

CAPE FEAR VALLEY HEALTH *and* WELLNESS MAGAZINE

MAKING ROUNDS

SPRING 2014



CAPE FEAR VALLEY HEALTH

www.capefearvalley.com

If you have diabetes, you're not alone. More than 20 million Americans have it, and the number grows daily.

The consequences of untreated or poorly controlled diabetes are severe – heart attack, stroke, blindness, kidney damage, circulatory problems, nerve damage and limb amputation. You can reduce the severity of complications, however, with proper care and good self-management. Knowledge is the key.

Cape Fear Valley Diabetes & Endocrine Center offers a multi-disciplinary approach to treating the disease, including self-management education, certified diabetes educators, and a dedicated staff of Endocrinologists.

For more information, please call
(910) 615-1632.



**CAPE FEAR VALLEY
DIABETES & ENDOCRINE CENTER**

101 Robeson Street, Ste. 405
Fayetteville, NC



MAKING ROUNDSSM

THE OFFICIAL MAGAZINE OF CAPE FEAR VALLEY HEALTH SYSTEM

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CAPE FEAR VALLEY HEALTH



Cape Fear Valley has earned
The Joint Commission's Gold Seal of Approval[®]



LETTER *from the* CEO

Cape Fear Valley Health has more than a million patient visits each year. It's a big responsibility caring for residents of the Cape Fear region. And we don't take it lightly.

Our foremost concern is providing exceptional healthcare for all our patients. That's our mission and the reason Cape Fear Valley Medical Center, our flagship hospital, has sought and earned several disease-specific care certifications from The Joint Commission.

The Joint Commission is an independent, objective evaluator of quality. Disease specific certification demonstrates a program has earned the accrediting agency's Gold Seal of Approval.

Currently there are five programs at Cape Fear Valley that have earned Gold Seals of Approval:

1. Hip Replacement Surgery
[first certified in 2010, recertified in 2013]
2. Joint Replacement Surgery
[first certified in 2010, recertified in 2013]
3. Heart Failure [2012]
4. Stroke – Advanced Certification [March 2013]
5. Acute Myocardial Infarction [Dec. 2013]

Only three hospitals in the state have surpassed our record – Carolinas Medical Center in Charlotte, Novant's Forsyth Memorial Hospital and Wake Forest Baptist Medical Center, both in Winston-Salem.

At Cape Fear Valley, we're also working on enhancing the patient experience. To aid in patient healing, we have implemented the HUSH program. HUSH stands for Help Us Support Healing. Our HUSH hours are 9 p.m. to 5 a.m. We dim the lights on the unit, close as many doors as possible and reduce overhead paging. General visiting hours are over at 9 p.m. so patients may rest. Of course, patients may ask a family member or friend to remain with them overnight for support if desired.

You can read more about the changes we've implemented to enhance patient care by simply turning the page. I think you'll see that at Cape Fear Valley, we're living our mission statement each and every day.

Mike Nagowski
CEO, Cape Fear Valley Health

CHANGING

Cape Fear Valley is doing things differently to provide a





WAYS

a better patient experience



Most hospital patients and visitors have never heard the term “patient experience,” but it’s an extremely important concept in healthcare.

Patient experience is defined as the sum of all interactions while a patient is under care. That includes everything from patient comfort and interaction with physicians and staff, to how the patient perceives care was provided, both during and after their stay.

Hospitals that get it right benefit from better performance and higher quality scores while their patients feel better, faster. Studies show that a strong patient experience is linked to better health outcomes. Cape Fear Valley knows this and continuously strives to deliver a good experience for all patients.

The health system’s most recent efforts started a year ago with a new visitor management policy. It reduced the number of entry points at Cape Fear Valley’s main Owen Drive campus from more than 30 down to eight. The remaining entry points are staffed by security officers.

Casual observers may see the move as more procedural than clinical. But tightening campus security offers increased peace of mind to not only patients, but also staff and visitors.

“If your loved one was at home sick, you wouldn’t leave the door wide open and let people just walk right in,” said Richard Sanders, Director of Security and Police Services. “You’d want them to ring the doorbell.”

Visitors to Cape Fear Valley Medical Center and other hospitals within the health system must also wear identification badges now. The badges include a photo of the wearer and are printed on special paper that shows a warning sign after a few hours. If the visitor stays longer, he or she must renew their ID badge at an entry checkpoint.



A number of major medical systems also use security badges, with even more hospitals expected to follow. Sanders said local residents and visitors have given Cape Fear Valley's new system glowing reviews.

For the record, more than 1 million visitors passed through checkpoints at Cape Fear Valley's main campus last year.

BETTER COMMUNICATION

Another recent change at Cape Fear Valley is how change of shift is conducted on most patient units. Nurses ending their shift used to give patient reports to their replacements in conference rooms or outside the patient rooms. Reports are now completed at the bedside with the patient participating, if able. This change is designed to enhance communication and more clearly place the patient at the center of the care team.

"The most important person on the healthcare team is the patient," said Jana Stonestreet, Chief Nursing Officer. "The nurses are still reporting to each other, but they are also including the patient in the conversation, which enriches and strengthens the focus of the care team."

For example, patient pain levels almost never stay constant. Pain can dramatically increase or decrease over time. Reviewing a patient's pain level during the change-of-shift report helps the oncoming nurse better understand the patient's needs.

Nurses have also added patient safety checks, such as inspecting IV lines and dressings, during the bedside change-of-shift report. If something doesn't look right, the oncoming nurse can ask the departing nurse any questions before they leave. This helps eliminate uncertainty and enhances patient safety.



the most important person on the
healthcare team is the patient

HEALING ENVIRONMENT

Subtler steps to improve patient experience have also been taken. They include the *Help Us Support Healing* (HUSH) program. Between the hours of 9 p.m. and 5 a.m., Cape Fear Valley strives to minimize foot traffic and casual conversation in hallways. Routine patient visiting hours end at 9 p.m. to further minimize activity on the patient unit.

Other moves to create a more restful environment include turning off most lights at night, installing new acoustic tiles in some patient hallways, and enclosing noisier areas, such as telemetry stations. Good rest promotes a faster recovery.

One change that's still being tested is Cape Fear Valley's *Mobility Program*. It's designed to get patients sitting up in a chair or walking as soon as possible unless prohibited by the patient's physician.

For years, patients were often on bedrest during their entire stay, hoping for a faster recovery. Newer studies suggest just the opposite. In most cases, the sooner patients are up and about, the faster they heal.

The *Mobility Program* is especially beneficial for older, less-mobile patients who often arrive bed-ridden and can become even more so during their stay. Having older patients up and moving helps them build stamina and recover more quickly.

The program is expected to roll out system-wide by this summer. When this happens, it will be just one more way Cape Fear Valley Health improves the patient experience for everyone.



BREATHE DEEP

How pure oxygen has the power to heal

Most people never think twice about tying their shoes. Not Curtis Lee.

The 67-year-old Hope Mills resident once faced below-the-knee leg amputation. It instantly changed the way he looked at things most people take for granted.

What started out as a simple cut on his foot from a nail, turned into a stubborn diabetic ulcer. After months of trying home remedies, he sought medical attention after his leg began to swell and the pain became unbearable.

A string of new doctors and different treatments followed, but nothing worked. The infected wound kept growing, so doctors finally recommended amputation. The thought of losing a foot was scary, but dying was even scarier.

The day before surgery, Lee consulted with Paul Carter, M.D. The Fayetteville surgeon wanted to try one last option to save the patient's leg: Hyperbaric Oxygen Therapy at Cape Fear Valley's Wound Care Center.

The treatment proved to be the miracle cure Lee so desperately sought.



Diana & Kirby Brock



Curtis Lee



“I didn’t think I could bounce back with only one foot,” he said. “But now I can put my shoes on and walk to church without a cane. I haven’t been able to do that in seven years.”

Traditional Chinese medicine healers have long touted the healing powers of deep breathing. Hyperbaric oxygen therapy takes the concept to another level. It involves breathing pure oxygen inside a pressurized chamber to get as much oxygen into the bloodstream as possible. Earth’s air normally has just 21 percent oxygen.

“One hundred-percent pressurized oxygen helps your body receive the oxygen it needs,” said Julie Hopkins, R.N., Wound Care Coordinator, “to heal wounds from the inside.”

Machanda Sharp has been a hyperbaric oxygen technician at the Wound Care Center since it opened in 2009. She is still amazed at the miraculous power of pure oxygen.

“I’ve seen patients come in with wounds so large I could fit my hand in them,” she said. “Yet, they finish treatment with just a small spot or scar left.”

It may sound like instant results, but treatments can take many months. New patients must also undergo 30 days of traditional wound care before insurance may cover the cost of hyperbaric oxygen therapy.

Treatment sessions are intense and can be claustrophobic to some. Patients must lie inside a pressurized glass capsule for up to five days a week, 90 minutes at a time. Once patients enter the oxygen capsule, oxygen is slowly increased inside. Patients can watch television or talk to the attendant during treatment sessions. When the session is over, the oxygen capsule is slowly decompressed.

“I tell all my patients they have to be dedicated before we can start,” Sharp said. “The best results are on patients who are never miss an appointment and take care of themselves at home.”



Julie Hopkins, R.N.,
WOUND CARE COORDINATOR

Lee’s hyperbaric treatments lasted almost a year. He also had to wear a special cast that limited his mobility, alter his diet, and change his overall lifestyle.

His commitment began paying off after two weeks, when the nurse changing his cast noticed the hole in his foot had closed tremendously. A year later, the patient not only still has his leg, but has lost 60 pounds. He also feels better than he has in a long time.

“Last year was a rollercoaster,” Lee said. “But I’m thankful to be back to my old self again.”

Kirby Brock, 87, also underwent hyperbaric oxygen treatment for a foot ulcer. His quarter-sized wound stayed open for more than a year and a half before he turned to the Wound Care Center.

Now at the treatment halfway point, his wound has shrunk to the size of a dime. The recovery progress amazes Brock’s daughter-in-law, Diana. “I could literally see bone before, his wound was so deep,” she said.

Anyone with a chronic, open wound can seek treatment at the Wound Care Center, and patients do not need a physician referral. Treatment sessions are usually painless, but some patients may experience slight ear-popping due to increased pressure inside the oxygen chamber.

To learn more about hyperbaric oxygen therapy, call (910) 615-6377.



BACK^{and} FORTH

Back and spine pain can become chronic if left untreated

The human back is comprised of more than 30 bones and countless nerves, muscles and tendons, so when it's not in tip-top shape, the rest of the body knows.

Back pain is the second most common reason for seeing a doctor in the U.S. The problem is so pervasive that more than 80 percent of adults have low back pain at some point in their life.

The good news is that the pain is almost never serious and often goes away on its own. Furthermore, lower back-pain cases requiring surgery are rare.

To better understand back pain, one needs to look at the back's anatomy. The spine is a vertebral body formed in a column. It's a stack of circular bones, with disc-like cushions sandwiched between each. Inside the column sits a highway of nerves that connects the brain to the rest of the body.

Muscle and tendon strains are a common cause of back pain, but pain can also result from:

- Damaged, torn or bulging discs
- Arthritis of the spine
- Bony growths in the spinal column that pinch nerve endings
- A misaligned spine
- Narrowing of the spine
- Tumors or infection (which are rare)

Doctors often can't pinpoint the exact cause of low back pain. But the pain does tend to disappear on its own within four to six weeks, or even quicker. As a result, most people do not need imaging tests. Doctors will instead try to diagnose the pain by talking with patients about their symptoms.

The best advice is to work on good posture and stay active while your doctor prescribes medication or treatment. That includes walking as much as possible. Studies show people who stay active recover faster. As patients feel better, their doctor can begin prescribing more exercise.

Patients who see a doctor early experience the best recovery results. Up to 90 percent of patients seen within the first three days of pain onset recover within two weeks.

Chronic back pain can last 12 weeks or more. In these cases, treatment focuses more on controlling pain and improving activity, because a complete recovery may not be possible.

Most people still respond well to simpler treatments, such as:

- Pain medication
- Muscle relaxants
- Anti-inflammatory injections
- Physical therapy
- Spinal adjustment or manipulation
- Acupuncture
- Massage

If the pain persists, a physical examination and/or imaging studies may be needed. Basic examinations are pretty simple and can include posture inspection, range of motion for the affected area, spine palpation to check for soft-tissue tenderness, and leg strength testing.

More in-depth testing may involve MRI scans to check for problems, such as arthritis, tumors or other underlying physical ailments.

WHEN TO HAVE SURGERY?

Only a small number of patients suffering from lower back pain ever require surgery. Back surgery, might be needed:

- If your spinal nerves are compressed, causing debilitating pain or numbness
- Sometimes if a disc ruptures or begins to bulge
- The vertebrae is fractured or other physical damage occurs
- If osteoporosis leads to spine instability

Surgery might also be needed if a patient has:

- Scoliosis (curvature of the spine)
- Kyphosis (humpback)
- Spine slippage
- Spinal stenosis (narrowing of the spinal cavity)
- Irritation or inflammation of the central nerve highway
- Degenerative disk disease

The number of back procedures performed in the U.S. is growing, especially spinal fusion surgery for degenerative discs.

The procedure fuses two or more of the spines vertebral bodies to remove the degenerative disc. The goal is to restrict movement of the spine at the region and relieve pain symptoms.

Relieving pressure on the spinal cord or nerves is a common goal for all back and spine surgeries. Other types of surgery include:

- Discectomy (removal of the herniated portion of a disc)
- Laminectomy (removal of overlying bone on the spinal canal)
- Vertebroplasty and Kyphoplasty (cementing in sections of the spinal column to increase stability)
- Artificial discs (implants, as opposed to spinal fusion)

Sometimes surgery is not needed at all. But when it is, the neurosurgeons at Cape Fear Valley Neurosciences can help with your complex problem.

:: by Donnie Byers

practice run

Charles Haworth, M.D.,
uses virtual prep for
real back surgery



Millions of surgical procedures are performed each year in the U.S. with most requiring some sort of recovery period. So it would make sense to make surgery as minimally invasive as possible to shorten the healing process.

Charles Haworth, M.D., Cape Fear Valley's new Director of Neurosurgery, is a firm believer in the strategy.

"You can make a big incision and take all the muscles down," he said, "or you can make a smaller incision that's less painful, bleeds less and has less chance of infection."

Dr. Haworth has spent the past 16 years helping develop computer navigation software that does just that. The Stryker Surgical Navigation System was originally developed as spinal navigation technology, but is finding other uses in the operating room.

The system combines complex software and real-time imaging technology to map the spine area before surgery, similar to how a GPS unit would map out a travel route. A pencil-like device makes the mapping almost easy.

The surgeon places the pointer device on various spots on the skin, along the spine, to create a three-dimensional snapshot of the vertebrae. The data is then sent to a computer to visually recreate the spine in images on a monitor that can be analyzed more easily.

The Stryker software then compares the real-time images to previous CT scans of the spine to help create a surgery plan. The process can help determine incision locations, types of surgical tools or hardware needed, and even how long the surgery might last.

"It's like virtual reality," Dr. Haworth said. "You can plan out everything, even before you do it."

Precision is important when operating on something as delicate and complex as the human spine. Metal screws could break, miss their target or accidentally strike a nearby nerve.

Dr. Haworth has performed more than 1,200 spinal navigation cases since 1999. He has become so adept at the procedure that he is a nationally recognized expert for the Stryker system. Physicians from all over the U.S. and abroad have come to him to learn about the cutting-edge technology.

He's also helped develop a technique to take CT scan-quality images of the spine during actual operations. The technique not only saves time and money, but also produces considerably less radiation than traditional CT scans.

All of Dr. Haworth's procedures have been spinal, but he says the Stryker system could also be used on the head, neck, brain and other parts of the body. As a result, Cape Fear Valley's new neurosurgery chief would like to bring in other specialty surgeons who could utilize the technology.

He envisions a spine treatment and wellness center, similar to the health system's Cancer Treatment & CyberKnife Center. The goal, he said, is to do more cutting-edge surgery at Cape Fear Valley so it will become a destination-medical facility, like larger university-affiliated hospitals.

It shouldn't be too hard. Dr. Haworth previously worked for Duke University Medical Center and UNC Hospitals and already has patients from all over southeastern North Carolina and states as far away as Florida.

"We want people to come in and see what we're doing here at Cape Fear Valley," he said. "The sky's the limit."

Charles Haworth, M.D.

Cape Fear Valley Director of Neurosurgery

High Point native

Married with three children

Neurosurgeon

Medical degree from Duke University Medical Center

Surgical Internship at the University of Southern California, Los Angeles County Hospital in Los Angeles, Calif.

Residency at University of Virginia Medical Center in Charlottesville, Va.

Gamma Knife Fellowship at the University of Virginia Medical Center

Active duty naval commander at Bethesda National Naval Medical Center in Bethesda, Md. (1990-1993)

CAPE FEAR VALLEY HEALTH : TAKE CHARGE *of your* HEALTH

The Complications of Diabetes

Diabetes is a serious condition that can lead to debilitating consequences, or even death, but sufferers often ignore these hard truths.

Also known as diabetes mellitus, the metabolic disease occurs in people who have high blood sugar (glucose). It's caused either by inadequate insulin production, or because the body's cells do not properly respond to insulin, or both. Insulin is a hormone made by the pancreas to convert blood sugar (glucose) into energy.

Kidney, nerve, feet and eye problems can result if blood sugar levels stay high too long. High blood pressure, stroke, sexual dysfunction and skin infections are also possible. The infections can become so severe they require limb amputation.

There are two types of diabetes. In type 1 diabetes, the body does not produce enough insulin. It's often referred to as juvenile diabetes or insulin-dependent diabetes. It accounts for just 10 percent of cases.

Type 2 diabetes occurs far more frequently and is now considered a national epidemic. It's especially prevalent in the African-American community.

An estimated 25 million Americans currently have the disease. Ten percent of all Caucasians age 20 or older have it, while 18 percent of their African-American counterparts are affected, according to the American Diabetes Association.

Various factors play into the nearly 2-to-1 racial disparity, including diet and exercise. Overweight and obese people have a much higher risk of developing type 2 diabetes, compared to those who have a healthy body weight.

Studies show, however, eating healthy, exercising at least 30 minutes a day, five times a week, and losing seven percent of one's body weight can help reduce diabetes progression in those who have it.

"You'll likely be as healthy as anyone else on the street," said Nduche Onyeaso, M.D., an endocrinologist with Cape Fear Valley Diabetes & Endocrine Center, "if you just take your medications regularly, eat right and exercise."

Dr. Onyeaso says quitting smoking also helps, because lighting up introduces nicotine into the body. A recent study showed levels of hemoglobin A1c (HbA1c) raised by as much as 34 percent in blood samples with nicotine present. Hemoglobin A1c is an indicator of how much blood sugar is in the body.

The higher the A1c levels, the more likely serious health complications occur, such as severe skin infections and diabetic neuropathy. Diabetic neuropathy is a neurological condition that causes chronic tingling or pain in limbs, particularly in the legs. Over time, blood flow to those limbs dies off, forcing the need for amputation.

The problem lies in the body's blood vessels. Diabetes can affect blood circulation in both large and small vessels. Macro-vascular (large blood vessel) problems put diabetics at risk for heart attack and stroke.

"When you have diabetes, most times you also have high cholesterol," Dr. Onyeaso said. "Cholesterol deposited into the blood stream causes blockages in blood supplying the heart and brain."

Small blood vessels in the back of eyes can also weaken over time and begin to leak, causing diabetic retinopathy. Doctors recommend diabetics have yearly eye exams to catch eye problems early and prevent blindness.

**“we ... can prescribe medications,”
Dr. Onyeaso said, “but it’s what
you do at home that will help
control your blood sugars”**

Diabetics should also have their kidneys checked once a year, since micro vessels can deposit protein into the urine. This eventually causes renal (kidney) failure, forcing the need for dialysis. A healthy diet and blood pressure medications called ACE inhibitors, such as lisinopril, can help slow the damage.

Dr. Onyeaso says patients who fail to stay on top of their diabetes can expect a much shorter lifespan. So responsibility for the patient's health ultimately falls on them.

"We, the physicians, can prescribe medications," he said, "but it's what you do at home that will help control your blood sugars."

If you are a diabetic or have a family history of diabetes, make smart changes toward a healthier lifestyle. Eat minimally processed foods, exercise regularly and keep your blood sugar level under tight control. Have your doctor check your kidney function at least annually, and see an eye specialist every year.

Take Charge of Your Health and make a real difference in the quality of your life.

 Listen for Take Charge of Your Health messages on radio stations WUKS 107.7 Jamz, WMGU Magic 106.9, WCCG 104.5, WIDU 1600 AM and WMFA 1400 AM Raeford



for those in need

Friends of the Cancer Center program is a friend indeed

Each year millions of women across the United States choose to have a yearly mammogram. The hope is to catch tumors in their earliest stages, leading to better outcomes.

However, for every woman who goes in for her yearly screening mammogram, many more simply cannot afford to do so.

In our community, Cape Fear Valley Health Foundation's Friends of the Cancer Center funds the Mammography Outreach program, which provides free mammograms.

Since the program's launch in 2010, more than 400 women in Cumberland County have received screening mammograms at Cape Fear Valley Diagnostic Center with no out-of-pocket cost.



“Our Mammogram Outreach program fills a need for uninsured and underinsured women in Fayetteville,” says Angie Syphrit, Cape Fear Valley’s Breast Health Navigator and the program’s coordinator. “These women would not have mammograms without this program.”

A screening mammogram helps detect cancer in its earliest stages, when it is most treatable. Mammograms can detect tumors before they can be felt during a breast self-exam.

The monthly outreach program is always filled to capacity. Some months require two clinics due to overwhelming demand.

Dixie Lock, 56, benefited from one of the extra clinics in October 2013. She heard about the outreach program through her church and decided to schedule a mammogram with her sister.

“I’d had a mammogram before, but it was a couple of years ago,” says Lock. “I knew I needed to be vigilant because of a benign tumor that was found in my last mammogram.”

The vigilance paid off because her most recent mammogram showed another mass in her breast. This time it was cancerous. The tumor was localized in Lock’s milk ducts, however.

James Thomas, M.D., is the surgeon who biopsied Lock’s tumor. He described her cancer as “Stage 0” hormone receptor-positive breast cancer. This means growth can be prevented with the use of hormone receptor blocking agents. For most women, this is a very treatable form of cancer when caught early.

Lock is definitely one of the lucky ones. Her treatment regimen includes taking a pill every day to prevent new tumor growth, and she is currently undergoing a few weeks of radiation treatment. Her long-term prognosis is excellent.

“I’m thankful mine was caught early and I’m back to my old routine,” says Lock. “Having this program available really saved my life.”

Each screening mammogram costs approximately \$130. While that may seem like a lot, it pales in comparison to the cost of cancer treatment or the cost of someone’s life who skipped a mammogram.

Cape Fear Valley Health Foundation Friends of the Cancer Center raises funds for the mammograms through various fundraisers, individual donations and funds raised by community groups and businesses. These include the annual Ribbon Walk and Ride, the

“Friends of the Cancer Center is helping to give the uninsured and underinsured women of this community a fighting chance at beating breast cancer”

Circle of Friends Gala, third party community events benefiting the Friends of the Cancer Center and the Cape Fear Valley Employee Giving Campaign.

“Without our generous community support, Friends of the Cancer Center would be unable to offer this life-saving screening,” says Sabrina Brooks, executive director of Cape Fear Valley Health Foundation.

Any woman over age 40, as well as women under age 40 with a family history of breast cancer, can apply for the mammogram outreach program. Applicants’ income must be below 250 percent of the federal poverty level to qualify.

To Syphrit, it’s clear to see that this program is filling a much-needed void in the community.

“I never seem to finish one free mammography clinic before the next one is full,” says Syphrit. “Friends of the Cancer Center is helping to give the uninsured and underinsured women of this community a fighting chance at beating breast cancer.”

Join the Friends of the Cancer Center at this year’s Ribbon Walk & Ride for Cancer, scheduled for Sept. 20 at Festival Park in downtown Fayetteville. Register online at www.ribbonwalkforcancer.org.



GONE FISHING

This board member knows when to say when

If Ed Melvin knows anything, it's how to work with people. He can thank his country upbringing.

The 67-year-old businessman grew up in Tar Heel, a Bladen County town so small it's still devoid of any strip malls, movie theaters or big box-retailers. What his hometown doesn't lack is old-fashioned values.

Parents teach their kids more important things, like personal responsibility, working hard for a living and respecting elders.

The life lessons came in handy when Melvin graduated from high school and moved to the big city of Fayetteville. He landed a job selling parts at a downtown Buick dealership.

He turned out to be a natural-born salesman, especially when the dealership started selling tires. Buying new tires isn't normally something people look forward to, but a really good salesman can make it almost enjoyable.

"Everyone's gotta have four of them," Melvin said with a chuckle, "and a spare."

If he wasn't ringing up new parts or tires, then he was probably spending time with co-workers at one of the various downtown eateries. Everything was within walking distance back then, so casual conversation was always included.

His life changed dramatically in 1964, when the Vietnam War came calling via the draft. He spent his tour as a general's aide. Melvin admits it was a pretty nice gig, but he was still a country boy at heart and didn't see a military career in his future. So after two years, he came home and resumed his life as a tire salesman.

Melvin became so good at his craft that he eventually opened his own tire shop in town. Then another. And another. And another. Before long, he had a chain of 10 stores throughout Southeastern North Carolina. The chain was appropriately named "Ed's Tires."

The young boy from a small, rural farming community had become a mini tire mogul, just by remembering what he learned as a child.

"My number one goal has always been to provide the customer quality service," Melvin said, "so they always come back."

And they did for years, before Melvin finally decided to slow down a bit and sell several of his tire store locations to another local chain. He still sells tires with his son, but can concentrate on providing a more personal level of service; just like the good old days.

He used the same approach when he entered politics, winning a County Commissioner seat in 1996. He sat out one term but has held the seat since by maintaining his quiet demeanor and helping constituents when called upon.

Melvin isn't consumed with politics, either. He proved it by withdrawing his name from the last Fayetteville mayoral race. Early predictions had him easily winning the office. But he kept a promise not to run if his friend (and eventual winner) Nat Robertson ran for the seat.

Winning the mayor's gavel in a town he's lived and worked in for roughly half a century would have been a crowning political achievement. But it really wasn't all that important to Melvin.

What did matter, he said, was being able to serve Cumberland County residents at any level.

The reluctant candidate will again prove he has a life beyond politics when his current term ends. He's announced this will be his last. Melvin says it's time to step aside so others can run for his seat. He'll take with him many fond memories and no shortage of achievements.

During his 14-year tenure, he worked on several initiatives. They include securing funding for the new Cumberland County detention center, Health Department building, animal control center and Social Services building.

Asked what his most notable achievement was, Melvin points out how he and his fellow commissioners worked together for so long to improve many county services, yet avoided imposing any major tax increases.

"I will miss each one of them," he said.

The decision to leave office on his own terms is both admirable and rare. Many career politicians can't imagine their political careers coming to an end. But not this country boy.

"It was just time," he said. "When you get to be my age, it's time to start enjoying life."

That means trading in campaign events and boardroom meetings for daily rounds of golf and fishing with his 10 grandkids; if* the fish are biting, of course. If the weather's really nice, he may even take his 20-foot pontoon boat out for a spell.

"Being able to come home and wet a hook at the end of the day is a great thing," Melvin said.

It just goes to show that you can take the boy out of the country, but you really can't take the country out of the boy.



when you get my age, it's time to start enjoying life



ENDOCRINOLOGY



Yvonne Ngale, M.D.

Yvonne Ngale, M.D., has been approved for the Associate Staff and has joined Cape Fear Valley Diabetes and Endocrine Center. She received her medical degree from

Ross University School of Medicine in Portsmouth, Dominica. Dr. Ngale completed a residency in internal medicine at University of Connecticut Health Center in Farmington, Conn. She completed a fellowship in endocrinology at Duke University Health System in Durham. Dr. Ngale is board certified in internal medicine.

HOSPITALISTS

The following physicians have been approved for the Associate Staff and have joined Cape Fear Valley Medical Group:



Jihad Arteh, M.D.

Jihad Arteh, M.D., received his medical degree from University of Jordan in Amman, Jordan. He completed a residency in internal medicine and a fellowship in

hepatology, both at University of Tennessee in Memphis, Tenn. Dr. Arteh is board certified in internal medicine.



Jacob George, M.D.

Jacob George, M.D., received his medical degree from T.D. Medical College in Kerala, India. He completed a residency in internal medicine at East Tennessee State University in

Johnson City, Tenn.



Sayed Husain, M.D.

Sayed Husain, M.D., received his medical degree from Sindh Medical College in Karachi, Pakistan. He completed a residency in internal medicine at New York Hospital

Queens in Flushing, N.Y. Dr. Husain also completed a fellowship at Henry Ford Health System in Detroit, Mich. He is board certified in internal medicine.



Elena Mikhailova, M.D.

Elena Mikhailova, M.D., received her medical degree from Russian State Medical University in Moscow, Russia. She completed a residency in internal medicine at Newark Beth Israel Medical

Center in Newark, N.J.



Kalyan Mogili, M.D.

Kalyan Mogili, M.D., received his medical degree from Kakatiya Medical College in Warangal, India. He completed a residency in family medicine at East Tennessee State

University Johnson City Family Residency in Johnson City, Tenn.



Wajeed Mohammed Masood, M.D.

Wajeed Mohammed Masood, M.D., received his medical degree from Deccan College of Medical Sciences in Hyderabad, India. He completed

a residency in internal medicine at Queens Hospital Center/Mount Sinai School of Medicine in Jamaica, N.Y. Dr. Masood is board certified in internal medicine.



Peter Purrington, M.D.

Peter Purrington, M.D., received his medical degree from George Washington University in Washington, D.C. He completed a residency in family practice at Womack Army Medical

Center in Ft. Bragg. Dr. Purrington is board certified in family medicine.

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

Charles Haworth, M.D.

Charles Haworth, M.D., has been approved for the Associate Staff and has joined Cape Fear Valley Neurosurgery. He received his medical degree from

Duke University School of Medicine in Durham. Dr. Haworth completed a residency in neurosurgery at University of Virginia Medical Center in Charlottesville, Va. He is board certified in neurosurgery.

PEDIATRICS

Parag Bhattarai, M.D.

Parag Bhattarai, M.D., has been approved for the Associate Staff and has joined Children's Acute Care. He received his medical degree from Sher-e-Bangla

Medical College in Barisal, Bangladesh. Dr. Bhattarai completed a residency in pediatrics at Brooklyn Hospital Center in Brooklyn, N.Y. He is board certified in pediatrics.

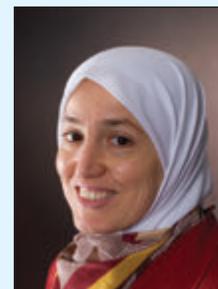
Meisha Abbasinejad, M.D., and **Cynthia Richards, M.D.**, of Cape Fear Physical Medicine and Rehab, have recently relocated their practice to 1540 Purdue Drive, Suite 200. They are certified in physical medicine and rehabilitation. For an appointment, please call (910) 630-1112.

Jose Cangas, D.D.S., has joined Day and Night Family Dental at 1408 Skibo Road. He is board certified in pediatric dentistry. For an appointment, please call (910) 354-2680.



Nefertiti Childrey, M.D.

Nefertiti Childrey, M.D., was recently certified by the American Board of Urology. Dr. Childrey practices at Cape Fear Valley Urology. For an appointment, please call (910) 615-3220.



Samar Elgendy, M.D.

Samar Elgendy, M.D., has joined Westside Medical Care at 1463 Pamalee Drive. She is board certified in family medicine. For an appointment, please call (910) 482-3000.



Shalaka Indulkar, M.D.

Shalaka Indulkar, M.D., has opened Carolina Child Neurology at 1220 Walter Reed Road, Suite 100. Dr. Indulkar is board certified in neurology with special qualification in child neurology. For an appointment, please call (910) 491-2437.



Rajesh Khurana, M.D.

Rajesh Khurana, M.D., has joined Southern Regional Area Health Education Center (SR-AHEC) at 1601-B Owen Drive. He is board certified in family medicine and hospice and palliative medicine. For an appointment, please call (910) 323-1152.



Andrew Morphesis, M.D.

Andrew Morphesis, M.D., and **Dominic Storto, M.D.**, are participating in the Americas Hernia Society Quality Collaborative for 2014. The purpose of the Quality Collaborative is to track hernia patient progress and satisfaction over time. Dr. Morphesis and Dr. Storto perform both open and minimally invasive approaches to routine and complex hernia repair. For an appointment, please call (910) 323-0101.



Dominic Storto, M.D.



EMS Team World Champs Again

Cumberland County EMS's competition team is the best in the world yet again. The Cape Fear Valley squad recently won another Journal of Emergency Services (JEMS) Games championship – the third in the past five years. The prestigious two-day competition pits the best EMS teams in the world against one another in graded competition. Cumberland County EMS paramedics Lee Westbrook, Larry Smith and Joseph Crowder, all Cape Fear Valley EMT-Ps, were on the winning team. This year's competition was held in Washington, D.C. It included a team from London, as well as perennial EMS powerhouse teams from Las Vegas and FDNY.



Every Child Deserves A Bright Future

Cape Fear Valley Health treated 387 children injured by child abuse in 2013. Cape Fear Valley Medical Center will honor them in April by displaying blue pinwheels on its front lawn for Child Abuse Prevention Month. The pinwheels symbolize the bright future every child deserves.

Hoke Hospital Topping Off Ceremony

Cape Fear Valley Health held a topping-off ceremony on Feb. 25 for its Hoke hospital. The facility is being built on the Health Pavilion Hoke campus, off U.S. 401 near Raeford.

CEO Mike Nagowski and Hoke County officials congratulated J.E. Dunn construction workers, before sharing a meal with them. They all then signed a vinyl banner that was placed atop the structure's metal frame to commemorate the project milestone.

When complete, the 41-bed hospital will serve residents of both Hoke and southwestern Cumberland counties. It will include a 16-bed Emergency Department, nine observation beds, an intensive care unit, two operating rooms, four birthing suites and a dedicated C-section room.

The Health Pavilion Hoke outpatient facility and the new hospital represent a combined \$100 million investment into Hoke County and is expected to directly create 350 new jobs.



Community Mental Health Center Moves To Renovated Roxie Center

Cape Fear Valley recently relocated the Community Mental Health Center operations from Bradford Street to the newly renovated second floor of the Roxie Center.

Renamed Community Mental Health Center at Cape Fear Valley, it opened in its new location on Jan. 31. The center now provides five behavioral health services in one location: crisis counseling, therapy services, medication clinics, psychiatric assessments and a walk-in screening service.

The walk-in screening service is open from 8 a.m. to 8 p.m., Monday through Friday. It will eventually expand to include weekends.

An eight “bed” evaluation unit opened on the second floor of the Roxie Center on Feb. 3. Individuals may remain on this unit for up to 23 hours for evaluation to determine the most appropriate treatment for them. The goal is to help these individuals avoid hospitalization.

On the first floor of the Roxie Center is the substance abuse detox program and facility-based

crisis stabilization unit. It will expand from 8 beds to 16 by mid-summer.

The Community Mental Health Center also operates a medication assistance program on-site to provide psychiatric medications for uninsured patients who lack adequate financial resources to pay for their medications.

Patients in need of psychiatric services can now go to the Roxie Center for evaluation instead of the Emergency Department for non-emergency situations.

The one-stop-shop for outpatient mental health services was made possible when Cape Fear Valley took over the day-to-day operations of the former Mental Health Clinic. Mental health services for children have also been expanded. Cape Fear Valley will be adding an additional child psychiatrist to its medical staff in May.

For more information about the Community Mental Health Center at Cape Fear Valley, please call (910) 615-3333.

CARING *for* LIFE'S GREATEST GIFTS CHILDREN'S CENTER RENOVATIONS



The Children's Center at Cape Fear Valley Health is the community's only civilian inpatient pediatric unit. While the pediatric staff at the Center is specifically trained to meet the unique needs of children and to provide quality and compassionate medical care, the Children's Center facilities are in great need of renovations. It has been 25 years since the 24-bed unit was renovated. As a result of changes in the equipment and facilities needed to provide the best treatment possible, the lay-out of the unit is no longer optimally effective and efficient for pediatric patient care.

In order to complete the renovations and to create the best possible environment for our pediatric patients, we need your help. A gift of \$15,000 to the Cape Fear Valley Health Foundation will fully fund the renovation of one pediatric inpatient suite, including the room and bathroom.

"The rooms will also offer a better sleeping environment, making it more comfortable for parents to stay with their child."

— DIANA HARRIS, WOMEN & CHILDREN'S
SERVICE LINE DIRECTOR



BEFORE



AFTER

The aesthetic changes will provide a more positive environment for children and their families as they face the challenges of in-patient care. New beds will allow for better comfort and ease of patient care, and the sleeper chairs are specially designed for parents who need to stay with their children for extended periods of time. The newly designed and outfitted bathrooms will allow for much greater efficiency and ease for the nursing staff as they aid the children. The rooms will also be configured to accommodate the latest state-of-the-art equipment needed for pediatric inpatient care.

Giving at this level to the pediatric renovations provides you with the opportunity to place your name or the name of someone you would like to honor on a plaque outside the pediatric room. Through this gift, you will have a tremendous impact on the lives of thousands of patients and family members for years to come. Your generosity will help us to continue providing the best care possible for the children of our community.



FOR MORE INFORMATION *or to SPONSOR A ROOM*, contact:
SABRINA BROOKS, CAPE FEAR VALLEY HEALTH FOUNDATION
910 615-1435 office :: 910 615-1551 fax :: www.capefearvalley.com/foundation

Community

CAPE FEAR VALLEY HEALTH *in the* Community

FOR ADULTS

ARTHRITIS OF THE HIP & KNEE

Thursday, April 24

Thursday, June 26

6:30 – 7:30 p.m.

Cape Fear Valley Education Center

FREE! Does arthritis pain limit your mobility or interfere with activities you enjoy? An orthopedic surgeon will discuss the signs and symptoms of arthritis and available treatments.

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

CANCER SURVIVORSHIP WORKSHOPS

Tuesday, May 13

6 – 8 p.m.

Cancer Center Conference Room

FREE! This series of workshops is designed for cancer patients currently in treatment and those who have completed treatment in the past year.

For more information or to register, please call (910) 615-6791.

FOR EXPECTANT PARENTS

BREASTFEEDING CLASSES

Wednesdays, May 7, 21

Wednesdays, June 4, 18

Wednesdays, July 9, 23

6 – 7:30 p.m.

FREE! Classes are taught by an International Board-Certified Lactation Consultant. Fathers are welcome and encouraged to attend.

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

PREPARED CHILDBIRTH CLASSES

Series of four classes:

Mondays, April 28 & May 5, 12, 19

Mondays, July 7, 14, 21, 28

6 – 9 p.m.

Accelerated Prepared Childbirth:

Saturdays, May 3, June 7, August 2

9 a.m. – 5 p.m.

\$30 per couple

This class will help you and your birthing partner prepare for your special delivery!

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

FAMILY BIRTH CENTER TOURS

Tuesdays, May 6, 13, 20

Tuesdays, June 3, 10, 17

Tuesdays, July 8, 15, 22

5 – 6 p.m.

FREE! Take a tour to see the safety and security of the Family Birth Center. Fathers are encouraged to attend.

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

FOR CHILDREN

ASTHMA ACTION FAIR

Saturday, May 17

9 a.m. – Noon

HealthPlex Gym, 1930 Skibo Road

FREE! Children and adults with asthma can connect with physicians, nurses and other asthma professionals in a casual setting. Free spacers, peak flow meters and nebulizer equipment while supplies last. Educational seminars held at 9:30 a.m., 10:15 a.m. and 11 a.m.

For more information, call (910) 615-3185.

NICU REUNION

June 7

10 a.m. – 1 p.m.

Cape Fear Valley Rehabilitation Center Auditorium

FREE! All graduates of Cape Fear Valley's Neonatal Intensive Care Unit and their families are invited.

For more information, call (910) 615-LINK (5465).

CHILDREN'S DIABETES CAMP

June 28

9 a.m. – 5 p.m.

Camp Rockfish

Children under 18 with diabetes and their families eligible to attend. Cost is \$30 and includes lunch and activities for a family of four.

For more information, call (910) 615-1885.

CAPE FEAR VALLEY SUPPORT GROUPS

The Look Good, Feel Better program meets on the third Monday of the month, at 9 a.m., in the Cape Fear Valley Cancer Center conference room and 9 a.m. in the Health Pavilion North Cancer Center. Licensed cosmetologists help women with cancer learn how to apply make up and style wigs or scarves to compensate for the changes in the skin and hair that cancer treatment may cause. **To register, please call (910) 615-6791 and ask for the Oncology socialworker. You can also learn about coming educational workshops.**

A.W.A.K.E., a support group for those with sleeping disorders and their family members. Meets every third Tuesday in January, March, May, July and September, from 6 to 7 p.m., in the Carolina Room of the Cape Fear Valley Education Center at 3418 Village Drive.
For more information, please call (910) 615-3200.

Mended Hearts, a support group for those who have had heart surgery and their family members, meets every second Thursday of the month at 5:30 p.m. in the Cardiac Rehab Classroom at Cape Fear Valley Rehabilitation Center.
For more information, please call Rae Ashley at (910) 615-6580.

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

Stroke Support Group meets on the third Wednesday of the month at 4 p.m., in the Physical Therapy Gym at Cape Fear Valley Rehabilitation Center.
For more information, please call Vicky Parker at (910) 615-6972.

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

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

community

COMMUNITY SUPPORT GROUPS

Alzheimer's Caregiver Support Group, for those caring for loved ones with Alzheimer's disease. Meets on the third Tuesday of the month at 2 p.m. at Heritage Place, 325 North Cool Spring Street in Fayetteville. **For more information, please call Sam Hutchinson at (910) 615-1633.**

Arthritis Support Group meets on the fourth Monday of the month (except February, July and December) at 6:30 p.m. at Cape Fear Valley Rehabilitation Center, Auditorium Room A. **For more information, please call Diana Coppernoll at (910) 488-9352.**

Bereavement Support Group meets at Cape Fear Valley HomeCare and Hospice in the Bordeaux Shopping Center Professional Center, Suite 203, at 1830 Owen Drive, on the first and third Thursdays of the month from noon to 2 p.m. The group is for those who are coping with the death of a loved one. **For more information, please call (910) 609-6710.**

Compassionate Friends, a support group for families who have experienced the death of a child, meets on the first Tuesday of the month at 7:30 p.m. in Room 102 of the Medical Arts Center at 101 Robeson Street. **For more information, please call Jennifer German at (910) 245-3177.**

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

Marfan Syndrome Support Group meets the fourth Saturday in March, April, September and October, at 2 p.m., in Cape Fear Valley Rehabilitation Center Auditorium. Meetings will also be held the first Saturday in December, at 2 p.m., and on Saturday, Aug. 30, at 9 a.m. **For more information, please call Karen Moore at (910) 583-5518.**

Scleroderma Support Group meets on the third Saturday of the month, at 10 a.m., in Room 102 of the Medical Arts Center at 101 Robeson Street in Fayetteville. The group does not meet in July or December. Scleroderma patients and their loved ones are invited for support and information about the disease. **For more information, please call Donna Thomas at (910) 308-9792 or Kim Sublett at (910) 237-2390 or via email at fayettevillescleroderma@gmail.com.**

Parkinson's Disease Support Group meets on the second Saturday of the month, at 10 a.m., in Room 102, at the Medical Arts Center at 101 Robeson Street. No meetings in July or August. **For more information and location confirmation, please call Kent Rosborough at (910) 483-1975 or (828) 606-1921.**



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**CAPE FEAR VALLEY
NEUROSCIENCE CENTER**

If you or a loved one has a neurological problem, you may not know where to turn. You may even think you need to travel out of town to an academic medical center for treatment.

Cape Fear Valley Neuroscience Center offers comprehensive neurology and neurosurgery services right here in Fayetteville.

Accepting Tricare, Medicare, Medicaid and most private insurances.

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