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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 1,300 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**

This issue of Making Rounds is largely about cancer, because when it's October it's time to "think pink," and Breast Cancer Awareness ribbons appear on every surface and product. But cancer treatment and awareness are always the focus at Cape Fear Valley Cancer Treatment and CyberKnife Center, where different patients ring that silver bell every day to signify completing treatment in their cancer journey.

Cancer is a common and serious disease that affects all of us, either directly or through loved ones, myself included. I've spoken before about my mother's passing from cancer at 59, but I know too many of you have your own stories as well.

This issue includes uplifting stories about overcoming cancer, important awareness information about breast cancer self-exams and screenings, and the work we're doing to improve access to cancer care and treatment in our region. It also includes a list of upcoming blood drives, which are a staple of Making Rounds magazine, but I want to point out how donating blood can be vital to helping cancer patients, as you'll read in Marty Webb's story.

We've been fighting cancer with everything we can, and it's our pledge to the community that we will continue to do so. The fight starts with you, though. Getting regular screenings, like mammograms, colonoscopies, and other wellness checkups, are crucial to catching cancer and other diseases in their earliest stages, to give us all the best chance of winning the next fight.

It's a battle no one wants to join, but all too many do. We have had more than 130,000 patients visiting our Cancer Centers in the past year alone. As the need has increased, Cape Fear Valley is stepping up our resources, as well. We're expanding services in Harnett County with the planned construction of a full-service cancer center that will bring radiation oncology services as well as medical oncology. There's a story in this issue with more details on this good news that I hope you will check out. Radiation oncology services are needed by almost half of all cancer patients in the course of their treatment, so this is a tremendous development for patients in Harnett County.

We recognize that we still have so much further to go, but we're here to take this journey with you. We have a medical team of more than 100 oncology specialists covering all areas of medical and radiation oncology, and they are also involved in research. Looking ahead, we are heartened by the research that is happening here and elsewhere, and we are excited that new technologies and breakthroughs are happening every day.

Mike Nagowski

Mike

CEO, CAPE FEAR VALLEY HEALTH



A breast cancer patient walks a complicated path to survivorship

by Lia Tremblay

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At the start of 2021, Tami Pope was struggling a bit.

"I always run myself down during the holidays," she said, "so I usually spend January and February recouping. But this time I was more tired than usual."

It's only in retrospect that she sees this as a possible first symptom of what was to come. Then February brought a symptom that was harder to explain away: a noticeable pucker in the skin of her left breast.

"I did not immediately think breast cancer," she said.
"But then I googled it, which I should not have done."

Googling led her to worst-case scenarios, which paralyzed her with fear and anxiety for days. Finally, she made an appointment with her gynecologist, who rushed her in for a mammogram.

"And it was like that day, bam," she said. "It never stopped."

She was called back for an ultrasound, and then sent for a biopsy. Finally, she got the news in a call from her gynecologist. It was cancer – invasive ductal carcinoma, to be exact.

"I asked him if this is something I can beat," she said. "He said, 'Yes, it's small and it's early."

He referred her to Cape Fear Valley's Breast Care Center, where she met Elizabeth Sawyer, MD, FACS, the center's medical director. Dr. Sawyer is a surgeon who specializes in breast cancer, and she's often the first person a woman sees after diagnosis.

"So many women have anxiety about breast cancer," said Dr. Sawyer. "I really enjoy having the opportunity to educate women about it, and to ease some of those fears."

"As soon as she came in, I felt comforted," Pope said.
"She said what I had was the most common type of breast cancer, and it wasn't very aggressive. And I had lots of treatment options."



When it comes to breast cancer, early detection saves lives.

One in eight women will develop breast cancer in her lifetime. That one could easily be you or your loved one. In fact, breast cancer is the most common cancer in women worldwide.

Cape Fear Valley's Breast Care Center is here for you - for peace of mind, early diagnosis and treatment, or support. Regular mammograms are important to beating cancer before it sneaks up on you. To learn more about where you can schedule your mammogram, visit capefearvalley.com/mammogram.

> After discussing those options, they settled on a plan: a lumpectomy to remove the tumor, and radiation to kill any cancer cells that may remain.

After talking with Dr. Sawyer for a while, Pope met another woman who would play a crucial role in her treatment: Erin Champion, a Breast Patient Navigator. Her job is to guide patients through the complex process of breast cancer treatment, which can be a lengthy and emotional experience.

Champion has a unique understanding of what patients may be going through. Seven years ago, while pregnant with her third child, she was diagnosed with breast cancer herself.

"One of my first prayers after that diagnosis was, 'If I'm going to go through this, please let it be for a greater purpose," Champion said.

Pope said after meeting Champion, she knew she was in good hands.

"You can't look at her and not immediately feel better," she said. "She just radiates kindness and love."

Although Pope left that appointment feeling good about her treatment plan, she also believed it was prudent to get a second opinion. She traveled to Raleigh to find out what a doctor there would say.

"As soon as he introduced himself, I knew that was not where I wanted to be," she said. He gave me the same information, but it was not delivered in the same way. I felt like just another patient there, and it confirmed that I needed to do this in Fayetteville. I felt like Dr. Sawyer and Erin were put in my life for a reason."

Back at the Breast Care Center, Champion's navigation skills would be put to the test over the next few months as Pope's treatment became more complicated.

"I was satisfied with the lumpectomy and radiation plan," said Pope, "and I felt lucky that was all I needed. But a week before the lumpectomy, I don't know. This feeling just came over me and I was sure I needed the mastectomy."

One reason, Pope said, was that for years she had been called after routine mammograms to come back for a second look.

"I never worried about it, because it never turned out to be anything," she said. "But I knew that after this experience, if I got that call after a mammogram I would probably freak out."

She called Champion and explained her change of heart. Champion spoke to Dr. Sawyer, who agreed to perform a mastectomy instead. They set the surgery date for May 4.

Pope's decision to remove both breasts presented another fork in the road: Did she want them cosmetically reconstructed, or was she content to do without?

"I understand why some women don't want reconstruction," she said. "My initial thought was I don't care, just take them and be done. But we talked about it, and I was a really good candidate to have the reconstruction. And I started to think if I didn't do it, I might look back and wish I did."

This brought a new player to the team: Leif Nordberg, MD, who performs plastic and reconstructive surgery, including breast reconstruction after mastectomy. While most cosmetic surgery presents an out-of-pocket expense to patients, breast reconstruction is usually covered by insurance.

"Dr. Nordberg was wonderful," she said. "He took his time explaining the process and really made me look forward to having it done."

"Keep up with your annual mammograms. Know your body, and if something looks or feels wrong, get it checked out."

On the day of the mastectomy, Pope encountered the most serious obstacle yet: In the middle of surgery, her heart inexplicably stopped. The procedure came to an abrupt halt as she was revived, and she spent several nights in the hospital to investigate this worrisome new issue.

"My heart recovered quickly," Pope said. "I have gone through lots of tests since then and it's completely recovered."

Pope described it as "broken heart syndrome," a condition in which extreme stress temporarily damages the heart. And no wonder—in those three months since her own diagnosis, her father had passed away and her father-in-law was diagnosed with late-stage pancreatic cancer.

With her heart on the mend, Pope was again cleared for surgery. But it wouldn't be the one she had planned on.

"Dr. Sawyer said, "We need to hit the brakes on the mastectomy for a while," she said. "So I agreed to just do the lumpectomy for now, and come back to the mastectomy later."

After the lumpectomy, Pope's lab work showed that there was still some cancer remaining, including in her lymph nodes. The news reaffirmed her choice for a mastectomy.

"And it turned out I needed chemo too," she said. "The plan just kept getting bigger and bigger."

After completing four rounds of chemo and a month of rest, Pope finally had her mastectomy in October. Dr. Sawyer removed all of the tissue from both breasts, sparing the skin and nipples for reconstruction. Then Dr. Nordberg stepped in, placing tissue expanders that would be filled over time and make room for implants to be placed a few months later.

"I had my final surgery in June," said Pope. "The expanders came out and the implants went in."



Tami Pope, Elizabeth Sawyer, MD, and Erin Champion

She said the true final result may not be visible for six to eight months—two years from her first symptoms—but she already loves how she looks and feels.

"This team is amazing," she said. "The way they cared about me completely, from my physical health to my mental health, my body image, how I would feel today and tomorrow and the next day ... I am just so grateful."

Dr. Sawyer said a multidisciplinary approach is key to the Breast Care Center's success. As a surgeon, she is joined by specialists in medical and radiation oncology, skilled nurses, and ancillary services like nutrition and social work.

"We are all members of a team," she said. "Everyone has a say, and we meet regularly throughout a patient's care to discuss their progress. I'm proud to say we offer world-class care in the comfort of our hometown."

Pope said that for a case as complicated as hers turned out to be, a navigator like Champion is essential.

"I can't tell you how many times she talked me off the ledge," Pope said. "I called her after hours, on weekends, anytime. She was a godsend."

Champion said it's a pleasure to help during times like this.

"Sometimes this looks like the path you'll take," she said, "and then it changes. Either your imaging has changed, or you have changed your mind about what you want to do. I'm there to listen, make sure they fully understand the recommendations and options, and then walk with them on the path they choose."

For others facing a breast cancer diagnosis, Pope has some advice. Keep up with your annual mammograms. Know your body, and if something looks or feels wrong, get it checked out.

"And whatever you do," she said, "don't google it."

BREAST CANCE





Overall, the average risk of a woman in the United States developing breast cancer sometime in her life is about 13%. This means there is a 1 in 8 chance she will develop breast cancer.



Scan this code to learn more about breast cancer and see if you qualify for a FREE mammogram.

Between your mammograms, look for these changes





knowyourlemons.com



N N N N N

ER AWARENESS



genetics or history



gender



women over 50

Breast cancer is the most common cancer in women in the United States, except for skin cancers. It is about 30% (or 1 in 3) of all new female cancers each year. The American Cancer Society's estimates for breast cancer in the United States for 2022 are:

About 287,850 new cases of invasive breast cancer will be diagnosed in women.

About 43,250 women will die from breast cancer.

About 51,400 new cases of ductal carcinoma in situ (DCIS) will be diagnosed.









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New scanner transforms surgeries with real-time images during procedures

A new mobile CT scanner is revolutionizing cranial and spinal

procedures at Cape Fear Valley. It offers surgeons diagnostic-quality CT images of their patients' brains and spines during surgery in the operating room.

The innovative Airo TruCT scanner provides real-time, highresolution images and helps surgical navigation software pinpoint exact locations within the brain and spine within one millimeter of accuracy.

"The sophistication of what we have at Cape Fear Valley is at the next level. We can see exactly where we are during surgery, we know exactly where we are in their brain. The accuracy is outstanding," said Charles Haworth, MD, Director of Neurosurgery at Cape Fear Valley.

Haworth says this newly acquired medical tool allows for 32 slice CT images to be taken of the entire spine in only 40 seconds. The CT scanner is able to scan soft tissue, like the brain, and not just bone anatomy, during surgery. The information gained facilitates minimally invasive surgery, advances quality control and provides real-time updates to improve patient outcomes.

One benefit to the Airo TruCT scanner is its accuracy to assist as a navigational tool.

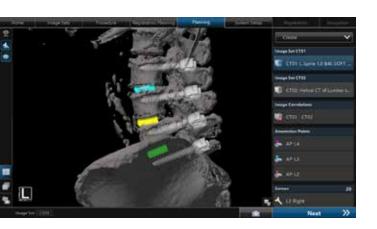
"This CT scanner identifies our location within one millimeter of accuracy. It gives us the exact location and helps you go the shortest distance possible to get to the area needing attention," said Haworth. "We know where everything is so we can avoid structures we don't want to injure, like blood vessels. We navigate through delicate

structures. This helps avoid nerve or brain injury, which has been a huge revolution in neurosurgery. Over the time I've been in practice, using a brain or spine navigation system has become the standard of care."

The Airo TruCT scanner works with a computerized navigation system to provide accurate three-dimensional images of the brain and spine, which in turn provides precise information on the operating table during surgery.

"We've been using a very robust, advanced navigation program since I got here nine years ago, but the new upgrade enables us to see in the brain in real-time," he said. "We can see better. It's better visualization. We could not image the brain during surgery before now."

Another benefit of real-time CT images during procedures is for the surgeon to immediately be able to evaluate issues like the size of a blood clot in the brain, or a shift to the spine after placement of a graft.



"Let's say we have a blood clot in the brain. We can take a CT in the emergency room, but by the time you get to the operating room, the clot might have gotten bigger. We would not know that if we relied just on the first scan, but if we scan on the operating table, we can see exactly the way the brain looks at that time. It allows us to go straight to it and take it out. We can also rescan to make sure that the patient did not rebleed, before going to the recovery room," said Haworth.

The Airo TruCT scanner also can help the surgeon adjust for slight movements during surgery.

"When working on the spine, the orientation of the spine can change during surgery. The old image might not be accurate because the position of the spine on the table has changed. With this CT scanner, you can get another scan. It gives you feedback and updates on what you are doing," said Haworth.

According to Haworth, repetitive plain X-rays or fluoroscopy used to be the standard for spinal surgeries but using the CT scanner sparingly throughout procedures also reduces the risk of radiation for patients, surgeons and operating room staff.

"We might not shoot a second scan until the very end of the case. The CT scans are more accurate, and we can scan up to one meter of the body, including the entire spine while operating," said Haworth.

Further, a large benefit to the intraoperative scanner is the ability of the surgeon and operating staff to verify that the surgery was successful before the procedure is completed.

"We don't have to bring the patient from the operating room to another room for a CT scan and bring them back to the operating room for the process again if we see something. It's in the operating room with us and we can scan the patient on the operating table. This is extremely efficient, safe and better-quality care," said Haworth.

The real-time updates from the portable CT scanner also provide confidence to Haworth and his associate Dr. Prithvi Narayan that they have completed the surgery at that time with immediate and verifiable results.

"The sophistication of what we have at Cape Fear Valley is at the next level. We can see exactly where we are during surgery... The accuracy is outstanding."

"If a tumor was being removed during surgery, we can check with real-time images to make sure the entire tumor is removed. This also applies to making sure tiny screws are in the correct place in the spine or a catheter is placed correctly in the brain to help drain fluid. The ability to rescan the patient enables immediate quality control," said Haworth.

"We can rescan the patient and check to make sure everything has been done properly. This is my standard of care. To make sure everything is perfect before the patient leaves the operating room. It's a quality check device."

In a field where surgery needs to be precise, the Airo TruCT scanner is helping surgical hands navigate with the most advanced technology for the benefit of their patients. Cape Fear Valley is one of the few hospitals in North Carolina with the latest upgrade in this equipment.



The Cancer fight

All those rich-voiced years he spent behind a microphone created a slew of fond memories for retired radio disc jockey and racetrack announcer Marty Webb. Near the top? That would be his interview of NASCAR Hall-of-Famer Richard Petty before the racing legend went on to serve as honorary starter for a race in Rockingham.

"The fact that I grew up watching him race and then I had the opportunity to be able to interview him on the PA system at Rockingham was special," Webb said. "I watched him from the whole time I started going to any races. He was my driver."

But not even Petty could overshadow the legion of friends, family and even complete strangers who have supported Webb in the months since he was diagnosed with non-Hodgkin's lymphoma, a form of cancer in his spleen. Chief among those supporters has been the staff at Cape Fear Valley Cancer Treatment and CyberKnife Center, where Webb rung the center's bell in July, signifying his cancer had gone into remission after six months of treatment.

From oncologist Kenneth Manning, MD, himself a cancer survivor, to the nurses, dieticians and even Jerry the golf cart shuttle driver, Webb says he received the best care.

"I'll love every one of them for the rest of my life," Webb, 74, said. "They're going to be special to me for the rest of my life. They are very patient-oriented at the cancer center. They answered every question I ever thought about having. They're all wonderful people."

Homestretch calls out community support

The outgoing Webb, better known as Marty the One-Man Party to the many fans of his radio and racing career, was a longtime disc jockey for Fayetteville radio station WFLB and then an announcer for Fayetteville Motor Speedway when it opened in 1968. In 1989, he helped call the action for MRN Radio in NASCAR races at Pocono, Rockingham, Darlington and Richmond.

"Once you get a microphone in your hand, it becomes part of you," Webb said.

And, as it turns out, there were lots of people who remembered his enthusiastic and friendly delivery. And even those who didn't know him from his radio and broadcasting career became fans during his cancer battle. In late April, for instance, Manning became

concerned about Webb's red blood cell count and sent him to the Highsmith-Rainey Specialty Hospital for a transfusion. As he does most everywhere he goes, Webb made an impact.

"You know, Mr. Webb," a staff nurse at Highsmith-Rainey said, "with your radio voice and the people you know, you could really help our blood donor center."

Her words struck a chord with Webb. Two days later, he was about to induct six drivers into the Fayetteville Cumberland County Stock Car Racing Hall of Fame. He looked out over a crowd of about 300 people at the Vander Walking Trail Civic Center.

"Before I started the induction ceremony, I said, 'Folks, I want to ask you to do me a favor. A lot of you know I'm in a battle against cancer," he said. "I'm not here to ask you for any monetary donations. I want to ask you to give the gift of life. I want you to go into the Cape Fear Valley Blood Donor

Center and tell them you're there because Marty asked you to go in and give the gift of life. Let's call it the Race for Hope and Cancer Awareness Blood Drive."

Robert Kitchen, a friend of Webb's and dedicated community volunteer, even organized a June blood drive in Webb's honor that resulted in 35 blood donations in eight hours.

A subsequent bloodmobile trip to Rockfish Speedway yielded 12 more donations.

Webb calls those who have stepped up for him "prayer warriors."

"My prayer warriors were in the thousands," he said. "I posted a picture of my bald head and asked, Who wants to join the Cueball-Headed Marty Party Support Team to Fight Cancer?"

It was a reference to a 1999 insult Dale Earnhardt, Jr., made toward Todd Bodine after a crash at Pikes Peak International Raceway. But now there was no ill will, only camaraderie. Eighteen men shaved their heads in a show of solidarity with Webb losing his hair.

Webb said that's the kind of support that has carried him through. He says he'll never forget the care he received at the cancer center and the concern from loved ones and people he'd never met. Linda, his wife of 58 years, has been by his side throughout his treatment. And then there are people like his longtime dentist, Dr. S.O. Smith, who added Webb to the prayer list at Snyder Memorial Baptist Church.

"Marty is a unique person," said Smith, himself a cancer survivor. "I think it helped us to pray for him as much as it helped him."

Interested in donating blood? See the list of upcoming blood drives on page 30.





Driving back and forth from Dunn to

Fayetteville four times a week might seem like an inconvenience, but Billy Shaw and his caregiver Carolyn McLamb call it a godsend for his Parkinson's therapy.

"We are very fortunate to have these programs especially close by. It's wonderful," said McLamb.

Shaw, 74, was diagnosed at the end of July with Parkinson's disease and started occupational, physical and speech therapy programs through the outpatient neurological clinic at Cape Fear Valley a little over two weeks later.

With therapy four times a week, McLamb said Shaw is having a return of movement and speech abilities he had lost.

"His symptoms progressed quickly after his diagnosis, but with the therapy, he is more independent now," said McLamb.

McLamb credits the outpatient neurological clinic staff for helping her partner regain the mobility and strength that he had lost from the effects of Parkinson's disease.

Parkinson's disease is both chronic and progressive, attacking the part of the brain that helps control and coordinate body movements and speech. Patients often have trouble with balance, slowness of movement, tremors (or shaking) and difficulty walking. According to the Parkinson's Foundation, more than 1 million people in the United States are living with Parkinson's disease, and more than 60,000 people are diagnosed each year.

Current programs offered for Parkinson's patients in the outpatient neurological clinic include speech therapies SPEAK OUT! and Lee Silverman Voice Technique (LSVT) LOUD, and occupational and physical therapies LSVT BIG and Parkinson's Wellness Recovery (PWR) physical therapy. The clinic also offers recreational aquatic therapy with a warm-water physical regimen according to Melissa Wisneski, Director of Therapy Services.

Wisneski said that while the LSVT programs BIG and LOUD are very intense, four-times-a-week programs, the rehab clinic also offers PWR physical therapy and SPEAK OUT! speech therapy for more flexibility if the patient cannot be at the rehab center several times a week.

"They all work together to create a regimen that best fits the patient's needs," said Wisneski.

The BIG program focuses on large movements and balance responses, according to Rachel Furnham, a physical therapist in the outpatient neurological clinic.

"With Parkinson's disease, patients don't realize their movements aren't normal, so we mirror big movements in front of them. We help retrain their brains, so it becomes more automatic. We ask what trouble they have at home. It can be walking, sitting or getting out of a chair or getting out of bed," said Furnham.

In the PWR program, therapists work on movements and posture using music or a metronome with patients.

"PWR is the same idea as BIG. Patients tend to have very small steps. They step close together and freeze at transitions at a doorway or going from tile to carpet. Using music helps them not to freeze and to walk more confidently," said Furnham.

Furnham said that recent donations have helped the clinic get more equipment for the physical therapy programs including blaze pods, which serve as small flat targets that can be attached to a wall or used on the floor to help with step exercises, reaching up and balance, and a special walker that has a metronome and a laser light called a "u-step walker." They also were able to add shuttle balance bars, which challenge patients to keep their balance holding on to parallel bars with an unstable base of support.

Speech is another component affected by Parkinson's disease. Elexea Aurilio is a speech language pathologist in the outpatient clinic.

Aurilio said that SPEAK OUT! and LOUD improve patients' vocal volume, intelligibility and overall speech clarity.

"I've had patients tell me that coming to a more intensive program has made them stronger. They can order in restaurants now. It gives them some of their independence back," said Aurilio.

One of those patients is Fayetteville resident Joan Berube, 81, who was diagnosed with Parkinson's disease three years ago.



"I did the whole program, including speech and physical therapy. It was marvelous. We did everything I would need for daily living, and I feel confident now. I can talk in a conversation without feeling embarrassed or uncomfortable. I'm still walking with a walking stick, but I'm 81 and don't want to stumble or fall," laughed Berube.

Berube said she was referred to the programs shortly after she was diagnosed.

"I didn't know I had it, but my doctor had me walk down the hallway and realized right away something was wrong. As time went on, it showed up more definitively. It started with a trembling in my hand where I couldn't hold a cup of coffee," said Berube.

Berube's therapies were one-on-one, which most are, but the outpatient neurological clinic staff has plans to add a new program in the fall with an emphasis on group training: Rock Steady Boxing.

The Rock Steady Boxing program is scheduled to launch in October through a substantial donation by Fayetteville residents Tony and Ann Cimaglia to the Cape Fear Valley Health Foundation's Caring for the Future campaign bookmarked for Parkinson's disease support and therapy.

"He wanted to bring the Rock Steady boxing program to our community. He's passionate about this program because it works. We are excited to be able to offer this at Cape Fear Valley," said Wisneski.

One of the first to be trained in the Rock Steady Boxing therapy program is Maria Jackson, a physical therapist assistant who has been with Cape Fear Valley for seven years.

"The Rock Steady method uses non-combat boxing techniques. It improves strength and agility to help with motor coordination and promotes neuroplasticity for slowing the progression of Parkinson's," said Jackson.

Jackson said that the boxing regimen is more endurancebased with repetitious movements. Using boxing gloves and punching bags, patients are empowered to "fight back" against the disease.

In her training earlier this summer, Jackson became certified to do solo training and looks forward to getting certified in the "head coach" group training.

"This program really works. It doesn't seem like work or rehab. In the group setting, they were all having fun and not hiding impairments because they all could relate to each other," said Jackson.

Patients can also enroll in booster programs after completing training.

"We offer a transition program at the Healthplex. Once they complete the programs, they can come back. It can be an ongoing process," said Wisneski.

For Billy Shaw and Carolyn McLamb, it is comforting to know the programs are still available even after completion.

"He does all the exercises associated with the programs twice daily as homework. However, we also know that the programs can be taken again. Whenever he has a decrease in movement, he can go back. With Parkinson's disease, sometimes he will be better, but when he is off, we know we have the support we need," said McLamb.

For those living with Parkinson's, Wisneski said it is important to keep active and that exercise programs whether for speech, balance or movement are available to help

To receive more information on the programs available for Parkinson's disease or any movement disorder, visit capefearvalley.com/rehab or call (910) 615-4990.



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Medical Center campus grows to meet the COMMUNITY'S NEEDS

The Center for Medical Education and Neuroscience Institute is set to open in

January. Donors to Cape Fear Valley Health Foundation's Caring for the Future campaign will get to be the first guests through the doors of the new facility on Thursday, Jan. 12, 2023, when the Foundation will host the Grand Opening Gala. This black-tie optional event will celebrate the new building, the learning and patient care which will take place inside, and the donors who have made it a reality.

It also marks the first return of the Gala since the COVID-19 pandemic paused the event.

"This building was made possible with the community's incredible support of the Caring for the Future campaign," said Cape Fear Valley Health Foundation Vice President Sabrina Brooks. "Though the Center will soon open and welcome hundreds of new doctors to serve at Cape Fear Valley Health, we really wanted to give our campaign supporters an exclusive first look at the new state-of-the-art facility."

This year's Gala is presented by Olde Fayetteville Insurance and Financial Services Inc. Guests will enjoy music, drinks, and hors d'oeuvres while touring the building, meeting residents, and hearing remarks from hospital leaders. Since its inception in 2007, the Cape Fear Valley Health Foundation Gala has raised almost \$2,400,000 to support the needs of Cape Fear Valley Health. Proceeds raised from the 2018, 2019 and 2020 Gala were used to help support the Medical Residency Program, while a portion of the proceeds in 2015 and 2016 were for the Neuroscience Institute. Continued funding for the program will help cover operational expenses and advancements to the Simulation Center, which will provide residents hands-on training in surgery, emergency/trauma treatment, obstetrics, neonatology, intensive care and more.

While donors will get the first exclusive look at the facility, the public is invited to stop by the very next day, when there will be a ribbon cutting ceremony on Friday, Jan. 13, as well as tours of the new structure.

"We hope people bring their families to the ribbon cutting to see the impact the building and the residency program will have in our community," Brooks said. "The state-of-the-art facility will help bring hundreds of new doctors to our region, while addressing North Carolina's current physician shortage. The building will also house the Neuroscience Institute, which will offer much needed neurological care for our community. This will be a great opportunity for those who have ordered commemorative courtyard bricks to view their engraved messages."



Interested in being a Gala sponsor or purchasing a ticket?

Please contact Kristen Carpenter at (910) 615-1514 or ksellan@capefearvalley.com. Limited numbers of tickets are available.



Construction on campus shifts to Valley Pavilion expansion

Before the dust had settled on the Center, Cape Fear Valley's next expansion project began taking shape across campus. The vertical growth of the Valley Pavilion section of the medical center began with site prep work in September, but construction will really take off starting in November when the first of two massive tower cranes is erected near the main entrance to the hospital.

This two-year project will add two new floors to Valley Pavilion and 100 beds to the facility's capacity. The construction project has been an anticipated part of the health system's long-term planning, and when completed, will create an additional 187 full-time equivalent positions at the medical center. This is the first major expansion to the main campus' central building since 2008, when the five-story Valley Pavilion opened.

The expansion is expected to be completed in Fall 2024. About 40 percent of the new beds will be designed as ICU beds, with the remaining beds designated for medical/surgery inpatient and observation. All of the beds will be located in private patient rooms. The additions will raise Valley Pavilion from five to seven stories. Plans also call for the inclusion of two rooftop helipads, which will allow patients to be taken by elevator directly into the hospital emergency department. Currently, the hospital's helipad is located on the front lawn, and patients must be transported less directly from the helipad into the building.

"We recognized that we need this expansion to meet the growing needs of our community, and to provide meaningful assistance to reduce delays in our Emergency Department," he said. "We expect that this will dramatically improve wait times in the ED," said Cape Fear Valley Health CEO Michael Nagowski.



New electronic medical records system unrolls at Harnett Health

After nearly a year of preparation, Harnett Health has fully switched to a new electronic medical records (EMR) system that will benefit not only the health system, but patients as well.

Called Epic, the software went online in Betsy Johnson and Central Harnett Hospital on October 1 after a tremendous amount of planning. The conversion involved many of Cape Fear Valley Health's top Information Technology team members aand more than 360 clinicians at Harnett Health. Cape Fear Valley Health's hospitals and clinics have been using Epic, and its companion software, the patient portal MyChart, for three years. Harnett Health's outpatient clinics started using Epic in December 2021, so getting Harnett's hospitals online with Epic was the last step of fully integrating the EMR software throughout the health system.

The end result is a new records system that provides a more tightly integrated technology platform to match what the rest

of Cape Fear Valley Health transitioned to in 2019. Epic is used by several of U.S. News & World Report's top-ranked hospitals and about 300 million patients have a current electronic record in Epic.

Organizations using Epic can seamlessly interoperate. That means they can easily exchange patient data, which closes treatment gaps and reduces duplication of services.

Providers can use Epic to more easily view the story of a patient's healthcare over time. The software platform's key feature is its ability to maintain just one electronic medical record per patient, versus several. This can improve the care they provide. Electronic medical records, or EMRs, are digital versions of the traditional paper charts once used in all doctors' offices, clinics and hospitals. Patients can likewise easily view the record of care they received through the efficient patient portal, MyChart.

EMRs do far more than paper charts, however. They can track patient data in real time over long periods. This allows providers to analyze how a patient's treatment progresses. The digital records can also identify patients for preventive office visits and screenings and automatically send appointment reminders. The added functionality makes EMRs actual care-providing tools.

Epic records go a step further. They contain complete patient health histories from a primary hospital, as well as other facilities where the patient receives care. That includes physician offices affiliated with the hospital.

Now that both Harnett hospitals – Betsy Johnson and Central Harnett – the emergency department and clinics at Harnett Health use the Epic system, every health system provider has all the information they need to treat patients from one system, regardless of the clinic or hospital where the patient is seen. The information includes patient medications, allergies, immunizations and test results.

Epic also replaces numerous other software systems the Harnett Health system used, including those for patient billing. The switch consolidates bills into one combined hospital and physician clinic statement. Bills are easier to pay online, as a result.

Phill Wood, Cape Fear Valley's Chief Information Officer, says the Epic name is fitting because the new software affects nearly every aspect of patient care at Cape Fear Valley.

"This is going to be a game-changer for Harnett Health," he said.

Patients will also benefit from the software switch because of Epic's MyChart, the free online patient portal that allows users to view test results, update information, communicate with providers, and manage their appointments and prescription renewals with a single password.

Android and iPhone users can even download a MyChart app directly onto their phone.

Many patients who have tried it have been amazed by MyChart's accessibility. If a patient is injured or hospitalized out of town, chances are the treating hospital also uses Epic. Roughly 80 percent of hospitals in North Carolina are on the Epic network, and 33 percent of acute care hospitals in the U.S. use it.

The vast coverage means those hospitals have nearly instant access to the same patient medical records, versus having to request records stored on a different platform. The wait time – no matter how short – can be pivotal during emergencies.

Physicians also have 24-hour access to the records. They can log into the Epic network using a dedicated physician portal.

Wood urges Harnett Health patients to sign up for a free MyChart account as soon as possible.

"It truly puts patient records in the patient's own hands," he said.

To sign up for Harnett Health's MyChart, visit www.capefearvalley.com/mychart.



Manage Appointments

Schedule new appointments or view details about past and upcoming appointments.

Request Prescription Renewals
 Send a request for any renewable prescription.

Cancel Appointments

Patients on a waitlist can be notified via text when an opening becomes available and can reschedule their appointment for the new opening.

Access Test Results

View results and doctor's comments within days. No more waiting for a phone call or letter.

Communicate With Your Doctor

Get answers to medical questions without having to call or scheduling unnecessary appointments.

► Pay Bills Online

Access and pay copays and bills from home.



BREXKING ground

Cancer care expanding at **Harnett Health**

by Jami McLaughlin



A new comprehensive cancer center in

Lillington will soon break ground, bringing new radiation oncology services to the Harnett Health campus.

The expansion of medical oncology services and the addition of radiation oncology services have been planned and long-awaited, according to Cory Hess, President of Harnett Health. The area's aging demographic and growing population, especially in the Lillington area, have pointed to the need to expand the cancer center in Harnett County.

"There is a growing number of patients who need oncology services in Harnett County. Currently, they are driving or being driven to Fayetteville or Raleigh," said Hess.

Radiation oncology services are needed by almost half of all cancer patients in the course of their treatment. The new center will serve all of Harnett County, but will meet the greatest need with the growth in Lillington.

"Our clinic has grown exponentially," Hess said. "Some days we are at capacity, and we've seen an uptick in patients needing oncology services. It makes sense to have a comprehensive cancer center in Lillington," said Hess. "This center will be adjacent to Central Harnett Hospital on the Lillington campus."

"Cancer is one of the leading causes of death in this country. This is not a service sought on an elective basis. If it happens, we want you to have high-level care with necessary services close to home."

Currently, the Harnett Health Cancer Center is located inside Central Harnett Hospital. A new standalone facility will also give patients a more seamless appointment process and easier access to their doctors and treatments without having to go inside the larger hospital. Over at Dunn, near Betsy Johnson hospital, the Harnett Health Breast Care Center, which is nationally accredited by the American College of Radiology for Mammography Services, will continue to provide mammograms as well.

Kanwar Singh, the Executive Corporate Director of Oncology Services, who oversees all cancer centers in Cape Fear Valley Health System.

"Cancer is one of the leading causes of death in this country," Singh said. "This is not a service sought on an elective basis. If it happens, we want you to have highlevel care with necessary services close to home."

Singh says it's not always possible to find a cancer center close to home, but strategically locating this new addition in a growing area will help patients.

"These are daily or weekly treatments with follow-up appointments," Singh said. "It can be a lot of travel for patients, especially those who have to travel on a day-today basis. This will help to bring those treatments closer to them."

The hospital does help with transportation services on a need-by-need basis through a grant given by the American Cancer Society. However, the frequency of travel can put a strain on patients.

According to Kelli Stewart, who helps administer the transportation vouchers for the hospital, the vouchers are measured in one-way trips. There have been over 930 one-way trip vouchers given out since May.

Hess said the health system hopes to recruit and retain more specialists in the Lillington area, including at least one radiation oncology provider to add to the current staff. Madhuri Vithala, MD, is the medical oncologist at the current Harnett Health Cancer Center.

"We will have dedicated physicians at each site. These are highly technical services, and we want to offer our patients the best care," said Singh.



Vascular surgeons Robert Albrecht, MD, and Thomas Beadle, MD, have joined Cape Fear Valley Health to lead the system's first vascular clinic. Cape Fear Valley Vascular Specialists is a new option for local patients seeking treatment for a variety of circulatory issues, such as varicose and spider veins, dialysis access management, abdominal aortic aneurysm (AAA), peripheral vascular disease (PVD), carotid artery stenosis and more.

Dr. Albrecht has been working in eastern North Carolina since 2005, while Dr. Beadle comes to the clinic from Texas, though he's no stranger to the state.

"I have close family and friends in North Carolina and I lived in North Carolina when I was young," Dr. Beadle said. "I also graduated from Davidson College, near Charlotte. I'm looking forward to being back in North Carolina!" After Davidson, he attended New York Medical College, in Valhalla, N.Y., before completing residency at Tulane University, in New Orleans, followed by a fellowship at Baylor College of Medicine in Houston, Texas.

Like his partner, Dr. Albrecht also spent time in New Orleans. He attended Louisiana State University School of Medicine before completing a residency at The Brody School of Medicine at East Carolina University and a fellowship at Johns Hopkins, in Baltimore, Md. He's also worked at other health systems in the region.

"What drew me to the specialty was the excellent mentors and surgeons in the field who I worked with during my training years," Dr. Albrecht said. "I'm looking forward to providing a location where patients have caring staff as well as ease and convenience with all their vascular care in one location for seeing specialists and performing testing. I've also always enjoyed healthcare for older and geriatric patients."

Dr. Beadle said he found his interest in vascular surgery because of the variety of treatments. Procedures range from minimally invasive interventions to open surgery.

"Nothing is ever boring," Dr. Beadle said. "Each individual patient is quite different. Furthermore, unlike most surgeons, Vascular and Endovascular specialists follow patients long-term, often for life, so we are able to develop unique physician-patient relationships."

Despite being surgeons, both stress that patients should understand that surgery is only part of what they do. And often they don't need to do any surgery.

"A vascular surgeon only sometimes does surgery," Dr. Albrecht said. "Patients shouldn't worry that when they are coming to see us it means they need surgery. Often we find that medical therapy is the most appropriate therapy, or a minimally invasive approach with catheter procedures, such as angioplasty or stenting."

The nonsurgical half of what vascular surgeons do is called endovascular procedures, meaning there are no incisions. And many can be performed on an outpatient basis, with no hospital stay needed.

"But because we are skilled in performing open surgical procedures, we are able to provide the full array of vascular care when it's called for, and we are the only medical specialists who can do so," Dr. Beadle said.

Patients who do need surgery are reassured to know that the surgeons of Cape Fear Valley Vascular Specialists have focused years of training on vascular surgery as well as their specialized practice, which allows them to stay upto-date with all the latest research and techniques needed to provide specialized care in this field.

"Our patients will be offered the best and most appropriate treatment or advice for their particular need," Dr. Albrecht said. "All our focus and attention is strictly on vascular care and treatments. Vascular surgery has changed dramatically over the past 25 years, and it is always exciting to see where it takes us, and share that excitement when we help train and educate medical students and surgical residents."



1251 Oliver Street, Fayetteville

Monday – Thursday, 8 a.m. to 5 p.m., Friday, 8 a.m. to noon.





Serving our community

Free health clinic returns with Umoja Festival

Cape Fear Valley Health was honored to return to Fayetteville's Umoja Festival this summer, which joyously returned from its COVID-19 hiatus. Over a space of four hours on Aug. 27, more than 100 people participated in a free health clinic, which was held inside the Arthur D. Smith Recreation Center at Seabrook Park.

Participants received free health screenings, including glucose, cholesterol, sleep, body mass index (BMI), lung function and blood pressure, as well as instruction on hands-only CPR. Following their screenings, participants had the option to receive a free consultation from a doctor, thanks to the residents from the Graduate Medical Education program. Afterwards, participants received a free camping chair.

Thank you to all who participated and attended the Umoja Festival this year. We are proud to continue our involvement and partnership in an event that offers so much to the community. We can't wait to be part of next year's event!





NICU renovations complete

The Neonatal Intensive Care Unit (NICU) at Cape Fear Valley Medical Center was recently renovated, which included the relocation of its entrance. Visitors to Pediatrics, Pediatric Intensive Care Unit (PICU) and the NICU can now access these units more directly than in the past, without going through an adult unit. Visitors will be given instructions on how to access these units at the front desk.

Cape Fear Valley Podiatry – Foot & Ankle Specialists has new Lumberton location

Cape Fear Valley Podiatry – Foot & Ankle Specialists has a new location at 588 Bailey Road, Lumberton. **Patrick Ricotta, DPM, Hannah Sahli, DPM,** and **Phillip Ward, DPM,** will see patients at the new location Monday through Thursday, from 8 a.m. to 5 p.m., and Friday, from 8 a.m. to 1 p.m.

Service areas for adult and pediatric patients include, but are not limited to: diabetic foot care, routine nail care, plantar fasciitis treatment, sports injuries, and ingrown nail procedures. We also offer specialty services for adult and pediatric patients that include foot & ankle fractures, bunion reconstruction, hammertoe reconstruction, flat foot reconstruction, charcot reconstruction, wound care and limb salvage.

For appointments in Lumberton, call (910) 738-4811. For more information or to schedule an appointment with any of our locations, call (910) 484-4191 or visit capefearvalley.com/findadoc.

Use this Spirit of Children Coupon and Donate

Save on Halloween décor, costumes *and* be a champion for children! Shop at Spirit Halloween in-store or online before October 31, and use the code CARING22 or coupon below and Spirit Halloween will donate 10 percent of your total to Child Life Programs at Cape Fear Valley! Last year, Spirit of Children donated more than \$40,811 to Children's Services and Child Life Programs.

Participating stores are located at 1748 B Skibo Road in Cross Creek Plaza (by Conn's Furniture and Ross) and 4118 Raeford Road (across from Ireland Drive). For more information, contact Brittany Dickerhoff at bdick@capefearvalley.com.



Pediatric Diabetes Games set for Nov. 19

Lace up your shoes and join us for some friendly competition! The 2022 Diabetes Games will be held Saturday, Nov. 19, from 9 a.m. to 1 p.m., at Methodist University's football field. This is a free event. Register at www.sweetkidswithdiabetes.com. People interested in volunteering at this event should email Brunilda Cordero, MD, at bcord@capefearvalley.com.

Stanton Hospitality House

Stanton Hospitality House is a private nonprofit organization that provides "home away from home" to families of inpatients and outpatients receiving medical treatment in area hospitals. It is a temporary residence that allows the entire family to stay together in times of crisis.

The network of support, comfort and compassion offered to guests greatly reduces the emotional and financial stress of their ordeal.

For more information on the Stanton Hospitality House call (910) 491-0721.

CORRECTION:

The Summer 2022 issue incorrectly reported that unveiling had occurred for the Sheriff Hubert A. Peterkin bronze plaque to mark the naming of the Community Room at Cape Fear Valley Hoke Hospital in his honor. This event is planned for Tuesday, Oct. 25, from 10 a.m. to noon. For more information on this or to make a gift to this scholarship fund in honor of Sheriff Peterkin's legacy, call (910) 615-1285.



CAPE FEAR VALLEY HEALTH: NEW physicians

Interventional Cardiology

Medical Degree: Dr. NTR University of

Residency: Marshfield Clinic, Marshfield,

Fellowship: Creighton University School

of Medicine, Division of Cardiovascular

Raviteja Guddeti, MD

Fayetteville Heart Center

Health Sciences, India

Haile Jones, MD

Carolina Heart and Leg Center

Medical Degree: Temple University

School of Medicine, Philadelphia, Penn.

Residency: Temple University Hospital,

Wisc.

Diseases



Cardiology

Nirmal Guragai, MD

Cape Fear Cardiology Associates, P.A.

Medical Degree: Kathmandu University

Residency: Trinitas Regional Medical

Center

Fellowship: St. Joseph Hospital

University





Zachary Nevolo, DO

Lillington Medical Services

Medical Degree: Philadelphia College of

Osteopathic Medicine

Residency: Suburban Community Hospital (Lower Bucks Hospital)

Program, Bristol, Penn.

General Surgery



Maryselle Winters, DO

Ferncreek General Surgery

Medical Degree: Lincoln Memorial University-DeBusk College of

Osteopathic Medicine

Residency: Campbell University, Cape

Fear Valley Medical Center



Pediatrics

Philadelphia

Alison Vurnakes, MD

Fellowship: Drexel University Hahnemann Hospital, Philadelphia

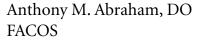
Premiere Pediatrics of Lillington

Medical Degree: UNC School of

Medicine

Residency: Levine Children's Hospital,

Charlotte



Harnett Surgical Associates

Medical Degree: Nova Southeastern College of Osteopathic Medicine

Residency: Larkin Community Hospital



Urology

Richmond A. Owusu, MD

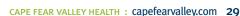
Cape Fear Valley Urology

Medical Degree: Duke University School

of Medicine

Residency: University of California San

Diego School of Medicine



PHYSICIAN briefs



Elizabeth Shaffer, MD

Dr. Shaffer named Laughlin Fellow

Elizabeth Shaffer, MD, has been named a Laughlin Fellow through the American College of Psychiatrists. This is one of the most prestigious psychiatric organizations in the country and only 12 Fellows are named each year. The fellowship runs for two years.

Dr. Shaffer is one of the Class of 2023 Psychiatry Residents at Cape Fear Valley Health.

For the Community

Mobile Blood Drives

CUMBERLAND COUNTY

Choose Health Event

1601 Raeford Rd., Fayetteville Saturday, Oct. 15

Health Pavilion North

6387 Ramsey St., Fayetteville Monday, Oct. 17

Public Works Commission

955 Old Wilmington Rd., Fayetteville Wednesday, Oct. 19

HealthPlex

1930 Skibo Rd., Fayetteville Wednesday, Oct. 19

Exit Realty Preferred-Fayetteville

3037 Boone Trail Ext., Fayetteville Friday, Oct. 21

Beaver Dam Volunteer Fire Dept

11042 NC Hwy 210, South Roseboro Tuesday, Oct. 25

Fayetteville Technical Community

171 Laketree Blvd., Spring Lake Wednesday, Oct. 26

E. Newton Smith Building

227 Fountainhead Lane, Fayetteville Thursday, Oct. 27

Highsmith-Rainey Specialty Hospital

150 Robeson St., Fayetteville Thursday, Oct. 27

Cumberland County Headquarters Library

300 Maiden Lane, Fayetteville Monday, Oct. 31

Methodist University

5400 Ramsey St., Fayetteville Wednesday, Nov. 2

Hutchens Law Firm

4317 Ramsey St., Fayetteville Thursday, Nov. 3

Autryville Volunteer Fire Department

305 N. Hotel St., Autryville Saturday, Nov. 19

T.I. Robinson Life Center

7221 Black Bridge Rd., Hope Mills Friday, Dec. 9

BLADEN COUNTY

Bladen County Hospital

501 S. Poplar St., Elizabethtown Wednesday, Oct. 12

HARNETT COUNTY

Central Harnett Hospital

215 Brightwater Dr., Lillington Friday, Oct. 14

Betsy Johnson Hospital

800 Tilghman Dr., Dunn Monday, Oct. 24

HOKE COUNTY

Hoke Hospital

210 Medical Pavilion Dr., Raeford Tuesday, Oct. 18



3357 Village Drive, Fayetteville across from the Emergency Department

Monday – Friday, 9 a.m. – 5 p.m. 3rd Saturday of every month, 9 a.m. - 3 p.m.

For more information, please call (910) 615-5433 or visit www.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 or visit www.ci-cr.com

Women's Health Study

Carolina Institute for Clinical Research is enrolling individuals in a clinical research study for women with yeast infections. Learn about a research study for women dealing with this condition. Qualified participants receive studyrelated medication and exams at no cost. Compensation for time and travel may be available.

Are you struggling to manage your depression?

Depression does not discriminate. Learn more about a depression research study for individuals at Carolina Institute for Clinical Research. Qualified participants receive study-related medication and exams at no cost. Compensation for time and travel may be available.

Want to help advance RSV research?

Older adults are more likely to develop serious complications from a cold-like virus called Respiratory Syncytial Virus (RSV). Join a clinical trial to help us research an investigational study vaccine to prevent RSV disease.

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.

Protect yourself and loved ones against the flu

Getting vaccinated can help prevent flu spread and health complications. Protect your family, consider a vaccine clinical research study at Carolina Institute for Clinical Research. CICR invites adults age 65+ to join a flu vaccine research study. Participants will be compensated for participating in this study.

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, Favetteville

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.

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.

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.

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.

Stroke Survivor Support Group

Meets the third Wednesday of each month.

3 p.m.

Cape Fear Valley Rehabilitation Center, in the Physical Therapy Gym

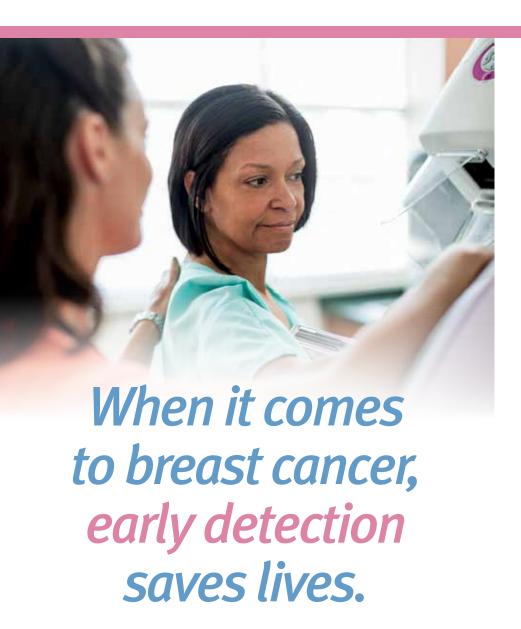
For more information, please call Vicky Parker at (910) 615-4344.





P.O. BOX 2000 FAYETTEVILLE, NC 28302-2000

capefearvalley.com



One in eight women will develop breast cancer in her lifetime. That one could easily be you or your loved one. In fact, breast cancer is the most common cancer in women worldwide.

Cape Fear Valley's Breast Care Center is here for you – for peace of mind, early diagnosis and treatment, or support. Most importantly, the Breast Care Center is here to make you one of the 3.5 million breast cancer SURVIVORS in our country.

Regular mammograms are important to beating cancer before it sneaks up on you. To learn more about where you can schedule your mammogram, visit capefearvalley.com/mammogram.

Patients who receive mammograms at any of our locations during October will receive a small token of appreciation.

Early detection is vital!

