brenda Melvin's bedside at Cape Fear Valley Medical Center and patiently answer questions.


"I thought to myself, 'I know she has to be tired,'" said Melvin, a resident of Elizabethtown who had come to Reddy in need of treatment for atrial fibrillation. Her atrial fibrillation, which is an irregular and often rapid heart rhythm, followed a transient ischemic attack,

commonly referred to as TIA. "She sat right down like she didn't have anything else to do but talk to me. She listened."

Though she was facing a daunting medical procedure – cardiac ablation – Melvin said the care she received at the center helped put her mind at ease. Dr. Reddy, who specializes in electrophysiology, performed the procedure in June.

"I think it's very important to take the time to explain the procedure," Dr. Reddy said. "It's also helpful, with the patient's consent, to involve someone other than the patient in the discussion."





In Melvin's case, she has strong support from family and friends. In fact, it was during a trip to Whiteville that Melvin's daughter Sabrina, who is a nurse, and sister Cynthia Locklear realized something was amiss. Melvin, who had experienced her first TIA a year earlier, was again showing signs of confusion. TIA is a temporary blockage of blood flow to the brain, and while it doesn't cause permanent damage, it is often a warning sign of a stroke.

"I had a knee replacement in March, and Brenda was driving me to physical therapy," Locklear said. "We made it back home, but our cousin immediately took her to the hospital."

From Bladen County, Melvin was transferred to Cape Fear Valley Heart & Vascular Center and to Dr. Reddy's care. After the cardiac ablation procedure, which involves using heat or cold energy to block irregular electrical signals and restore a typical heartbeat, Melvin was able to return to her normal active lifestyle. Dr. Reddy is pleased that Cape Fear Valley is able to offer such specialized cardiac care.

"Our hospital administration has been very supportive," she said. "The community needs to know they can get this kind of care and that they need not drive 100 miles from home to get it."

Though about 30 percent of people with atrial fibrillation don't experience symptoms, Dr. Reddy said early diagnosis is critical. In fact, Dr. Reddy said, the problem is sometimes discovered while a patient is being prepared for an important diagnostic or preventive procedure, such as a colonoscopy.

"That's one reason you have to have your regular medical checkups by your primary care physician," she said. "With early treatment, the success rate of ablation is close to 80 percent. Word needs to get out about the importance of early referral."

Ablation, however, is not always required to treat electrical problems in the heart. "The first step is usually medication," Dr. Reddy said. "It's not about one treatment. It's a process."

Certain factors increase the risk of atrial fibrillation, which can lead to stroke. The older a person is, for instance, the greater the risk of developing atrial

fibrillation. People with heart disease — such as heart valve problems, congenital heart disease, congestive heart failure, coronary artery disease or a history of heart attack or heart surgery — also have an increased risk. Other risk factors include high blood pressure, thyroid disease, drinking alcohol, obesity and family history.

Melvin, a graduate of Fayetteville State University and a retired mental health social worker, considers herself blessed that she was able to receive excellent care and treatment and that she can again enjoy spending time with family and friends, including her supportive fellow members of Baldwin Branch Missionary Baptist Church.

**"The community needs to know they can get this kind of care and that they need not drive 100 miles from home to get it."**

She and her sister, who lives right next door, were able to enjoy a big Thanksgiving together as well and Melvin also decorated her home for Christmas.

"I feel pretty good," Melvin said. "I used to stay active all the time, and I was always on the go, and now I can still go."

She recently went on a trip to Myrtle Beach, S.C., with several of her classmates from Bladen Central High School.

"We've always been a close class," she said. "We all have one ailment or another, but we're hanging in there."



# Back on her feet

## Finding relief with a hip replacement

*By Lia Tremblay*

**One sunny day last March, Susan Groveunder was doing some shopping when things suddenly went very wrong.**

“I was trying to put my mask on with a package in one hand and my purse in the other,” she said. “I was running my mouth and just didn’t see the curb. I hit it with my foot and completely faceplanted.”

The most immediate effects were a scratched pair of glasses and a swollen wrist. But when both of those had been taken care of, Groveunder noticed a different problem.

“I think I had a bad hip already,” she said, “but that fall really exacerbated the issue.”

Over the next few months, as a nagging discomfort grew in her left hip, she found simple tasks were gradually getting harder to do.

“It wasn’t that I couldn’t do anything,” she said, “it just was hard to do it, more painful to do it. Like tying my shoe, taking a shower, getting in the car ... I could do these things, but they hurt.”





She already knew exactly who to talk to about it: Bradley Broussard, MD, of Cape Fear Orthopedics & Sports Medicine. A board-certified orthopedic surgeon, Dr. Broussard specializes in treating injuries of the hip, knee and shoulder. He performs surgeries in the Joint Replacement Center at Hoke Hospital, which has been designated by the Joint Commission as a Center of Excellence.

“Dr. Broussard’s fabulous,” Groveunder said. “I’ve known him for 25 years, so he’s always been my ortho guy.”

After a thorough exam and a look at her X-rays, Dr. Broussard told her the pain was unlikely to improve without a hip replacement. She decided to put it off so she could attend a long-awaited family reunion first, but was eager to get it done when the time came.

“I trusted Dr. Broussard 100 percent,” she said. “I did not worry about it one bit.”

Dr. Broussard explained to her exactly how he would perform the surgery and told her what to expect during her recovery.

“He showed me where the incision would be,” she said. “I got to see what the apparatus looks like, how they were going to put it in. I really didn’t have any questions because he explained it so well.”

A week before the surgery, Groveunder arrived at Hoke Hospital for her pre-op appointment. After some lab tests and paperwork, she was given a tour.

“They showed me where I could look through the window, where the surgery would be,” she said. “Then I got to see where I would be recovering. The rooms are so nice, with a huge bathroom and a big window.”

On the day of her surgery, Groveunder arrived at the hospital bright and early.

“By noon or so, I was recovering in one of those big rooms I had seen on the tour,” she said. “They had me up and walking that day, just a couple of hours after the surgery. The physical therapist came in and had me walking up and down the hall with a walker.”

After a single night in the hospital, and another walk up and down the hallway, Groveunder was discharged to continue recovering at home.

“The first couple of days were rough,” she said. “I needed help with everything, and I was just moving so slowly.”

But as days passed, she felt a little stronger and moved with a little more ease. By the second week, she was shooing her helpful husband away.

“He would say, ‘OK, Miss Independent,’” she said, laughing. “But I’m just not used to having people do things for me, because I’m usually home by myself, and I can do it myself.”

As her husband resumed his own busy work schedule, he made sure she was set up for success before he left each day.

“He would put the pots and pans I needed up on the counter before he left,” she said, “and anything I needed from the fridge at a level where I could reach it. That way I didn’t have to do much bending while I healed up.”

Seven weeks after surgery, Groveunder is back at work as a client associate at Merrill Lynch. She said she is grateful for the nurses and physical therapists who helped to get her back on her feet.

**Seven weeks after surgery, Groveunder is back at work. She said she is grateful for the nurses and physical therapists who helped to get her back on her feet.**

“They got me where I am today,” she said, “especially in the beginning, just being able to move and get dressed and get to the bathroom.”

But, she said, as a patient, she couldn’t leave her recovery completely up to the professionals.

“You have to keep up with your physical therapy,” she said, “doing the exercises at home and everything. If you don’t, it’s just not going to be as successful.”

As Groveunder gets stronger and more mobile, she is excited about driving again. She’s looking forward to more family reunions, and she’s glad her hip replacement is making it possible to enjoy life without pain.

“I would recommend Dr. Broussard to anyone,” she said. “He did a beautiful job.”



**Bradley Broussard, MD**  
ORTHOPEDIC SURGEON



# Your hands can save lives

## Hands-Only CPR method is simple and easy

*By Ginny Capiot*

Nearly 90 percent of those who suffer a heart attack outside of the hospital die, according to the American Heart Association. Grim statistics, indeed. But when cardiopulmonary resuscitation (CPR) is performed right away, the victim's chances of survival can double or triple.

"When a person has a cardiac arrest, survival depends on immediately receiving CPR from someone nearby," said Ben Beason, Patient Care Manager at Cape Fear Valley Health Cardiac Services.

Beason is on a mission to make sure as many people as possible learn the lifesaving skill. He and his team offer lessons in hands-only CPR to the public, and it's a lot easier than most think.

"Everything you think you know about CPR, forget it," Beason says. "We don't want you to perform 15 chest compressions and then breathe into the victim's airway. It's really more simple than that."

All Beason asks you to remember are two important rules:

- 1. Call for help immediately.**
- 2. Press hard and fast in the center of the chest.**

Can it really be that easy?

The short answer is yes.

"It's not like in the movies," Beason explains. "You can't 'bring back' a heart attack victim with CPR. It takes medication or electrical shock to bring someone back."

Instead, what is important is to keep the body alive by starting chest compressions as quickly as possible.

Push hard and fast in the center of the chest. Aim for about 100 to 120 beats per minute. It can help to hum along to a familiar song that fits the beat. As examples, the American Heart Association recommends "Stayin' Alive" by the Bee Gees, "Crazy in Love" by Beyoncé featuring Jay-Z, "Hips Don't Lie," by Shakira or "Walk the Line," by Johnny Cash.

Beason says that when someone falls, the first 10 minutes are the most important. That's when you should call 911 and find an automated external defibrillator, or AED, if there is one nearby.

"For every minute that passes, there is a 10 percent less likely chance to bring them back intact," Beason said.

This is why it is more important to carry on with chest compressions than to stop and breathe into the victim's airway.

Keeping the blood pumping throughout the victim's body will keep oxygen circulating and greatly lessen their chances of permanent damage to the heart or brain. Keep the chest compressions going until help arrives.

To see a 90-second video on Hands-Only CPR, visit [heart.org/handsonlycpr](https://heart.org/handsonlycpr). To get an in-person lesson, call Beason and his team of lifesavers. They will talk to any size group, and the lessons are free unless you are seeking American Heart Association certification (then there is a small cost due to supplies and education requirements).

"We're here for the community," Beason says. "We support Hands-Only CPR training. Anyone who is interested in learning just needs to reach out to Cape Fear Valley Heart and Vascular Center. My staff and I will happily arrange a date, time and location to meet."

To schedule a lesson, call Ben Beason at (910) 615-8294.



HONOR *and*  
CELEBRATE  
*a doctor for*  
NATIONAL  
DOCTORS'  
DAY ~ 2023

THURSDAY, MARCH 30

On Thursday March 30, Cape Fear Valley Health will observe National Doctors' Day. National Doctors' Day is an incredible opportunity to show your appreciation for our frontline healthcare heroes caring for our community during the COVID-19 pandemic, as well as the compassionate care your physicians provide to you and your family year after year. Send your message along with your thoughtful gift to Cape Fear Valley Health Foundation today. Your message will be shared with your doctor(s). Your gift amount will remain confidential. You can also make an online contribution at [www.cfvfoundation.org/dr-day](http://www.cfvfoundation.org/dr-day).



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Learn hands-only CPR for **FREE**.

Call (910) 615-8294 to arrange for a free group lesson at your business, church or other organization.

# Here to help in Harnett

## Expanding Diabetes and Endocrine Care

By: Laurie D. Willis

### **Diabetes and nutrition were the top priority issues for Harnett County**

in the county's 2021 Community Health Needs Assessment. According to the Centers for Disease Control and Prevention, more than 1 million North Carolinians have diabetes, and more than an estimated 72,000 are diagnosed with it annually. An alarming one in three adults is prediabetic.

Those statistics are troubling to Dr. Adithya Kattamanchi, an endocrinologist who specializes in diabetes, endocrine issues and metabolism.

Fortunately for residents of Harnett County, where health department officials listed diabetes as the fifth leading cause of death in 2016, Kattamanchi practices in a new local clinic, Cape Fear Valley Diabetes & Endocrinology Center – Dunn.

The center, which opened mid-November, is located directly across the street from Betsy Johnson Hospital with hours from 7:30 a.m. to 4:30 p.m. Monday through Thursday, and from 7:30 a.m. to noon on Friday.

"Dr. Kattamanchi is set to be an immense asset for our community and the surrounding areas," said Julie Hurtack, Director of Physician Practices for Harnett Health's region of ambulatory outpatient practices.

"Harnett County has a population of over 133,500 and is growing rapidly. With that growth comes an even greater need for specialized care," Hurtack said. "We're focused on expanding much-needed health services in this area and committed to bringing exceptional quality and innovation to our hometowns."

"Our primary care practitioners are thrilled to have the expertise and partnership of an endocrinologist to increase our level of patient care and oversight," Hurtack continued.

"Through our partnership with Cape Fear Valley Health, we have begun to expand our access to specialists in this area."

Harnett County doesn't have many clinics specializing in endocrinology, and Kattamanchi and Hurtack hope the new clinic in Dunn will be attractive to patients who prefer local doctors.

"Our priority is to provide exceptional care and kindness to our patients through each step of their visit," Hurtack said.

Diabetes education is part of patient care at the new clinic. This is critically important because of the medical problems diabetes can cause, including cardiovascular disease, strokes, kidney failure, liver damage, retinopathy, neuropathy, amputations or the need for dialysis.

"We teach patients about diabetes technology, including glucose monitors and insulin pumps," Kattamanchi said. "Most patients have a lot of questions about the type of diabetes they have, different treatment options, and about the newer technologies and medications."

People with diabetes have either type 1, which prevents the body from producing enough insulin and is generally developed during childhood, or type 2, the most common form of diabetes that develops when people's bodies don't properly use insulin, a protein hormone secreted in the pancreas that controls the concentration of glucose, or sugar, in the blood.

Kattamanchi said he'll spend 45 minutes to an hour with patients during initial visits. After their follow-ups, patients whose diabetes is well controlled will likely be seen once every six months, while those requiring more care will likely come in every other month. There's no one-size-fits-all treatment for diabetes and endocrine disorders, so it's important to create an individualized plan of care for each patient.



Dr. Kattamanchi is excited for his new role and ready to help more people in the area manage their disease.



Kattamanchi is excited for his new role and ready to help more people in the area manage their disease. His desire to help runs in his family, especially from his late father, who was an endocrinologist who practiced medicine for 40 years in India. His mother, also in India, is a physician specializing in obstetrics and gynecology. His wife is an oncologist, and his brother is a nephrologist – both in the U.S.

“My father mainly dealt with diabetic patients, so that’s where my interest started,” Kattamanchi said. “But then I went into residency and my interest amplified when I was treating patients with endocrinology issues.”

Kattamanchi took a special interest in geriatrics, care of older adults, because he didn’t think that population received care on the same level of other patients. He followed up his residency with a fellowship in geriatrics before going into endocrinology. His fellowship training on this specific population of older adults sets him apart from other endocrinologists.

Kattamanchi completed his residency in internal medicine

at the State University of New York in Syracuse, followed by a fellowship in geriatrics at the University of Florida in Gainesville, and another fellowship in endocrinology, diabetes and metabolism at the University of Wisconsin in Madison.

Harnett Health President Cory Hess said Kattamanchi has a noticeable passion for his patients. Coupled with his medical expertise, it makes him the perfect physician to work at the new clinic, Hess said.

“Dr. Kattamanchi is a very compassionate and kind man,” Hess said. “His father was a physician with a practice focused on diabetes and endocrine disease, so he grew up around this patient population and is passionate about giving them a greatly improved quality of life.”

“Now that we can deliver high-quality care to this patient population right here in Harnett County, we’re confident we can make positive progress toward the reduction of these debilitating conditions,” said Hess.



# Lifestyle changes help manage PAD

Healthy living can help protect your legs, lower your heart attack and stroke risk.

**Peripheral arterial disease, or PAD, is the narrowing or blockage of the vessels that carry blood from the heart to the legs. PAD puts you at risk for serious health problems, including cardiovascular disease and even loss of limb. And the symptoms of PAD can limit your ability to walk without pain.**

However, whether you end up with these problems and whether they continue is, in part, up to you. Following your doctor's treatment plan and making some lifestyle changes can help keep the disease in check.

"In most cases PAD can be managed with lifestyle changes and medication," said Thomas Beadle, MD, a vascular surgeon with Cape Fear Valley Vascular Specialists.

That's a good thing, because treatment can be important for both life and limb. Since it's a marker for atherosclerosis elsewhere in the body, PAD brings with it an increased risk for heart attack and stroke.



And in many people, the decreased blood flow resulting from PAD causes leg symptoms such as cramping or fatigue that can affect walking ability and impair quality of life. These symptoms, called intermittent claudication, usually occur while walking or climbing stairs but typically stop when you rest.

Severe blood-flow problems may lead to a burning or aching pain in the feet and toes while resting and, in extreme cases, put the leg at risk for amputation.

Fortunately, making some healthy changes can help you control PAD and reduce your risk for heart attack and stroke:

**If you smoke, quit now.** “Smoking is a major risk factor for PAD,” Dr. Beadle says. “When you already have PAD, quitting smoking helps slow the progression of the disease and reduces your risk for heart trouble.”

**Choose a healthy diet.** To help keep PAD from getting worse (and to help lower your risk for heart attack and stroke), eat less saturated and trans fats, the American Heart Association (AHA) recommends.

**Exercise.** Regular exercise is often an effective treatment for PAD, according to the AHA.

Exercise can:

- Improve walking distance if you have intermittent claudication. Research suggests that supervised exercise plans can double or triple the distance people with PAD can walk without discomfort.
- Decrease your risk for heart attack and stroke. Exercise helps with weight management and blood pressure control and improves cholesterol and overall heart and blood vessel condition.

An exercise plan for someone who has PAD might involve walking on a treadmill or a track for 50 minutes at least three times a week. Exercise programs for people with PAD take leg pain into account, alternating periods of exercise and rest to build up the amount of time you can walk before pain starts.

Your doctor can help you plan an exercise program that will work with your PAD symptoms.

**Work with your doctor.** Sometimes lifestyle changes aren't enough. Your doctor may recommend medicines to control conditions such as high cholesterol and high blood pressure.

“There are treatments for PAD,” Dr. Beadle says. “We can recommend aspirin, or antiplatelet medicines. Sometimes surgery is required to bypass blocked arteries.”

If you have symptoms of PAD, your physician may do imaging tests or some noninvasive tests to measure your blood pressure at rest and after exercise. If you have been diagnosed with PAD recently or in the past, treatment is nearby. [Call Cape Fear Valley Vascular Specialists at \(910\) 822-6587.](tel:(910)822-6587)



## CAPE FEAR VALLEY VASCULAR SPECIALISTS

Cape Fear Valley Vascular Specialists is a team of highly specialized vascular healthcare professionals and support staff committed to providing state-of-the-art vascular medical care, minimally invasive treatment options, and ongoing follow-up as needed for all vascular medical and surgical issues.

1251 Oliver Street, Fayetteville, NC  
(910) 822-6587





# *Celebrating the opening of the* **Center for Medical Education and Neuroscience Institute**

Back-to-back Gala and ribbon cutting events held in January





By: Roxana Ross

## The health system celebrated the opening of the new Center for Medical Education and Neuroscience Institute

last month with two major events that invited the community into the latest addition to Cape Fear Valley Medical Center. On the evening of Jan. 12, Cape Fear Valley Health Foundation's gala welcomed over 500 to enjoy a night of recognition and revelry in the Center's auditorium, along with food, music, dancing and tours of the facility. The private event included donors and grant funders, community members, physicians and other staff who lead the residency program, and medical residents who eagerly anticipate using the new space in their training. The next morning, the health system held the building's ribbon cutting and threw open the doors again to welcome a crowd of about 300 people, including many staff members and local officials.

The Grand Opening Gala was the capstone event to four years of fundraising for the Caring for the Future campaign. It was also the first Gala in three years since the pandemic began. This year's Gala was presented by Olde Fayetteville Insurance and Financial Services, and many other generous sponsors, and Vice President of Foundation Sabrina Brooks expressed the health system's grateful thanks for their support of exceptional local healthcare.

"It is fitting we were able to resume the annual Foundation Gala with a celebration of the successful Caring for the Future campaign and the opening of the Center for Medical Education and Neuroscience Institute," said Vice President of the Foundation Sabrina Brooks. "This evening was the culmination of over 15 years of visionary ideas and conversations which lead to the idea we could cultivate a new generation of physicians for this region, while also enriching our communities with the services we need, and the care we deserve. We toasted those who were instrumental in creating and building the space, those who are guiding these new doctors in their training, the residents who chose Cape Fear Valley Health for their training, those who seek care for their neurological ailments and find skilled and caring providers, and the philanthropists who made it all a reality."

The Cape Fear Valley Health Foundation raised \$7.85 million in funding for the construction with its Caring for the Future Campaign, which was the most ambitious fundraising effort undertaken by the foundation in its 26-year history. Funds raised will also provide ongoing support for the residency program and its continued growth, as well as the educational



CEO Michael Nagowski shows off Ellison Auditorium, part of the Center for Medical Education and Neuroscience Institute, during one of the tours held after the ribbon cutting on Jan. 13.

activities and patient care that will take place within the new facility. In addition to the generosity of these donors and their philanthropic gifts, supplemental funding was provided by the State of North Carolina and educational partner Campbell University to complete the \$33 million building project.

During the three-year campaign, more than 500 donors throughout North Carolina and beyond contributed to the project. Other major donors include Cape Fear Valley Health Foundation and its Board of Directors; the Duke Endowment; the Thomas R. and Elizabeth E. McLean Foundation; the Cape Fear Valley Volunteer Auxiliary; Ann and Tony Cimaglia; Charlene and Jay Wyatt; the Armstrong, Riddle and Williams Family; the Golden LEAF Foundation; Anonymous Trust; the Cape Fear Valley Health Executive and Vice President Leaders; Dr. Wes Jones and Mrs. Lucy Turk Hollis Jones; the Kate B. Reynolds Charitable Trust; Dr. David A. and Jenna Abbes Schutzer; and Systel Business Equipment.

Thanks to the gifts of the Cimaglias and the Wyatts, the Neuroscience Institute is now named the "Ann and Tony Cimaglia and Dorothy Bankhead Wyatt Neuroscience Institute." Both couples are long supporters of Cape Fear Valley Health and have personal experiences that led them to focus their support on this area, which addresses a growing need for neurological services in the area. The Wyatts' name choice is in honor of Jay's mother, who was diagnosed with Alzheimer's disease in 2013.



“I am excited that this will be a place to provide not only continuity of care for the loved one with the diagnosis, but also desperately needed resources for the entire family,” Charlene Wyatt said.

Across the country, providers struggle to recruit and hire neurologists. As the baby boomer generation ages, more neurologists and neurosurgeons are approaching retirement, while at the same time, the incidence of neurological needs continues to rise. Estimates show that demand for neurologists in 2025 will exceed supply by 19 percent.



“Facilities matter,” said Michael Nagowski, CEO of Cape Fear Valley Health. “Our beautiful, state-of-the-art Neuroscience Institute will help us to attract top-notch neurologists and neurosurgeons from around the country to come and be a part of Cape Fear Valley Health.”

The need for more doctors in southeastern North Carolina was one of the driving factors behind the rest of the new facility and the growing residency programs that it now houses.

**The new facility “really elevates healthcare. The programs and facilities within it will bring Fayetteville into a new age.”**

– Ijeoma Ejeh, MD



“In this facility, Cape Fear Valley Health is going to cultivate a new generation of physicians to transform the landscape of healthcare in southeastern North Carolina,” Nagowski said. “Our country is facing a serious physician shortage, with a quarter of our region’s rural communities lacking doctors in many critical specialties. The Center for Medical Education and Neuroscience Institute will build our capacity to serve more patients, address physician shortages, and ensure that we can continue to provide exceptional care to all our patients.”

Studies show that 50 percent of physicians typically go into practice within 50 miles of the location where they complete their residency, a figure that was mirrored in the first graduating class of residents at Cape Fear Valley last year. Studies also show that





See more photos of the event on page 26

health outcomes are higher in the areas surrounding a teaching hospital. As well as improving local health outcomes, the growing residency program is expected to add more than 900 new jobs and generate nearly \$580 million in economic impact in the region over the next ten years.

“People have asked me repeatedly about this facility, and about the physician residencies and it really boils down to three areas,” Nagowski said. “First and foremost, the workforce shortage among doctors, nationally, but very specifically in southeastern North Carolina. This program is specifically designed to help resolve that situation.” Nagowski said the other two important components of the residency program are the impact it will have on improved health outcomes and its value as an economic generator.

Ijeoma Ejeh, MD, a bariatric surgeon and faculty member in the residency program, said she was looking forward to what the Center for Medical Education represents for the community.

“It really elevates healthcare,” Dr. Ejeh said. “The programs and facilities within it will bring Fayetteville into a new age, and the building itself really presents a good face to the community.”

Cape Fear Valley, in partnership with Campbell University’s Jerry M. Wallace School of Osteopathic Medicine, launched its first post-graduate residency program in 2017 with a mission to recruit and retain new doctors who would continue to practice in this region. Since then, the program has grown to include seven more residency programs and two fellowships at Cape Fear Valley Medical Center. There are now 274 residents currently in the health system, as well as 130 medical students. The new facility will house these residency programs and more as the programs continue to grow.

Dr. Brian Kessler is Dean and Chief Academic Officer of the Jerry M. Wallace School of Osteopathic Medicine at Campbell University and among those who spoke at the ribbon cutting.

“I really am happy that we have the opportunity to be here today; this is just a special event,” Kessler said. “All of us from Buies Creek really think this is a great thing that’s happening here in Fayetteville. We could not be more proud of this new state-of-the-art Center for Medical Education and Neuroscience Institution. And I’m proud that Campbell University and the state of North Carolina are the largest benefactors of this world-class facility. It’s here that the next generation of well-trained physicians and specialists will be able to serve this area, Cumberland County and throughout the surrounding region.”

The new five-story, 120,000-square-foot building is located on the campus of Cape Fear Valley Medical Center, at the corner of Owen Drive and Melrose Road. Highlights of the facility include an auditorium with seating for 500; a food court; faculty offices and classrooms; a state-of-the-art Simulation Center to provide medical residents hands-on training in surgery, emergency/trauma treatment, labor and delivery, and intensive care; and the new home of the Ann & Tony Cimaglia and Dorothy Bankhead Wyatt Neuroscience Institute, which includes physician offices, exam rooms, nurses’ stations and patient waiting area. This Neuroscience Institute, which is located on the fifth floor, will be utilized for both Neurology and Neurosurgery physicians to provide care.

# Practicing her dream

**Physician Assistant Briana Graham is honored to treat the community in Bladen County**

*By Jami McLaughlin*

**Since she was a small child, Briana Graham wanted to be a doctor.** She wanted to help people.

As the lead Physician Assistant at Bladen ExpressCare, Graham is able to fulfill her childhood dream of helping care for people, and in her hometown.

“I always wanted to be a doctor when I was growing up, and I am thankful for the opportunity to work in Bladen County where I am able to help care for others where I grew up,” said Graham.

She said her career started when she began working at the hospital, thinking she might go into pediatrics.

“I knew I wanted to help people and, for a long time, felt that I was going to be a pediatrician. I had the privilege of working with some local doctors and physician assistants. Ultimately, I ended up falling in love with the physician assistant profession,” said Graham.

Graham graduated from the Methodist University Physician Assistant Program in 2007, after receiving her undergraduate degree from Campbell University. She has worked with Bladen County Hospital since 2011, working in the Emergency Department and ExpressCare setting.

Her day starts at 8 a.m. with a full round of walk-in patients and a variety of illnesses.





"I like not knowing what the day will bring, since we are a walk-in clinic where each day is different and filled with different challenges. We never know what we will see. It helps keep the job exciting," she said.

Currently working three days a week with 12-hour shifts, Graham said one of the most important parts of her job is allowing patients to have quick access to medical care.

While patients do have options for medical care outside of their primary physicians, Graham said there are differences when it comes to ExpressCare, Urgent Care and the Emergency Department.

According to Graham, ExpressCare and Urgent Care are very similar.

"We both see minor illnesses and injuries and are able to help patients be seen when their primary doctors may not be able to see them as quickly as needed. We see colds and flu-like symptoms, minor cuts and sprains, urinary tract infections, sore throats and other non-life-threatening illnesses," said Graham.

She said although both can serve the patient population on a walk-in basis without making an appointment, the major difference is the ExpressCare visit more closely aligns with the cost of seeing a patient's primary care provider.

For more immediate, larger needs, the Emergency Department is where patients should go.

"The emergency room is a place to go when patients are concerned about a more acute or life-threatening condition such as chest pain, severe abdominal pain, or major injuries like cuts or broken bones," said Graham.

Graham said most of the patients who come into the ExpressCare clinic have issues that they are equipped to handle, but sometimes patients come in needing a higher level of care.

"Anyone needing care that we are not able to provide is directed to the appropriate place to get the care they need," said Graham.

Outside of work, Graham lives in Elizabethtown with her family, husband Chris Carroll and their children Breelyn and Bryson, where they like to spend time with their family and friends. A volunteer coach for her daughter's softball team, she and her family also love traveling and time on the water at White Lake during the summer.

"We make memories with the family anytime we get the chance. I'm thankful for my family and friends and the

influences they have on my life and my children's lives. It truly takes a village," said Graham.

It is that love of connection that keeps Graham going, treasuring her stories and memories along the way.

One of the most memorable stories in her 15 years as a physician assistant came from a patient visiting her a second time after Graham had helped get her the care she needed for a cancer diagnosis and treatment.

"She came to see me for a quick non-emergent medical complaint and reminded me that I had seen her previously and had gotten her the care that she needed for a suspected cancer diagnosis," said Graham.

Graham said she was reminded of how important the work at ExpressCare is while listening to the patient share that she had quickly received the cancer treatment she needed and was now doing well.

"It reminded me that we make a difference in patients' lives. Every patient matters, whether it's the first time we've seen them or the twenty-first time," said Graham.

Graham credits the many medical providers who have influenced her in her career path and continue to do so as well as her family, including her parents Jimmy and Brenda Graham.

"My parents have always encouraged me to be the best that I can be and go after my dreams from a young age. I wouldn't be where I am if it hadn't been for them. And of course, my husband, who is a huge supporter and help in making sure I'm continuing to grow and pursue any doors that open for me," said Graham.

Her favorite song is "Goodness of God" by CeCe Winans.

"Working in the medical field, we see a lot of terrible things happening. This song is a reminder that, even though there are a lot of bad things happening in this world, God is still good, and He is still in control. We may not always understand why bad things happen, but being strong in my faith helps me get through the difficult days in healthcare and in life in general," said Graham.

With her faith, a positive attitude and a tune to hum, Graham is practicing her medical dream.

Bladen ExpressCare is open seven days a week from 8 a.m. to 7 p.m. for minor illnesses and injuries. It is available for walk-in appointments. Staff can also help patients get follow-up appointments with their primary care provider.



# Calling out colonoscopies

## Knowing what to expect can take the fear out of screenings

*By Roxana Ross*

Instead of avoiding your colonoscopy because it sounds like a pain in the you-know-what, let's get to the bottom of this common procedure that not only screens for but also can actually prevent colon cancer. Colonoscopies are almost always done on an outpatient basis, along with a sedative that relaxes the patient and leaves them with no memory of the procedure.

The actual procedure only takes about 30 minutes, followed by a little longer in recovery while the sedative wears off. If all is well, you shouldn't need another screening for 10 years, unlike stool-based tests, which are only good for three years and cannot prevent colon cancer in the same way a colonoscopy can. Because of the sedative, you should plan to have someone to drive you home afterward.

You can also forget those stories you've heard, or maybe remember, about drinking a gallon of horrible-tasting prep mixture the night before. Today's preps are more palatable and require much smaller volumes, along with your favorite clear liquids the day before. You may also be asked to stop taking blood-thinning medicines (including aspirin) or some other medicines for several days before the test.

During the colonoscopy, your doctor uses a thin, flexible tube with a very small light and camera at the end to look at the inside of the colon and rectum. Special instruments can be passed through the colonoscope to biopsy or remove any suspicious-looking areas such as polyps, if needed, which

is why this type of screening can also be a preventative measure for some types of colorectal cancers. If left alone, polyps can turn into cancer down the road, but removing them during the screening prevents that from happening.

If your biggest fear is what comes after the colonoscopy – what the doctor finds – then there's good news for you, too. Even though colon cancer is the second-leading cause of cancer deaths in the United States for men and women combined, colonoscopies significantly increase the odds that these types of cancer can be identified early, when the cancer is often very curable. Improvements in treatment and increased screening have been steadily shrinking the death rate for colorectal cancer when it's caught early, and the five-year survival rate for people with localized stage colorectal cancer is now about 91 percent, according to the American Cancer Society.

Unfortunately, only about 37 percent of patients are diagnosed at this early stage. Another good piece of news, however, is that colon cancer typically progresses very slowly compared to other cancers, which is why a clean screening is good for a decade without other symptoms or issues.

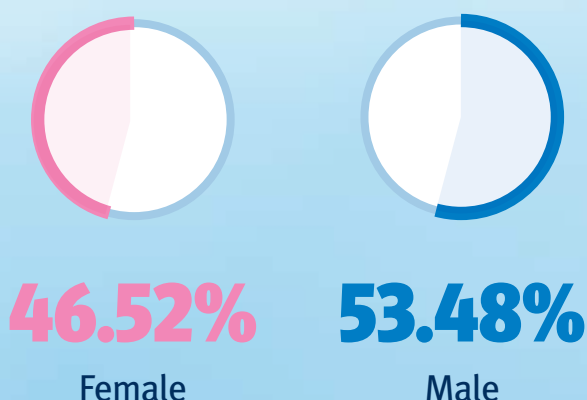
If you have been sitting out on getting your regular colonoscopy, or are over 45 and haven't scheduled one yet, you should consider talking to your doctor about scheduling one soon.



# 439

**Total number of people** diagnosed and/or treated for colorectal cancer in our health system from 2018-2021

## Breakdown by Sex



## Breakdown by Race

### CAPE FEAR VALLEY

White	61%
Black	31%
Native American	3%
Asian	2%
Other	3%

### NATIONAL RATE [from 2012-2016]

White	38.6	per 100,000 people
Black	45.7	per 100,000 people
Native American	43.3	per 100,000 people
Asian	30	per 100,000 people
Hispanic	34.1	per 100,000 people



Excluding skin cancers, colorectal cancer is the **third most common** cancer diagnosed in the United States.

The American Cancer Society estimated **106,970 new cases of colon cancer** and **46,050 new cases of rectal cancer** in the United States in 2023.

## National lifetime risk of colorectal cancer

**1 in 23** for men (4.3%) **1 in 26** for women (4.0%)

## Breakdown by Age

AGE	PERCENTAGE	CASES
20-29	0.22%	1
30-39	3.15%	14
40-49	6.74%	30
50-59	24.04%	107
60-69	25.17%	112
70-79	26.07%	116
80-89	12.13%	54
≥ 90	2.47%	11

Local statistics reflect patients diagnosed and/or treated at Cape Fear Valley Health and Harnett Health cancer centers from 2018 to 2021.

National and state statistics are from the American Cancer Society.



By Jami McLaughlin

# Comfortable in her own skin

Photographer Rachael Santillan is living her best life after bariatric and body-contouring surgery



**When Rachael Santillan, 45, made the decision to have weight loss surgery five years ago,** it was a matter of her health and not being able to perform at her job like she envisioned when she had first become a photographer.

“My decision was made when I was on top of a mountain in Africa, huffing and puffing. I had struggled to get there, and as a photographer I had to lose the weight. I promised myself when I got back home that I would do it,” said Santillan.

She had gastric sleeve surgery in 2017, taking her from 255 pounds to 160. Her weight loss was invigorating, but she soon developed a secondary issue with leftover excess skin.

“When you lose weight rapidly, you have loose skin. No matter how much you exercise, it will not go back,” said Santillan.

Santillan said after having two children and being overweight for 20 years, the extra skin was already an issue. However, the weight loss, mostly in her stomach area, produced excess skin that prohibited her from wearing the clothes she wanted. The clothes that she had looked forward to wearing after the weight came off.

“The waistband of my pants was really uncomfortable,” said Santillan.

All of the progress she had made to be at a lesser weight seemed to stall when it came to shopping and finding clothes to fit.

“I felt so good to be thinner, but I still couldn’t wear the clothes that I had looked forward to wearing after the weight came off,” said Santillan.

She started researching options for skin removal and plastic surgery when she found the Cape Fear Valley Plastic Surgery office.

“He had just opened his practice, and I think I was one of his first clients,” said Santillan.

Dr. Leif Nordberg, 54, arrived in Fayetteville two and a half years ago from Connecticut.

“We started with breast cancer reconstruction before setting up the practice for body contouring from weight loss,” said Nordberg.



Santillan said she considered a lot of possibilities while looking at “before” and “after” photos.

“It’s a little funny, but I really looked at belly buttons. If someone can’t aesthetically put a belly button on, what else can’t they do?” mused Santillan.

She said she also was concerned with rare side effects such as skin necrosis, which is a complication where the skin dies, creating a hole, or even surgeons leaving suture marks.

A trend in plastic surgery is going to another country to have procedures, but Santillan said she quickly ruled that option out.

“I love the fact that he’s right here. He’s local. He’s a phone call or a visit away,” said Santillan.

Nordberg said that he has seen dangerous results with patients who have visited him after bad experiences.

“We see a lot of complications and disasters from patients going out of the country. It’s really frightening,” said Nordberg.

“It’s key that your surgeon is nearby to check on you. We follow our patients and take care of them afterward. It’s critical to a successful outcome.”

That was reassuring to Santillan, who had five pounds of skin removed in early 2021. And for Santillan, it changed her world. In her professional career, she has been able to do things that she wanted to do all along before the weight crept on.

“I feel like in my job, I’m much more confident. I can do anything that my job requires,” said Santillan. “It just feels really good. All my previous joint pain is gone.”

The skin removal and body contouring also have given her the confidence to step out of her former comfort zone to wear new bathing suits and try new hairstyles.

“I wore a two-piece this summer to the beach, which I never thought would be possible. This year, my tummy was showing. It saw the light of day. It’s nice,” said Santillan.

She also said that she is growing her hair out for the first time in years.

“When I was bigger, I had a signature bob, but I can have long hair now. The bob just looked better with my round face, and now I’m trying something new,” said Santillan.

Nordberg said that Santillan’s results are exactly what he hopes for with each of his patients.

“With the weight loss, patients feel healthier, look great, come off

various medicines and take steps forward. We are the last leg in their journey,” said Nordberg.

He said he averages 20 to 40 new patients a month for procedures including skin removal. He said that one of their most common surgeries is abdominal contouring along with excess skin removal and a tummy tuck.

“But everyone is a bit different. Everything is a la carte style, tailored to your body,” said Nordberg.

Nordberg said that one of the first steps is a direct consultation with his office to determine a course of action.

“We get to understand the patient’s desires and wants. We can look at the body with 360-degree improvements in mind including addressing rolls on the back, which we call bra fat, or even the flank right above the butt. We’ve had really great results with mommy makeovers, which usually include a breast lift, taking in at the waist with a tummy tuck,” said Nordberg.

Nordberg also talks about recovery in the consultation, which he says is vital to discuss upfront.

“There is a lot of education, which is important for a good outcome,” said Nordberg.

Afterward, he offers a recommendation, and the patient undergoes medical evaluation testing to make sure they are healthy enough for the surgery.

“Once our patients have had their pre-op visit and everything comes back satisfactory, we plan a date for surgery. Then there is an aftercare and recovery stage,” said Nordberg.

Nordberg said he has a handpicked staff, who develop relationships with patients for the greatest outcomes and are available to answer any questions during the post-op stage.

“Our staff truly cheerlead for the best result. It’s a team effort and important for our office to be available. Our patients know they can get a callback or be seen. The greatest benefit for patients is that the team is local,” said Nordberg.

Santillan agreed. “They have the most attentive staff.”

And for Santillan, the careful attention from beginning to end from the local office was exactly what she was looking for along with the result of a healthy, fit body.

“I just feel so much more comfortable in my skin and so much more healthy,” said Santillan, “because that’s what it really was about for me.”

# Create Peace of Mind and leave a legacy

FreeWill is a free tool to plan for the future

*By Roxana Ross*

**Multiple surveys in recent years show that more than half of Americans do not have a will or estate plan**, even though making a will is a simple step that can save families heartache, stress and money. In order to help meet our community's need for this service, Cape Fear Valley Health Foundation has partnered with FreeWill, a free online tool for making legal wills.

Though you do not have to include charitable contributions in your will to use FreeWill, you can choose to create a legacy gift when making your estate plan. Cape Fear Valley Health Foundation hopes anyone who hears about this tool through their campaign will also consider adding a donation to the Foundation in their will. Future gifts can even be directed to support a specific area of patient care at Cape Fear Valley Health.

"Many people find it comforting to know that they can make a contribution to causes they care about as part of their final wishes," said Cape Fear Valley Health Foundation Vice President Sabrina Brooks. "Last year, our community helped the Foundation support Cape Fear Valley Health as it provided exceptional healthcare to more than 1 million patients. We are grateful for that support and are excited to support our community in turn with this free and easy-to-use resource."

Alison Green, of Fayetteville, used FreeWill last year to make her will, as well as leave a legacy for the Cape Fear Valley Cancer Center. When Green quit her job to launch her own accounting and taxation business in 2017, she never expected to be diagnosed with breast cancer just three months later. Thankfully, with the care she received at Cape Fear Valley's Cancer Center, she was able to beat cancer and still have a successful first year in business.

"The staff were all so caring and sensitive at what was a very tough time in my life. There is such a community of caring at the Cancer Center, with everyone supporting one another to make patients' experiences better."

In the years since her recovery, Alison has also given back to the Cancer Center by supporting the Ribbon Walk. When the Foundation launched our partnership with FreeWill last summer, Alison and her husband, Andrew, were among the first to take advantage of the free resource and leave a legacy for cancer care at Cape Fear Valley.



Alison Green

"Too many people are bankrupted by a cancer diagnosis and have nowhere to turn," she said. "Cape Fear Valley Health Foundation helps alleviate Cancer Center patients' financial burdens at the worst time of their lives. I hope my future donation will be used to continue these important programs and help celebrate survivors in our community."

Ezan Harding, a Nursing Supervisor at Cape Fear Valley Medical Center, also took advantage of the FreeWill tool and remembered the Cape Fear Valley Foundation in his will.

"My motivation to include the Foundation in my will largely stems from the fact that Cape Fear Valley is an integral part of my community; it is where I take my friends and family," Harding said. "Everything that Cape Fear Valley does is for the service of the surrounding community. The Foundation represents an opportunity to help those with the most critical needs locally."

Harding said he believes that it is important to support the community, and that Cape Fear Valley Health is an excellent mechanism for that. So making sure he can continue to support his community through his will makes sense.

"Working in the Emergency Department and as part of Behavioral Health, I have the opportunity to positively impact my community every day," Harding said. "I have dedicated half a decade to supporting the mission of Cape Fear Valley and hope to provide many more; I want to do whatever I can to ensure that the mission outlives me."



We thank you for thinking of Cape Fear Valley in your will. To learn more, scan this QR code, visit [www.freewill.com/capefearvalleyhealthfoundation](http://www.freewill.com/capefearvalleyhealthfoundation) or contact [foundation@capefearvalley.com](mailto:foundation@capefearvalley.com) or (910) 615-1285.



# Donate life

Organ donation can transform  
tragedy into lifesaving gifts



By Roxana Ross

**In North Carolina alone there are more than 3,400 people whose names are on the waiting list for organ transplants.** Most – about 3,200 people – are in need of kidney transplants, but the list of needed transplant organs includes the liver, pancreas, heart, lungs, intestines and more. In this region of North Carolina, the organization that carefully facilitates the crucial hours between when an organ donor passes and when their organs can give another person a new chance at life is HonorBridge.

“Our donor families want something positive to come from something so tragic,” said Latoya Joyner, Community Relations Coordinator for HonorBridge. “Up to eight lives can be saved through a single decision to become an organ donor. Additionally, an individual’s tissue donations can heal over 75 people.”

Unfortunately, the need for organ donation far outpaces the number of people who make this kindest choice for their or their loved one’s remains after death. An average of 17 people in the United States die each day while waiting for a transplant. In 2021, only 290 organ donors were recorded by HonorBridge. Even so, that number represented a record year for the number of lives healed and saved by organ and tissue donors.

“There is a massive need for organ donations in our state,” Joyner said. “Federal law requires organs to be directed to the people most in need, so the waitlists are processed by that priority. Many times, those individuals are in North Carolina, yet other times they are not.”

Drivers can choose to become organ donors every time they renew their driver’s license by saying “yes” when asked that very important question. People can also sign up at [HonorBridge.org](https://HonorBridge.org).

While organs are used to save lives by replacing diseased organs with healthy ones, tissue donation is slightly different. Tissues are gifts used to treat survivors of burns, heal diseases such as cancer or heart disease, restore sight and help people with athletic injuries heal, to name a few uses. The most commonly donated tissues include skin, bone, corneas, heart valves and veins.

“Every day, people die waiting for a lifesaving organ transplant,” Joyner said. “Many more are waiting for a life-enhancing procedure to heal from injuries or disease. Anyone can register to be an organ, eye, and tissue donor, but only 1 percent of people who die in a hospital will actually become organ donors. Far more donors will be eligible to donate tissue, potentially impacting over 75 people.”

Deciding to become an organ or tissue donor can be for compassionate reasons, as the National Donate Life Month campaign encourages every April, but donations can also be used in research, to advance medical and scientific breakthroughs.

“Scientific research is an important part of our recovery process, and the results have been outstanding and meaningful,” Joyner said. “Our research partnerships enabled many cells from donated lungs to be used in COVID-19 studies. We contributed to Duke University Transplant Center being the first in North America to transplant a heart donation after circulatory death, among other projects.”

On November 15, 2018, HonorBridge along with Duke Health celebrated a historic achievement, the first abdominal wall transplant in North Carolina, and honored a donor family and their son who gave the ultimate gift, the gift of life to a veteran in Fayetteville.



# CELEBRATING the opening of the Center for Medical Education and Neuroscience Institute

Story on page 14



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# What our patients are saying...

## Cape Fear Valley Blood Donor Center

It's like going to a spa but donating blood. Everyone is friendly and polite. The staff bring you drinks and snacks. You always leave with a gift. Donations go smooth and quick.

– Zach

## Cape Fear Valley – Harnett Surgical Associates

Dr. Abraham was wonderful!! I had a very bad experience somewhere else, so I was nervous to try Dr. Abraham, but he was so kind and professional. He took the time to really explain things and didn't rush, which I appreciated!!

I would definitely recommend him to any of my friends or family!!

– Autumn Sawvel

## Cape Fear Valley Sleep Center

The whole experience here was definitely worth a rating more than 5 stars!!! Been coming here for years and getting a sleep test saved my life!!! If you have problems with sleep or other issues give them a try. Stacey during the overnight sleep test was great!!! I saw Sheila Agustin-O'Callaghan to get all my results. She communicates well and Check-In Nurse Connie is friendly, professional and makes sure you have everything you need.

– Sandra Young

## Cape Fear Valley Medical Center

I had a heart attack. When I arrived at the hospital by ambulance there was a team of physicians waiting for me as I was wheeled in just like in the movies and then right into surgery. It impressed me so much that I was never scared. I just felt that I was being cared for by professionals. Good thing, because I was said to be in a bad way when I arrived.

– Kevin Williams

## Cape Fear Valley – Ferncreek General Surgery

Dr. Annamaneni and his staff were wonderful!

If I ever need surgery again, his office will be my first call.

– Patricia Garner

## Cape Fear Valley Medical Center

My special needs brother was sent to your ED from his nursing home in Rockingham. During our time there, several employees were simply amazing. His situation was complicated, and I am grateful for the thorough evaluation he received and the way my comments and concerns were heard. No one wants their loved one to be in the hospital, but if it happens, it means so much to have medical staff and support staff who genuinely care about their patients and want to find problems and offer REAL solutions.

– Joelle Rule Akridge

## Hope Mills Family Care

I love the care and concern that I received from Lisa Hutchinson at a time I really needed it. After moving to NC, I did my research for a good Family Care Practice and was glad I chose. Hope Mills Family Care. I know all my medical needs will be taken care of immediately.

– Judy Scannell

## Cape Fear Valley Primary Care – Lumberton

I just had my very first visit here today and the ladies up front are super friendly and the nurse was amazing and so nice. But the doctor was hands down the best doctor I have ever had! Dr. Figueroa is intentional, he is very personable, he pays attention, he listens so well and when he explains things, he makes sure to explain in a way you can understand!

– Christina Rogers

## Elizabeth Sawyer, MD

Dr. Sawyer is very personable as well as professional. She made a scary time more bearable with her compassion and genuine concern for my case. She didn't rush her time with me or make me feel dumb for any question I had. She came highly recommended to me from several people in the medical community and friends. I am so grateful for the care I received from the entire staff.

– Carolyn Bradley

Have you had a good experience with a Cape Fear Valley physician or facility? Leave us a review on Google!



## Symposium teaches advances in trauma care

More than 100 providers from the region attended the second annual Cape Fear Valley Health Sandhills Trauma Symposium in September. The symposium, which was held at Southeastern Regional Area Health Education Center (AHEC) in Fayetteville, examined updates in current clinical management and advances in the resuscitation and treatment of critically ill patient. The Trauma Symposium strengthened the system of care for trauma patients by engaging interdisciplinary providers and residents from receiving and referring hospitals throughout the Sandhills region.

The event's keynote address, "Lessons Learned from the Hamid Karzai International Airport, Afghanistan" was given by Colonel Kenneth J. Nelson, MD, of Womack Army Medical Center. Other presenters included Marsha Nelson, MD, MPH, FACS, Trauma Medical Director, Cape Fear Valley Medical Center; Robert Albrecht, MD, Vascular Surgeon, Cape Fear Valley Medical Center; Elizabeth Gignac, DO, Campbell University, UNC Health Southeastern; Scott Klenzak, MD, Psychiatry Residency Program Director, Cape Fear Valley Medical Center; Major John D. Ritchie, MD, Surgeon, Womack Army Medical Center; and Matt Wells, MD, Emergency Medicine, Cape Fear Valley Medical Center.

## Bladen County Hospital receives Emergency Rural Health Care Grant

Bladen County Hospital was recently named as a recipient of a \$282,700 grant from the U.S. Department of Agriculture. The grant, which was part of a \$110 million package of grants to improve healthcare facilities in rural towns across the country, was designated in the American Rescue Plan Act.

Bladen County Hospital will use the grant to purchase a Caterpillar 200-kilowatt (kW) diesel fueled generator, which will replace an older generator. The updated equipment capacity will be greater and provide back-up power in case of emergencies. The generator is necessary to keep the facility open for quality care for patients.

## Breast Cancer Symposium for providers scheduled for Feb. 24

There will be a Breast Cancer Symposium on Friday, Feb. 24, from 12:15 to 4:30 p.m. at Southern Regional AHEC. This regional forum will review advances in care and scientific updates for the prevention and clinical management for the breast cancer patient. This year the interdisciplinary Breast Cancer Symposium, in partnership with SRAHEC, will address the experience of the young breast cancer patient in diagnosis, treatment and survivorship. The sessions explore NC breast cancer disparities, high-risk screening and prevention, fertility conservation, breast cancer during pregnancy, and the voices of young survivors. Providers who would like to register for this symposium can find more information at <https://www.southernregionalahec.org/courses-and-events>.

## More than 75 children participate in 2022 Diabetes Games

Cape Fear Valley Health and Methodist University hosted the 2nd Diabetes Games in November at the Methodist University campus football fields. Westover Middle School's marching band opened the event and then local bikers escorted children carrying the torch, similar to the real Olympics. More than 75 children with diabetes, some from other states, including Florida, Virginia and Georgia, participated in this special event. Participants competed in the 25, 50, 75, 100-meter dash race, 1-mile run, archery, running and standing jumps, shot put, obstacle course and large hamster ball race. Athletes were recognized with 1st, 2nd, and 3rd place metals. Money raised from the event will be used for the Pediatric Diabetes Camp in Summer 2023 at Camp Rockfish. A special thank you goes out to all the volunteers who help make this event possible for diabetic children in this community and beyond!



## Cape Fear Valley Orthopedics & Sports Medicine – Opening Soon

In March, Cape Fear Valley Orthopedics & Sports Medicine will open at 1219 Walter Reed Road in Fayetteville. Benjamin Levine, MD, will be the orthopedic surgeon on-site. He specializes in hand, upper extremity and trauma orthopedics.

For information about the clinic or to schedule an appointment, email [cfvorthosportsmed@capefearvalley.com](mailto:cfvorthosportsmed@capefearvalley.com) or call (910) 609-5000.



PHYSICIAN NEWS

### CAPE FEAR VALLEY HEALTH : **PHYSICIAN** *briefs*

### **NEW** *physicians*

## Cape Fear Valley Neurosurgery and Neurology clinics have moved

The Cape Fear Valley Neurosurgery and Neurology clinics have moved from 1219 Walter Reed Road, Fayetteville to the fifth floor of the Center for Medical Education and Neuroscience Institute. The new building is located at the corner of Melrose Road and Owen Drive on the campus of Cape Fear Valley Medical Center in Fayetteville. The office's phone number, (910) 615-3350, is unchanged.

## Providers publish journal articles

**Peter Kalogerinis, DMSc, PA-C; John Poulos, MD,** and **Valentine Milanov, Ph.D.** recently co-authored an article entitled The Effects of Vitamin E, Silymarin and Carnitine on the Metabolic Abnormalities Associated with Nonalcoholic Liver disease in Journal of Dietary Supplements. Poulos and Kalogerinis also collaborated on a second article, along with Emanuel Poulos and Mackenzie Cole, Cutting the Fat in Nonalcoholic Fatty Liver Disease in Practical Gastroenterology.

## Carolina Rheumatology & Internal Medicine has moved

Carolina Rheumatology & Internal Medicine, PA has moved from its former location on John Smith Road to 2125 Valleygate Drive, Suite 201, Fayetteville.

## Endocrinology

**Adithya Kattamanchi, MD**

Cape Fear Valley Diabetes and Endocrine Center – Dunn

**Medical Degree:** Kasturba Medical College

**Residency:** SUNY Upstate Medical University

**Fellowships:** Endocrinology fellowship at University of Wisconsin, Geriatrics fellowship at University of Florida



## General Surgery

**Rachel Hall, DO**

Cape Fear Valley - Harnett Surgical Associates

**Medical School:** Campbell University

**Residency:** Cape Fear Valley Medical Center





## We need you to donate blood and **save lives locally!**

The Cape Fear Valley Blood Donor Center is the only community blood program dedicated to serving the needs of Cape Fear Valley Health patients in Cumberland, Hoke, Harnett and Bladen Counties through blood donation by individual donors, community organizations and businesses.

Cape Fear Valley Blood Donor Center offers local volunteers an opportunity to Save Lives Locally. Located at 3357 Village Drive in the Bordeaux Shopping

Center, the center is open for donations Monday through Friday from 9 a.m. to 5 p.m., and the third Saturday of each month from 9 a.m. to 3 p.m. There are also two blood mobiles out in the community for mobile blood drives. Find those blood drives by scanning the QR code.



### **CAPE FEAR VALLEY BLOOD DONOR CENTER**

For information about donating or hosting a blood drive, please call (910) 615-LIFE (5433) or visit [savingliveslocally.org](http://savingliveslocally.org).





# Clinical Trials Enrolling Patients in our Community

Carolina Institute for Clinical Research (CICR), a partnership between Cape Fear Valley Health and Wake Clinical Research, is currently accepting patients for several new clinical trials. To learn more about the trials or to apply, contact CICR at (910) 302-8151, visit [www.ci-cr.com](http://www.ci-cr.com) or simply scan the QR code.



## Protect yourself against COVID-19

Have you or someone you love been in contact with COVID-19? You may qualify for a paid research study. Learn about a COVID-19 research study at Carolina Institute for Clinical Research. Participants will be compensated for participating in this study. Scan the QR code to learn more.

## Protect yourself and loved ones against the flu

Getting vaccinated can help prevent flu spread and health complications. Carolina Institute for Clinical Research invites adults age 65+ to join a flu vaccine research study. Participants will be compensated for participating in this study. Scan the QR code to learn more.

## Do you or a loved one have diabetes?

Carolina Institute for Clinical Research is enrolling volunteers who are 25+ in a research study for Type 2 Diabetes. Participants will be compensated for participating in this study. Scan the QR code to learn more.

## Need birth control?

Carolina Institute for Clinical Research invites women 18+ to join a birth control research study. Participants will be compensated for participating in this study. Scan the QR code to learn more.

## Support Groups

### Alzheimer's Caregiver Support Group

Meets the third Tuesday of each month.  
2 – 3 p.m.  
Medical Arts Center 101  
Robeson Street, Suite 106,  
Fayetteville

For more information, contact  
Nancy Alderete-Davis at (910)  
615-1781.

### Alzheimer's Caregiver Support Group [second location]

Meets the first Wednesday of each month.  
2 – 3 p.m.  
Harmony of Hope Mills, 7051  
Rockfish Rd., Fayetteville

For more information, contact  
Nancy Alderete-Davis at (910)  
615-1781.

### Bariatric Support Group

Meets the third Thursday of each month.  
6 – 7 p.m.  
Cape Fear Valley Village Surgical,  
1841 Quiet Cove, Fayetteville

For more information, contact  
Debbie Wooten at [dwooten@capefearvalley.com](mailto:dwooten@capefearvalley.com).

### Better Breathers Support Group

Meets virtually the second Thursday of each month.  
For more information or the Zoom meeting link, contact Diane Schultz at (910) 615-7822.

### Dystonia Support Group

Meets virtually the second Tuesday of each month  
3 – 4:30 p.m.  
For more information,  
contact Crystal Edmonds at  
[cedystonia1920@gmail.com](mailto:cedystonia1920@gmail.com).

### Mended Hearts

Meets virtually the second Tuesday of each month.  
6 p.m.  
For more information or the Zoom meeting link, contact Bill Farr at [wfarr2@nc.rr.com](mailto:wfarr2@nc.rr.com).

### Parkinson's Disease Support Group of Fayetteville

Meets the second Saturday of each month.  
10 a.m.  
Kiwanis Recreation Center, 352  
Devers St., Fayetteville

For more information, contact  
Stephen Koetter at (910) 518-  
0045 or [pdsgfay@gmail.com](mailto:pdsgfay@gmail.com).

### Stroke Survivor Support Group

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

For more information, please call  
Vicky Parker at (910) 615-4344.



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