

McLeod

Volume 30, Issue 4, 2015

magazine

30 Years

30TH
ANNIVERSARY
EDITION



Elizabeth Hyman

Views



Rob Colones

It is a privilege to present our special 30th year Anniversary Edition of *McLeod Magazine*. Throughout these pages, and from the thousands before, you are given the opportunity to enter into the very personal accounts of medical journeys and recovery. As we look to a new year, McLeod Health celebrates yet another milestone -- 110 years of service to a community who has entrusted us with their care. We remain committed to our mission of

improving lives with compassion and excellence. We are guided by our four core values: Caring, the Person, Quality and Integrity. Thank you for choosing McLeod for all your health care needs, now and in the future.

Robert L. Colones

Rob Colones,
President, McLeod Health

PORTRAITS OF HOPE:

Listen to these individuals share their personal experiences about compassionate and exceptional cancer care at McLeod.



Elizabeth Atkinson



Betty Moore Bell



Penny Bonnoitt



Deb Colones



Bill Hester



Elizabeth Hyman



Marilyn McDonald



Linda Russell



Scan the QR code to watch each touching story

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It began as a commitment to the Mission of McLeod. It continues as a passion to tell the stories of healing and hope, which reflect hearts and hands of service.

During the fall of 2015, *McLeod Magazine* celebrates 30 years of publication, delivered to nearly 35,000 households and distributed to hundreds of others seeking encouragement and health education.

From its inception, *McLeod Magazine* has shared patient victories and voices. This periodical also recounts innovations in health care treatment, welcomes new specialties and specialists, celebrates extraordinary outcomes and spotlights medical excellence.

An award winning publication, read widely from the Midlands to the Coast, *McLeod Magazine* was first conceived in 1985, as the brainchild of then McLeod Marketing and Public Relations Director Deborah Colones.

"Our magazine was a gift, to offer written snapshots about compassionate care, highlight new forms of treatment, and provide hope to others through the eyes of our patients and their families," stated Deb.

That purpose, a sacred relationship with our readers, continues today, three decades later.

In reality, *McLeod Magazine* was only one of the many accomplishments for Deb during her service as a leader in the McLeod Health organization, from 1982 to 1995, as both the magazine editor and as director of marketing strategies that differentiated McLeod services throughout the region.

Under the leadership of past McLeod President and CEO Bruce Barragan, Deb initiated the first advertising campaign for the McLeod Cancer Center for Treatment and Research in 1982, which led to a 21 percent increase in the percentage of the community choosing McLeod for cancer care by 1984.

Additionally, in the late 1980's, Deb spearheaded efforts to increase awareness about the quality and offerings of our dynamic McLeod Heart Institute, Children's Hospital and Women's Services. Her leadership, energy and insights, set the precedent for sharing the vision in such a positive way.

As we celebrate our third decade, we honor Deb Colones for being the catalyst in the movement which encourages others on their health journeys. Her own story comes full circle captured in the adjacent article, which gives her personal testimony of lifesaving cancer care at her beloved McLeod.

We are grateful for her candor and courage. We continue the commitment to the provision of hope through these shared experiences.

McLeod Magazine dedicates this 30th Anniversary Issue to Deb Colones, our first Editor and founder of this special publication.

~ Editor, *McLeod Magazine*



30TH ANNIVERSARY EDITION

YOU ARE NOT ALONE

by Jumana A. Swindler

"Life is hard, but God is good." That is the very core of the heart and message shared by Deb Colones, as she relates her cancer journey during the past year of diagnosis to recovery.

Deb may be known by others in the hospital community for her previous vocation as a marketing director for McLeod Health two decades ago. Since that time, she has transitioned to a far greater avocation, in her personal ministry as a mother of three sons, church and Bible Study leader, supportive wife to an extraordinary healthcare executive and friend to many who seek her wise counsel.

"We were never intended to walk through life's trials alone. None of us are. God is the Father of all comfort and compassion....and He comforts us so that we can comfort others," says Deb. This is the reason, she admits, for the detour she has taken on the difficult road of a cancer journey.

"January of 2014, I discovered a lump in my right breast. It was a Thursday evening. I awoke early the following morning and was on the phone at 7 a.m. scheduling a mammogram. I was able to have a mammogram that day. In fact, wonderfully, McLeod Radiologist **Dr. Cheney Meiere** was on duty and he performed a biopsy that afternoon.

(continued on next page)

Deb Colones



"Then, I went through the weekend wondering, 'is this Cancer or is it not.' On Monday, I got the call from **Dr. Dale Lusk**, my OB/GYN, that he wanted to meet with Rob and me in his office. It was then that we pretty much knew it was not going to be good news," Deb recalls. However, she added, they had prayed for an answer and this was it.

"That was a low point, for somebody who, probably like most of us, thought I will never have cancer. But now, I have cancer and have to face the challenges to mind, body and soul ahead."

Deb, typically an extremely healthy individual dedicated to exercise, good nutrition and wellness activities, including preventative health, now confronted a healthcare crisis of her own. A caregiver to others, it was now even more personal.

The cancer was a malignant stage two, invasive, aggressive carcinoma. Deb immediately scheduled an appointment with McLeod Surgeon **Dr. Amy Murrell**.

"At a time I needed it most, Dr. Murrell infused such confidence and hope. 'We got this, we can do this,' she said to us. It made a world of difference in my outlook," she recalls.

Deb had surgery, choosing the option of a lumpectomy, but they were not able to get all the cancer. So another low point came when she had to make another difficult medical treatment decision -- a bilateral mastectomy. Deb resolved to

"Go aggressive, be aggressively optimistic," she said.

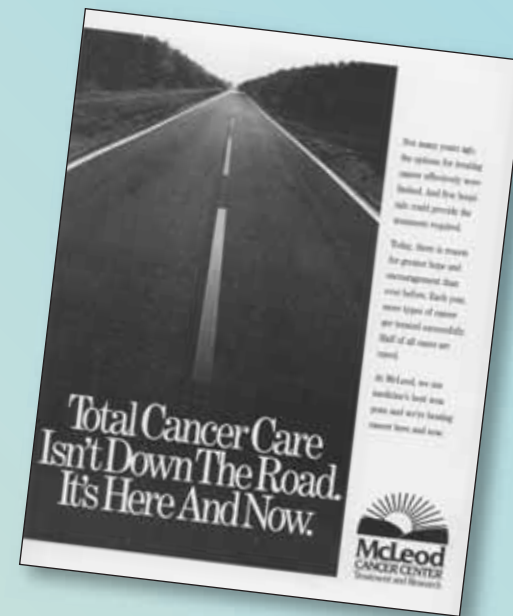
"No two people have the same cancer journey. It is all very personal, very real and very different. To me, my bottom line is that God got me through it. So it really is about my faith." And, that wavered not, she confirmed, throughout months of surgery, treatments and therapies.

Deb was confident in the skills and guidance of her superlative medical team, the surgeons, oncology staff and her oncologist, **Dr. Michael Pavy** -- with whom she had worked professionally in marketing the advent of the Cancer program three decades earlier.

In addition to finding strength through her Savior, Deb attributes her further recovery to support from family -- particularly her husband, Rob, and three sons who were tireless in their devotion -- as well as friends, a close knit Cancer Support Group which meets routinely and the inspiring words by her late, dear friend Barbara Barragan.

"I will never forget what Barbara shared during her own battle with cancer. 'Deb,' she said. 'I cannot wait to wake up each day to see what kind of treasure or gift God has for me to unwrap and discover or experience.'"

"As a non-Cancer person at the time, it was a bit of a foreign thought until my own experience. Then, I had that same discovery -- understanding the treasures



The cancer journey has come full circle for Deb. She developed the first advertising campaign for the cancer program at McLeod and now has personally experienced that care.

along the path that no one would choose. Treasures from our Father who does not want us to walk any path alone," said Deb.

It helped Deb get in the right mindset, to attack the cancer without the cancer robbing her of the joy in life.

"Through it all, I knew I was lifted by prayers. Cards and letters and support and prayers from people I didn't know came pouring in... and peace carried me. Thanksgiving totally overflowed the entire situation. And, being a woman of faith, I had a challenge to put feet to my faith. It's one thing to say it, but am I going to live it when things are hard?"

Deb continues to speak openly as a cancer survivor, reaching out and responding to those who may be prone to despair due to their circumstances. She often reflects on the knowledge that she could trust in the medical care and treatment locally.

"It gave me hope to know that we have the very best here at McLeod and in this region. That we have the very best in a compassionate team. I knew I was in the right place at the right time."

Her faith is pivotal to who she is. An overcomer, and recent Cancer Survivor, Deb adds, "No matter how dark the night, no matter how difficult the road. God has not left us alone. You are never alone."



Deb enjoys an active lifestyle before cancer and as a cancer survivor.

McLEOD CENTER FOR CANCER TREATMENT & RESEARCH

2015 McLeod Health Cancer Report

OUR MISSION

The mission of McLeod Cancer Services is to provide holistic, high-quality and service-oriented care, education and research to oncology patients and their families in a safe and efficient manner.

OUR PHILOSOPHY

We believe that each person is a unique individual, entitled to clarity, dignity, honesty and respect. As part of our commitment to quality, we conduct clinical research and reach out to the community we serve. We recognize the intricacies of a cancer diagnosis, and understand that an individual with cancer is not only being treated for the disease itself, but is a complex human being whose diagnosis impacts the whole person, physically, emotionally and spiritually, as well as the entire family and support system. Our goal is to provide care, education, and avenues of support to address these complex needs in a professional, yet comforting, environment. We are dedicated to compassionately serving all those who come to us and believe not only in the power of knowledge, but also in the power of perseverance and hope.



Rajesh Bajaj, MD

LETTER FROM THE CHAIRMAN OF THE McLEOD CANCER COMMITTEE

As Chairman of the McLeod Cancer Committee, I am pleased to share our Annual Cancer Report for 2015. The data presented is based on 2014 statistics. Last year, we diagnosed 1,410 new patients with various types of cancer. Our top five sites diagnosed, in order of prevalence were breast cancer, lung cancer, prostate cancer, colorectal cancer and other genitourinary cancers.

These statistics are compiled by the McLeod Cancer Registry. Our Cancer Registry has been recording statistics on cancer patients diagnosed and treated in our region for more than 63 years, making it the oldest one in the state. This is an essential component of our accreditation with the American College of Surgeons' Commission on Cancer. McLeod also remains the only Comprehensive Community Cancer Program accredited in this region, a distinction we have held since 1977.

At McLeod, we established a comprehensive Lung Cancer Screening Program in 2014. Our hope is that more patients will be diagnosed at earlier stages of the disease by being screened. Smoking cessation also remains an integral part of lung cancer prevention and its role is again stressed in our comprehensive lung cancer screening program.

In addition to screening for lung cancer, newer techniques are making surgery less invasive. Endobronchial ultrasound directed biopsies and navigational bronchoscopy are helping us diagnose and determine the stage of the cancer more easily.

Minimally invasive surgery for diagnosis and treatment has also made the surgical approach to treatment better for the patients. All of these techniques are available at McLeod.

In 2014, we also introduced Stereotactic Body Radiation Treatment at McLeod. This technology allows for treatment of many small lung cancers in patients who are otherwise not candidates for surgery because of existing medical conditions such as heart disease. Another benefit to the patient of using this system to treat lung cancer is that it requires fewer treatment sessions. This form of radiation therapy can be performed in a single treatment session or as few as three to five as opposed to 25 to 30 treatments with conventional radiation.

Patients with advanced lung cancer are now routinely evaluated for the possibility of receiving targeted therapies rather than chemotherapy. Immunotherapies have also recently been approved and we are starting to use them in patients to boost up their own immunity to fight cancer while minimizing side effects typically seen with chemotherapy.

McLeod remains committed to be the center of excellence in the treatment of most types of cancer commonly seen in our region. The ability to have state-of-the-art diagnostic capabilities and cancer treatment delivered by our highly trained and compassionate team locally means that our patients can receive care close to home surrounded by their support team of family and friends.

Here to Guide You, Care for You and Fight for You

The McLeod Center for Cancer Treatment & Research is the region's only center approved as a Comprehensive Community Cancer Program by the Commission on Cancer of the American College of Surgeons. This is a distinction that McLeod has maintained for more than 35 years. In addition, the McLeod Breast Health Center is accredited by the National Accreditation Program of

Breast Centers (NAPBC). In 2014, the Breast Health Center received the Breast Imaging Center of Excellence designation by the American College of Radiology (ACR). The McLeod Radiation Oncology Department also holds national approval of its program. Achieving the American College of Radiology accreditation demonstrates that the McLeod Radiation Team provides the

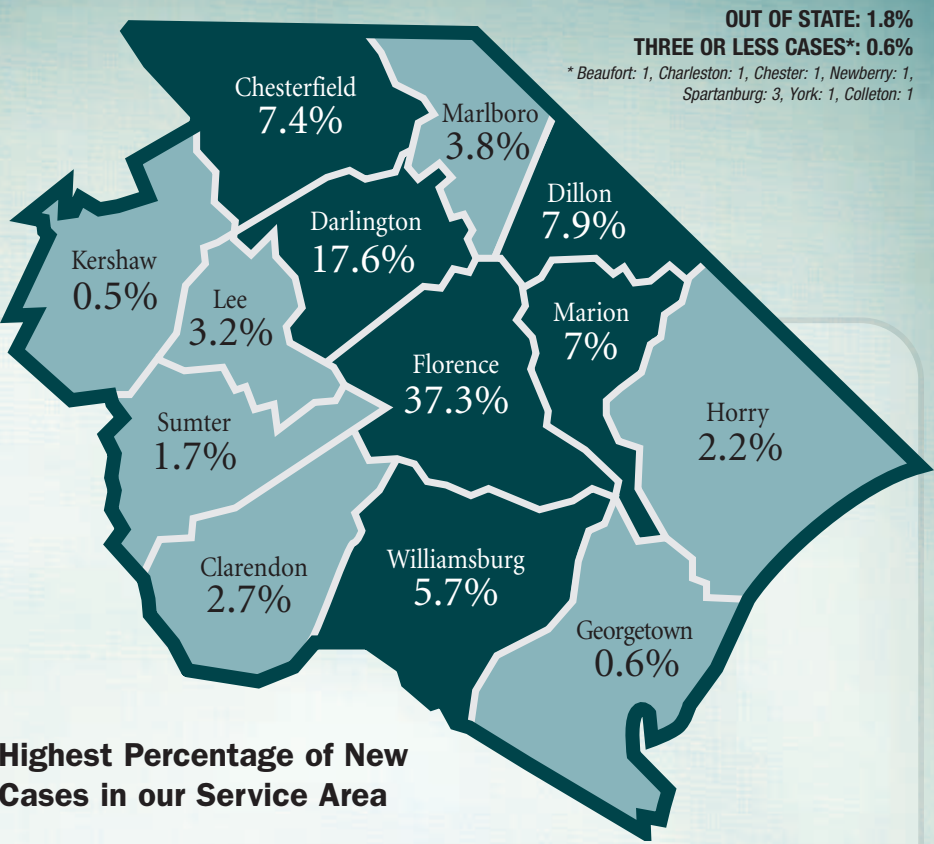
highest level of image quality and radiation safety to patients. This year, McLeod became designated as a Lung Cancer Screening Center by the American College of Radiology. McLeod is the only ACR designated Lung Cancer Screening Center from the midlands to the coast in South Carolina. Annually, the McLeod Cancer Registry Department produces a Cancer Report containing up-to-date statistics of various cancers diagnosed at McLeod Regional Medical Center during the previous year. This data provides the Cancer Center with invaluable information to track and trend outcomes for patients and the public.

In 2014, more than 1,400 new cancer cases were diagnosed at McLeod. Cancers of the breast, lung, prostate, colorectal areas and urinary system accounted for more than 69% of all cancer cases diagnosed in 2014. The following page provides a statistical analysis of the cancer cases by distribution of the five leading analytical sites diagnosed at McLeod, distribution of incidence by county and a comparison of the ten most prevalent cancer sites diagnosed at McLeod, in South Carolina and in the United States based on the American Cancer Society's Cancer Facts and Figures 2014. If you would like to receive a copy of the 2015 McLeod Health Cancer Report, please call the McLeod Public Information Office at (843) 777-2592.



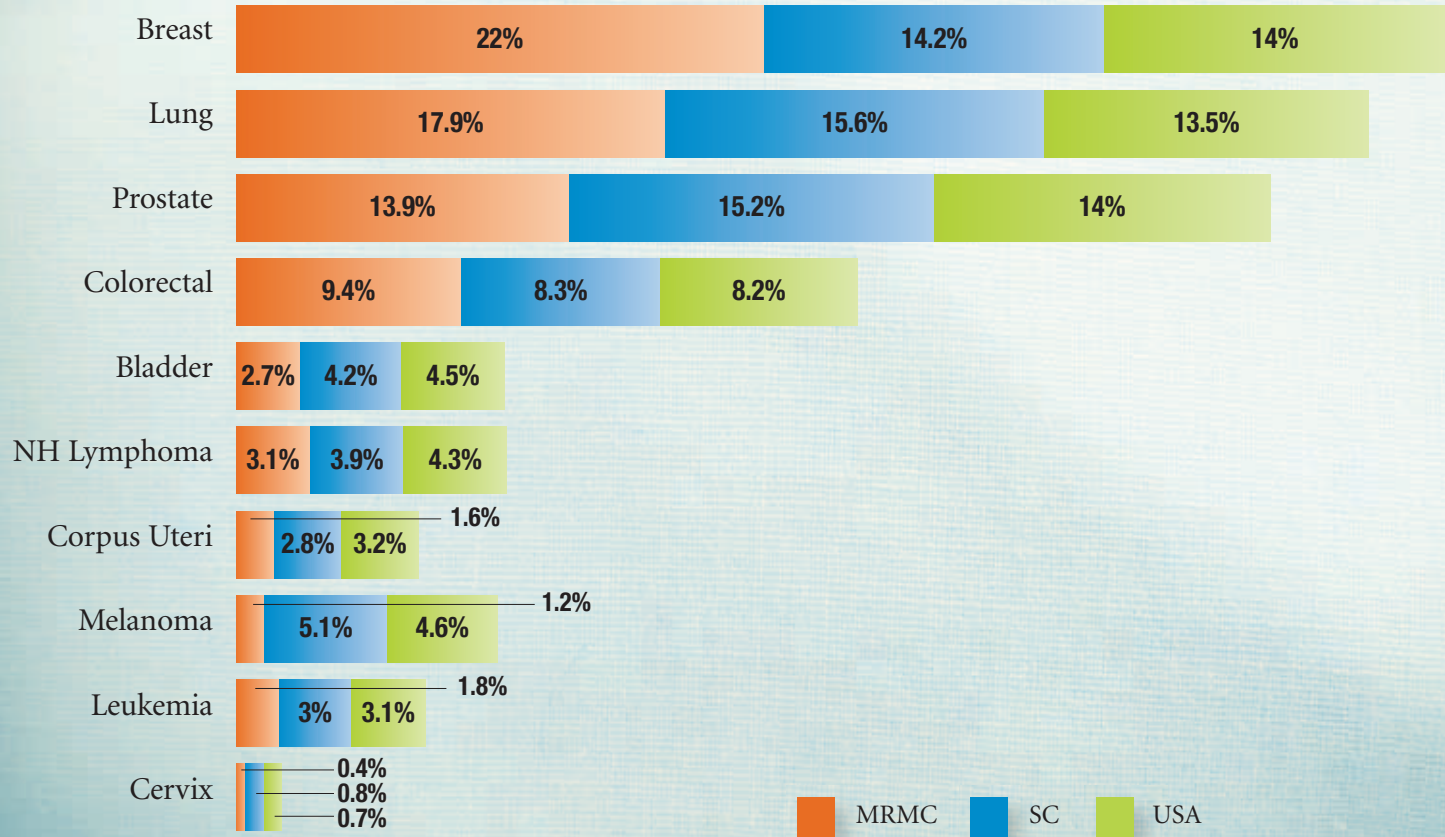
The Pavy Healing Garden at the McLeod Center for Cancer Treatment and Research provides comfort to patients and families undergoing treatment.

Five Leading Cancer Sites	
Diagnosed at McLeod in 2014	
Site	Cases
Breast	310
Lung	253
Prostate	196
Colorectal	133
Urinary System	84
Total Cases: 976	



10 Most Prevalent Cancer Sites

Source: American Cancer Society "Cancer Facts and Figures 2014"



TIMING IS EVERYTHING

by Tammy White

Charlie Nelson was awakened at 2:00 a.m. on July 29, 2015 feeling like something was sitting on his chest. He thought it might be indigestion, but woke up his wife Alice, just to be sure.



Alice and Charlie Nelson are grateful for the lifesaving care Dr. Christopher Cunningham provided to Charlie after his aorta dissected.

“Charlie can be a little dramatic about his health symptoms,” said Alice. “When he mentioned pressure and his back hurting, I thought it was muscle spasms.”

Not wanting to take any chances that his condition could be cardiac related, Alice gave her husband a baby aspirin and drove him to the nearest emergency department from their Florence home.

After several tests were administered, the Nelsons were given the devastating news by the Emergency Department Physician that Charlie’s aorta had dissected.

An aortic dissection is brought about, when the pressure of flowing blood causes layers of the artery to split internally. Charlie’s aortic dissection also resulted in critical blood supplies being cut off from his carotid arteries to his brain, left arm, kidneys, intestines and legs. Patients with aortic dissections require emergency treatment.

The Nelsons were informed that McLeod Vascular Surgeon **Dr. Christopher Cunningham** was the medical expert they needed to repair this damage.

The McLeod HeartReach Ambulance was dispatched to transport Charlie to McLeod Regional Medical Center. Charlie was comforted about his trip to McLeod when he saw Chireen Hyler, RN, a long time acquaintance of his was a member of the HeartReach team.

A local teacher for 45 years, there are very few students and parents in the Florence community who do not know Charlie or as he is more well known -- Coach Nelson. He has served as an instructor and tennis coach at West Florence High School for 32 years.

“I didn’t realize how serious Charlie’s condition was until Dr. Cunningham said very urgently, ‘We have to go. You say your prayers and I’ll say mine,’ as he was leaving for the OR,” said Alice.

The tear of Charlie’s aorta was treated endovascularly through an artery in his leg. “Using X-ray imaging to guide us to the tear, we used a catheter wire to place a stent graft where the tear had occurred,” explained Dr. Cunningham. A stent graft is a cloth tube supported by a metal conforming structure that seals the tear and directs the blood flow down through the strengthened area, restoring blood flow to the other arteries.

“During surgery, the Operating Room staff kept me informed of how Charlie’s procedure was progressing, which was really comforting,” said Alice.

Charlie recovered from surgery in the Heart and Vascular Intensive Care Unit where he was cared for by a superlative team of nurses. “The nurses at McLeod do more than provide care,” said Charlie. “They offer kinds words and comforting hands -- anything to make you feel better.”

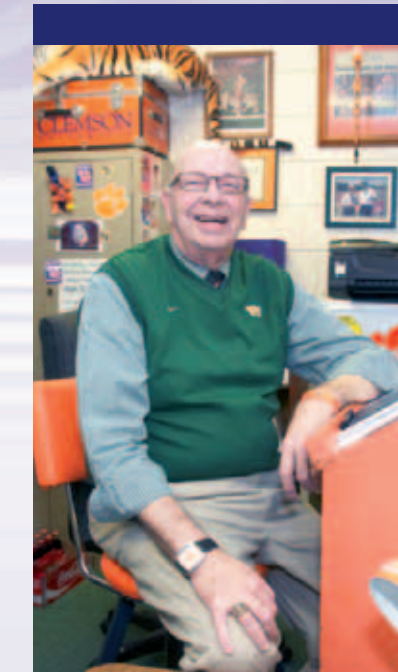
“I was also touched by the numerous prayer chains for me at schools in Florence and even three different churches. The amount of people I had praying for me was fantastic.

“I finally realized the seriousness of what Dr. Cunningham had done for me when several physicians who were involved in my follow-up care commented on how Dr. Cunningham had saved my life. Alice and I think Dr. Cunningham is a wonderful man. I give credit to God for putting Dr. Cunningham and I together that day,” added Charlie.

“They say timing is everything,” said Alice. “Charlie had just returned from a coach’s clinic in Greenville. Dr. Cunningham was two days away from vacation. I’m extremely thankful that if this had to happen we were at McLeod where Charlie could get the best care available.

“I can’t imagine anyone going out of town for heart and vascular care when we have the cardiovascular experts in Florence right here at McLeod,” added Alice.

On October 19, 2015, Coach Nelson returned to his West Florence classroom teaching Sports Medicine. He is very happy to be back with his students and co-workers, and thankful for second chances.



“I finally realized the seriousness of what Dr. Cunningham had done for me when several physicians who were involved in my follow-up care commented on how Dr. Cunningham had saved my life.”

– Charlie Nelson

Exceptional Care

WHEN THE UNEXPECTED OCCURS

by Kristie Salvato Gibbs

Collins Moser of Florence, South Carolina, has always been healthy and active. Feeling sick was never an issue for him until early one morning in September of 2014. While driving to work at his son’s business in Society Hill, Collins began to experience excruciating pain in the lower part of his stomach. The pain was severe and would not subside.

Collins Moser and his wife, Frenchie, are grateful for the excellent surgical care provided by Dr. Craig Selander, at left, and McLeod.



Collins could not imagine what was happening, but he knew by the intensity of the pain something was significantly wrong.

“The pain would not ease off,” said Collins. “As it continued to worsen, I broke into a cold sweat. At that point I called Frenchie to come get me.”

Collins and Frenchie, his wife and high school sweetheart, have shared many challenges together throughout their 57-year marriage. But, this experience was like no other.

Frenchie quickly drove from Florence to Society Hill and transported Collins to the McLeod Regional Medical Center Emergency Department. Upon his arrival, the medical team promptly evaluated him and ordered a series of tests.

General Surgeon **Dr. Craig Selander** of Pee Dee Surgical Group assessed Collins and determined he suffered a ruptured diverticulitis -- a rupture in the intestines allowing bowel to spill into the abdomen.

“Diverticulitis is one of two conditions associated with diverticular disease, a disease that affects the colon,” explains Dr. Selander. The other is diverticulosis, when pouches form in the walls of the intestines. Diverticulitis occurs when those pouches become inflamed.

“Rupturing of the intestines is a life-threatening condition,” continued Dr. Selander. “When this occurs, the bacteria that are normally in the intestines are released into the abdomen causing a serious infection and sometimes even death. The condition comes on suddenly and is incredibly traumatic for a person.”

Collins had no indication or warning signs that he suffered from diverticular disease. He felt completely normal that morning and then in a matter of minutes he was gravely ill. When he arrived at the McLeod Emergency Department, he was in great distress and required emergency surgery.

Dr. Selander performed an emergent colon resection surgery. He removed the portion of the intestines that ruptured and performed a colostomy -- a procedure where the intestine is sewn to an opening at the surface of the skin and a colostomy bag is attached.

“Because the intestines ruptured, it was necessary for Collins to have a colostomy bag,” explained Dr. Selander. “This also meant he would require follow-up surgery for a colostomy reversal to remove the bag and reconnect the healthy sections of the intestines.”

The first 48 hours following surgery were critical. Collins was admitted to the Trauma Intensive Care Unit where he received a heavy dose of antibiotics to treat the infection in his abdomen. He remained hospitalized for 10 days.



Dr. Craig Selander performs a colon resection at McLeod Regional Medical Center.

Once Collins returned home, he received follow up medical care through McLeod Home Health. His recovery from the first surgery went well. Seven months later, in April 2015, he underwent the colostomy reversal surgery. He has not experienced any issues since.

“Diverticular disease is particularly common in mature adults,” said Dr. Selander. “In fact, 80 percent of people have some form of the disease by the age of 80. What Collins experienced was the most severe form of the disease.

If left untreated, it could have been life-threatening.”

“At 77 years old, I had never been admitted to the hospital before this occurred,” said Collins. “I remember a nurse in the emergency room asking me what my pain level was based on a scale of 1 to 10. I told her it was a 15. This experience definitely caught me by surprise, but the medical care I received was outstanding.

“Dr. Selander was efficient and thorough. He took the time to explain all of the possibilities and told us what we could expect. He listened to us and answered all of our questions,” added Collins.

Frenchie also experienced the exceptional care provided by the surgeons of Pee Dee Surgical Group.

She was a patient of **Dr. John Gause** more than five years ago when he removed a portion of her small intestines.

“We had a great experience with everyone we came into contact with during both of our surgeries,” said Frenchie. “Dr. Selander, Dr. Gause and all of the surgeons of Pee Dee Surgical Group are wonderful. They have compassion and truly care about their patients.”

A TEAM EFFORT

by Jessica Wall

What began as a typical Saturday afternoon for the Locklair family on August 30, 2014 quickly became a day that changed their lives forever.

Two-year-old Madison Locklair, along with her mom, Katelyn, and younger brother, Bentley, had just returned home after enjoying lunch together. Madison was excited to see her father, Ricky, in the yard. Ricky had been deer hunting earlier that morning and was preparing ice for his game.

Madison and Bentley were both buckled in the car as Katelyn took the leftovers of their lunch into the house and Ricky moved his truck.

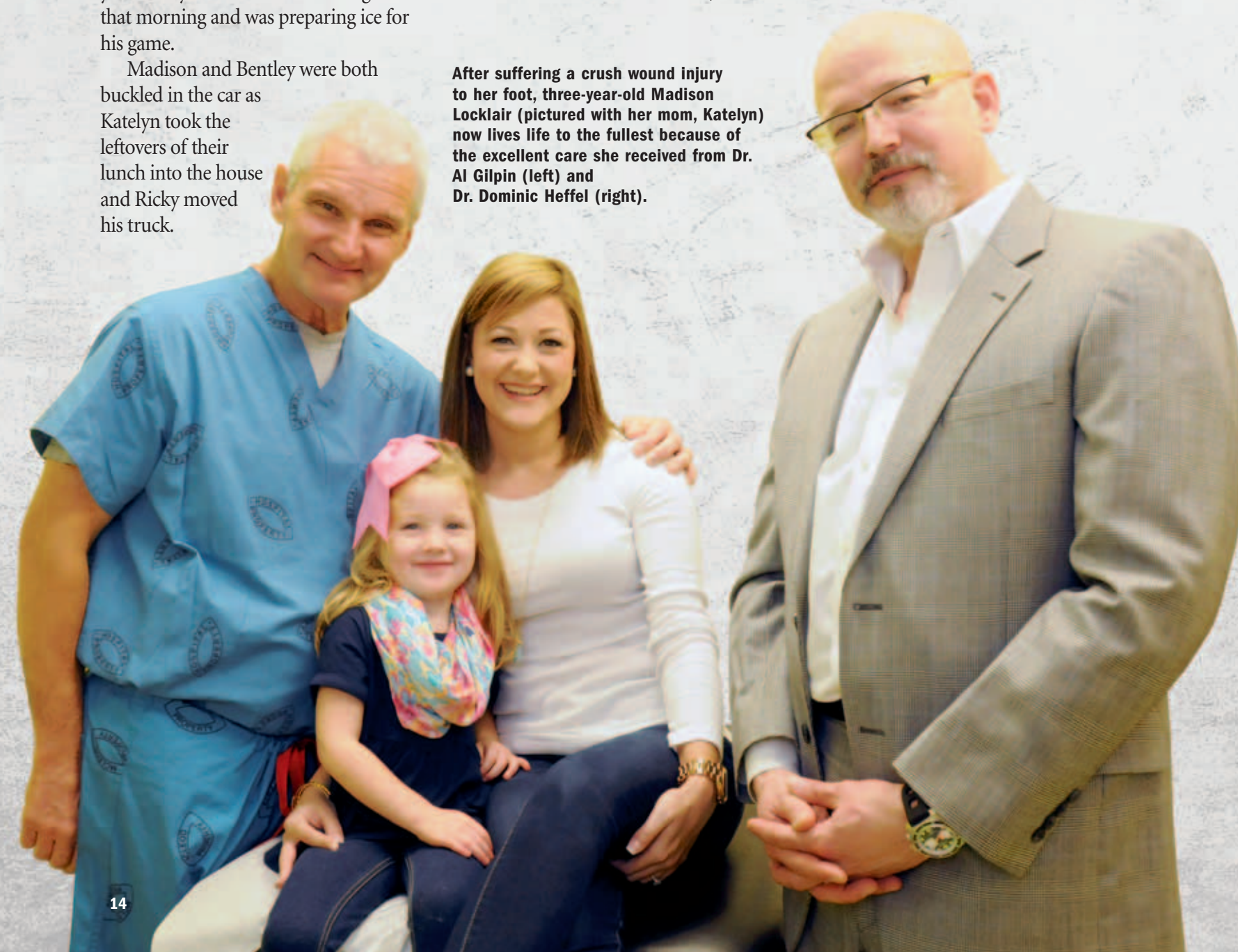
In a rush of excitement, Madison unbuckled her car seat and ran towards her dad.

Ricky did not see her until it was too late.

“As I walked out of the house, I saw

the truck knock Madison down,” recalls Katelyn. “I will never forget that moment. Ricky immediately snatched her up, and her foot was bleeding profusely. We both thought she would lose her foot.”

After suffering a crush wound injury to her foot, three-year-old Madison Locklair (pictured with her mom, Katelyn) now lives life to the fullest because of the excellent care she received from Dr. Al Gilpin (left) and Dr. Dominic Heffel (right).



Ricky rode in the ambulance with Madison, and upon arrival to the McLeod Emergency Department, Madison was immediately taken to the Operating Room.

“Madison sustained a significant crush wound,” says **Dr. Al Gilpin**, a Pediatric Orthopedic Surgeon with McLeod Orthopaedics. “She had several fractures and lost most of the soft tissue on the top and side of her foot, leaving many bones and ligaments exposed. Our immediate goal was to stabilize Madison’s foot and wash out any dirt and debris to prevent infection.”

Following the initial surgery, Madison was admitted to McLeod Children’s Hospital.

The extent of Madison’s injuries required physicians to irrigate the wound several times during the first week of her hospital stay. Dr. Gilpin then consulted with **Dr. Dominic Heffel** of McLeod Plastic and Reconstructive Surgery to discuss a treatment plan for restoring the soft tissue Madison lost.

“Dr. Gilpin and I often consult each other on pediatric cases,” explains Dr. Heffel. “The team approach allows physicians with different training to share multiple ideas and determine the best solution for our patients.

“Madison would eventually need a skin graft, but first we had to cover the ligaments and bones with enough soft tissue so that the skin graft could live,” stated Dr. Heffel. “As a result, we applied INTEGRA™ Matrix.”

INTEGRA™, a special dressing with silicone on one side and collagen on the other, essentially replaces the dermis, the second layer of skin which contains many important structures, including blood vessels and nerves. This unique dressing allows the soft tissue from the wound to grow into the collagen, allowing the plastic surgeon to determine if a skin graft could live.

The first application did not take, which can sometimes happen. Dr. Heffel removed the INTEGRA™, and Madison



Madison Locklair visits her two favorite nurses, English Barrineau (left) and Heather Nolan (right) at the McLeod Children’s Hospital.

continued to undergo routine dressing changes for the next month until the second application on October 24.

Three weeks after the second application, Dr. Heffel removed the silicone layer of INTEGRA™ and applied a splint on Madison’s leg in preparation for the skin graft.

Two days later, on November 21, Madison underwent a full-thickness graft -- a delicate procedure involving the removal of both the first and second layers of skin. Surgeons often perform the procedure with a scalpel to minimize scarring and use sutures instead of staples to improve the recovery process.

“We use this method when a patient has suffered extensive tissue loss, as in Madison’s case,” says Dr. Heffel. “During the procedure, we removed skin from Madison’s lower abdomen and transplanted it to her foot. We then applied a splint on Madison’s foot to prevent any movement that could potentially interfere with the success of the skin graft.”

Madison underwent a total of 19 procedures requiring anesthesia and spent more than three months in McLeod Children’s Hospital.

“Ricky and I cannot say enough about

Dr. Heffel, Dr. Gilpin, and McLeod Children’s Hospital,” says Katelyn. “The care we received from everyone we met, even people who didn’t know us, was a blessing.”

The McLeod Child Life Activity Center also played an instrumental role in Madison’s recovery. A large, sunlit playroom, the Child Life Activity Center offers an opportunity for relaxed play and distraction from a child’s illness or injury.

“She never complained about undergoing a procedure because she knew she could visit the playroom afterward. It allowed Madison to focus more on her favorite toys, particularly the kitchen set, than on her hospitalization,” explained Katelyn.

Through it all, Madison maintained a positive attitude. She even named her foot “Dr. Heffel’s foot.”

Today, Madison is an active three-year-old who loves spending time outdoors, riding her bicycle, and jumping on the trampoline. She also looks forward to any opportunity to spend Saturdays at the race track with her dad.

“There are no restrictions or limits to what Madison can do,” says Katelyn. “She has truly overcome this accident. Madison has also shown us that the strength of a child is amazing.”

UNDERSTANDING **THE NEEDS** OF THE PATIENT

by Heather H. Newsom

Jimmie Williamson stands in front of the Great Wall of China, thanks in part to Dr. Salim Ghorra's medical diligence.

Cheraw resident Jimmie Williamson prided himself on the fact that he had always been healthy and never spent one night in a hospital. However, this changed when the pain from a ventral hernia became more than he was able to tolerate.

"Sitting, standing and taking showers had become a huge challenge," Jimmie explained. Realizing that he was in need of medical care, he turned his attention to finding the right surgeon. Fortunately, he didn't have to look very far to find General Surgeon **Dr. Salim Ghorra** of McLeod Health Cheraw.

In Jimmie's case, time was of the essence, not only due to the discomfort he was experiencing, but also because of a scheduled trip to attend an international conference in China.

During an initial consultation in his office, Dr. Ghorra explained to Jimmie that he would repair the ventral hernia by making a small incision in his navel to reduce the hernia and close the rectus muscles with surgical mesh. Jimmie said that he could see that Dr. Ghorra "was very compassionate, kind and extremely competent," and he promptly scheduled his surgery.

Once in the operating room, Dr. Ghorra realized Jimmie's hernia was much worse than anticipated. "This surgery, which typically takes about two hours, ended up taking twice that amount of time," explained Dr. Ghorra.

After surgery, Jimmie's condition was further complicated by an allergic reaction to both latex and the medication that he was taking to suppress his pain. Having never been

hospitalized before or in a situation that required the use of pain medication, Jimmie was not aware that he had these allergies.

Concerned about what was causing Jimmie's complications, Dr. Ghorra quickly began working on solving the issues. "I saw Dr. Ghorra spring into action, so that really comforted me," said Jimmie.

The allergic reactions were suppressed but when he thought he was in the clear, Jimmie developed an infection at the surgical site. Dr. Ghorra knew that infection control over the next several days was crucial for Jimmie's recovery.

"If Dr. Ghorra had not corrected the situation it was only going to get worse. He did everything he could to ensure that I did not have to undergo a second surgery," Jimmie said.

Receiving diligent and compassionate care during the course of a week at McLeod Health Cheraw, Jimmie turned the corner and began improving.

Thanks to Dr. Ghorra's efforts, Jimmie also began working from home and soon found himself ready to make the trip abroad for his conference in China.

"Dr. Ghorra gets it. He truly understands what the patient is going through," added Jimmie. "We are blessed to have this level of compassionate and quality care right here in Cheraw."

General Surgeon **Dr. Salim Ghorra** is pictured with **Jessica Richardson**, Director of Surgical Services, at McLeod Health Cheraw.



Life's Little Blessings

by Jennifer Beverly



April and Kenneth Vaught are pictured holding their little blessing, Kennedy, with McLeod Obstetricians, Dr. Joycelyn Schindler, at left, and Dr. Chris McCauley, at right.

A first time mom at 42 years of age is not what April Vaught had planned, but it turned out to be the greatest blessing she ever received.

April and her husband Kenneth struggled for years to have a child. After four miscarriages, April decided that it was time to stop trying for a baby.

"I didn't want to grieve over another

miscarriage," said April. "I was older and I knew the chances of conceiving and having a healthy child were much harder."

During the summer of 2014, April and Kenneth went away on a family

vacation and came home to a wonderful surprise: a positive pregnancy test. At first, April was apprehensive about the news, but she had a feeling that this pregnancy was going to be different.

"Call it a mother's intuition," said April. "I knew this pregnancy was going to work out."

April immediately made an appointment to see her Obstetrician and Gynecologist **Dr. Chris McCauley** of McLeod OB/GYN Seacoast. Dr. McCauley confirmed the pregnancy, but he wanted to keep a close watch on April.

"Most women do very well and have healthy children after the age of 35. However, there are definitely some health risks," said Dr. McCauley. "With April's miscarriage history, I wanted her to be cautious."

At 28 weeks, April's medical team diagnosed her with gestational diabetes. She was also dealing with high blood pressure. When she arrived for her routine check-up at 35 weeks, Dr. McCauley diagnosed April with preeclampsia.

"Preeclampsia is a pregnancy complication characterized by high blood pressure and a high level of protein in the urine. If left untreated, preeclampsia can lead to serious, even fatal, complications for both the mother and the baby," Dr. McCauley explained.

Dr. McCauley ordered a 24-hour urine collection test to check April's protein levels. When the lab results returned, Dr. McCauley immediately admitted April to McLeod Loris where she underwent an emergency cesarean section.

This was only April's second time in a hospital, and she was very nervous about the procedure and the health of her baby.

"The staff at McLeod Loris really comforted me. When I went into the operating room, all of my nurses were there for support," said April. "I even received a phone call from Teresa Bell, Director of Nursing and Maternity at McLeod Loris, on her day off to check on me."



April and Kenneth are blessed with their little miracle, Kennedy.

On April 2, 2015, Kennedy Evette Vaught was delivered by **Dr. Joycelyn Schindler** with McLeod OB/GYN Seacoast at 6:20 p.m., weighing 7 pounds, 14 ounces. However, the moment Kennedy was born April knew something was not right.

"I did not hear my baby cry or make any kind of noise," said April. "Kennedi was not breathing."

Dr. Schindler and the OR staff had to resuscitate Kennedy. The team was able to get her breathing, but they continued to monitor her closely. Later on that same evening, Kennedy's heart rate soared up to 240 beats per minute. Because of the seriousness of her rapidly changing condition, Kennedy was immediately transported to the Neonatal Intensive Care Unit (NICU) at McLeod Regional Medical Center in Florence.

"I tried not to worry too much because I knew she was receiving the best care possible," said April. "At three o'clock in the morning, Kennedy arrived at the NICU and **Dr. Douglas Moeckel**, a McLeod Neonatologist, called to let me know that she was doing well."

Kennedi was diagnosed with Supraventricular Tachycardia (SVT), which means a faster than normal heart rate. In newborns, SVT is detected when the heart rate exceeds 200 to 240 beats per minute. The condition is treated with medications and IV fluids.

Released from McLeod Loris a few days later, April went straight to Florence to visit Kennedy in the NICU.

"It was hard being separated from my baby girl," said April. "The first time I got to hold Kennedy was while visiting her in the NICU."

Kennedi stayed in the NICU for a total of three days before being released. The medications and IV fluids allowed Kennedy's heart to stabilize and she was finally strong enough to go home.

"I am extremely thankful to all of the McLeod physicians and staff who took care of me and Kennedy. Everyone was so wonderful and made me feel special. I am also grateful for all of the support and communication I received. My experience with McLeod Health was fantastic," added April.

A Pleasant SURPRISE



Sylvia Griffin is pictured with her former student, Shannon Carter, RN, who recently cared for Sylvia at McLeod Dillon.

by Brooke Hanna

Low back pain is experienced by 80% of adults at some point in their lifetime. It is also the most common cause of job-related disability and a leading contributor to missed work days.

Sonya Zeigler, Nurse Practitioner of the McLeod Dillon Interventional Pain Clinic, explains, “Low back pain can range in intensity from a dull constant ache to a sudden onset sharp pain that leaves a person temporarily incapacitated.”

Sylvia Griffin, a widow and mother of two sons, is a member of the Dillon County School Board and the First Baptist Church of Dillon. Born and raised in Dillon, Sylvia has been a “Dillonite since day one” as she put it.

After high school, she worked at the Department of Social Services for twenty years. Then, she decided to go back to school to get her degree in education. She attended a branch of the University of South Carolina in Florence, which is now known as Francis Marion University.

Upon graduation, she taught Government Economics at Dillon High School for twenty years. Today, she attends prayer meetings each Wednesday and is the record keeper on Sundays.

Regarding her experience at McLeod Dillon, Sylvia said, “Everyone, from registration to recovery, was great, and the OR staff were all so comforting. Dr. L.R. Perry, the anesthesiologist who treated me, and Sonya thoroughly explained every step of the procedure to make me comfortable. I felt at ease and knew that I was in good hands.”

Sylvia was also pleasantly surprised to see a familiar face during her procedure. Shannon Carter, a nurse who works in the Dillon OR, assisted in Sylvia’s care. Shannon was a student of Sylvia’s in the 12th grade. She said she always remembered Mrs. Griffin as caring and very involved with the school and community.

“My job is very fulfilling, and I wake up every day and pray that whoever is put in my path will find comfort and peace. I live in a small community where you know almost everyone. Being able to help them makes my job very rewarding,” Shannon added.

“My job is very fulfilling, and I wake up every day and pray that whoever is put in my path will find comfort and peace.”

– Shannon Carter, RN

“I love to do a lot of visiting for the church, but it is a challenge for me to get out due to my back pain,” she explained.

Sylvia suffers from chronic lower back pain that started about five years ago. When pain strikes her in the lower back and hip, there are times when it is hard for her to walk. To manage her chronic pain, Sylvia recently received a lumbar epidural steroid injection at the McLeod Dillon Interventional Pain Clinic. This type of injection treats symptoms secondary to nerve root irritation or central spinal stenosis.

Chronic pain can ruin someone’s lifestyle if not treated properly. “Often multiple pain relief approaches are needed to obtain the best results,” Sonya explains.

Today, Sylvia remains under the care of the McLeod Dillon Interventional Pain Clinic. Even with her day to day challenges she makes it a point to go to dinner with her friends almost every night.

Pain Management

A pain management program can reduce the intensity of pain, increase function and improve quality of life. Persistent pain can have a debilitating effect on a person’s life. Because of the complexity of pain, it should be treated at a facility where pain specialists can provide high quality, comprehensive care. Interventional (injection) pain management may be beneficial for a number of conditions, including:

- Radiating leg pain
- Radiating arm pain
- Shingles pain
- Sacroiliac or SI Joint pain
- Low back Arthritis pain
- Neck Arthritis pain
- Pain from Spinal bone fractures due to Osteoporosis
- Point specific muscle pain
- Other painful areas due to peripheral nerve irritation including sciatic nerve pain
- Rib pain after lung surgery or other chest procedure
- Headache pain
- Pancreatic Cancer pain
- Recurring pain after back or neck surgery

McLeod Pain Management Services are offered at McLeod Regional Medical Center (Florence, SC), McLeod Dillon (Dillon, SC) and McLeod Seacoast (Little River, SC). A physician’s referral is required.

Expanding EMERGENCY CARE

by Jennifer Hulon



Emergencies happen every minute. The need for urgent medical care can arise from a car crash, an allergic reaction or chest pains. Decisions of where to go, who to call, and how to get there can be critical. During these perilous times, it is reassuring to know there is experienced medical care right around the corner.

McLeod Loris Seacoast is the medical destination for northern Horry County and lower Brunswick County. McLeod Seacoast is also currently growing in order to accommodate the emergency demands in the area. The \$5 million expansion is the largest growth project

in McLeod Seacoast history.

The Emergency Department has already streamlined their services to treat less emergent cases with a Fast Track unit, offering the more complex cases adequate examination areas. The newly structured 9,600 square foot expansion

will nearly double the current emergency department capacity. It will include 24 private exams rooms, including three state-of-the-art trauma bays. Fast Track care has proven it is vital in alleviating long wait times and will remain a crucial examining area for the emergency team.

“We are pleased to be taking this extraordinary step in emergency care for all who live and visit this beautiful area,” said **Dr. Timothy Carr**, Medical Director of the McLeod Seacoast Emergency Department. “Ultimately, the needs of the patient drive everything we do, and clearly, this expansion will improve the Emergency Department experience for all who come to us for care.”

“From my years of experience in emergency, I see the vision McLeod Health has for this community,” added Michele Davies, Director of the McLeod Seacoast Emergency Department. “Our skilled, knowledgeable, and caring team embraces every patient that comes through these doors. We make sure we treat everyone as if they were our family both medically and emotionally. McLeod Health is providing quality medicine in this area. Superb care is our number one goal.”

The importance of the McLeod Seacoast Emergency Department to the surrounding communities is frequently acknowledged by patients and their family members. “Gratitude offered by our patients is very meaningful to the staff because it is expressed by someone who has entrusted their care to us,” said Michele.

One of these patients was Lesley Emery Carota, from Calabash, North Carolina. Lesley came to McLeod Seacoast early one Sunday morning with chest and arm pain. Concerned that she may be experiencing a heart attack, Lesley realized she needed medical attention immediately. She knew McLeod Seacoast was the closest hospital to her home and they had the resources to help her. She had been a previous patient on two other occasions and trusted the care and experience of McLeod professionals.

“The location is convenient since I am just across the North Carolina border,” said Lesley. “I called McLeod Seacoast years ago when I moved to the area because I wanted to find out more about them.”

When Lesley arrived at the Emergency Department, an EKG was performed. However, a definite prognosis was not determined. Further tests were administered which confirmed that Lesley had experienced a heart attack. Lesley was quickly moved to the Intensive Care Unit. **Dr. Edward Botse-Baidoo**, the Hospitalist caring for Lesley, contacted McLeod Loris Seacoast Cardiologist **Dr. Nathan Almeida**.

Dr. Almeida met with Lesley and determined she needed a heart catheterization. After the procedure, Lesley began Cardiac Rehabilitation at McLeod Seacoast.

“The Emergency Department nurses not only cared for my health, they also comforted me,” said Lesley. “I do not have family nearby, so I appreciated their support. My husband Jim was my primary comforter, so the commitment by the staff to care for both of us meant a lot.”

As McLeod Health anticipates growth of the community, proactive strategies like the expansion of the Emergency Department are being taken to broaden medical service options for those who live and work in the area.



Lesley Carota exercises during a Cardiac Rehabilitation session.

Visits to the McLeod Seacoast Emergency Department have continually risen over the last few years. To date in 2015, visits are trending at more than ten percent over last year substantiating the need for growth.

McLeod Seacoast Staff Commemorates Expansion



McLeod Seacoast Emergency Department expansion progress as of October 2015.

The McLeod Seacoast staff members are looking forward to the grand opening of the new Emergency Department. To commemorate the new addition, a wall signing was held inviting all McLeod Loris and McLeod Seacoast staff members to participate. The signing of the wall represented a symbol of the teamwork it takes to bring great healthcare services to area residents.

SOUND ADVICE

by Shaw Thompson

Imagine, if you can, not knowing the sounds of a bird singing, a door opening, children whispering, or the hum of your refrigerator when you open the door. For Lynette Gause, these were sounds she knew existed but had never really heard until one remarkable day earlier this year.



Lake View resident Lynette Gause is grateful to McLeod Audiologist Susan M. Wentzel for helping improve her hearing.

“I have had trouble hearing since I was four years old,” said Lynette. “My doctors think I lost my hearing when I was a child after having several high fevers. But, I do not remember a time that I did not struggle to hear.”

When she was young, Lynette, her

twin sister, and her mother traveled from their home in Mullins for hearing tests. While her sister showed no signs of impairment, Lynette was fitted for hearing aids.

“I have worn hearing aids for years, but I never really felt like they were

working. I learned to use the little bit of hearing I had, along with reading facial expressions and lips, to get by. Since I had some hearing, I have always been able to talk, and most people couldn’t tell I had hearing problems, especially if I didn’t wear my hearing aids.”

As an adult and mother, Lynette continued to try different hearing aids with little success. Faced with the daily challenges of working and raising children, she had almost decided to give up on hearing aids for good when her counselor at vocational rehabilitation suggested she visit a different audiologist.

“My counselor said, ‘try one more place and see if they can help you.’ I did not hold out much hope. After I made the appointment, I almost did not come. Lord, I am glad I did,” stated Lynette.

Certified Audiologist Susan M. Wentzel, CCC-A of McLeod ENT Associates first evaluated Lynette in March of this year. Immediately, something felt different.

“For the first time, I felt like the audiologist was really listening to me and trying to help,” said Lynette. “Mrs. Susan always looked me in the face, smiled, and made sure I understood all of her questions about my condition. I could tell she really wanted to help me if she could.”

“After testing, we found that Lynette had total loss of hearing in her left ear, and about 65% loss in her right ear,” said Susan. “Unfortunately, hearing aids cannot help when there is total loss. However, since she has some hearing in her right ear, we can use devices to increase and magnify the hearing she has.”

To enhance the hearing in her right ear, Susan fit Lynette with a powered digital Widex hearing aid, which even matched her skin tone, at her follow-up appointment in June. The difference in her hearing was immediate and jarring.

“I asked Ms. Susan, ‘Who else is talking in here?’” said Lynette. “I heard another voice, but there was no one else in the room. I was hearing the lady in the reception area behind a closed door. I had never been able to hear someone in another room. I tried not to cry, but it was such a difference that I could not help myself.”

“One of the challenges of having hearing in only one ear is that Lynette only receives sound from one direction,”

said Susan. “That is why she could not tell from where the third voice was coming. When you have hearing in both ears, you can distinguish left from right.”

The differences did not stop when she left the office. As soon as she arrived home, Lynette was overwhelmed with new and enhanced sounds of life all around her.

“I walked to my front door and heard something squeaking, or going ‘cheep!’ I looked over on my porch and saw this bird. I heard the ‘cheep’ again, and it was the bird! I had never really heard a bird chirp before, and I could not stop listening to it. I went in to my house and tried to get used to all the new things I was hearing: the car horns blowing, my refrigerator humming - it scared me! Everything was different.”

Hearing her phone or doorbell ring and watching television without captions became possible for the first time in her life. Even Lynette’s two children, Joshua and Kayla, have had to adjust to their mother’s new skills.

“My kids cannot get anything past me now - no back talking, or mumbling, because I can hear what they say to me. I know if they have brushed their teeth because now I can hear the water running. One of my kids tried to sneak out of the house before school and skip with some friends. He did not know I could hear him talking and the door opening, so I put a stop to that fast!” quipped Lynette.

A great comfort throughout Lynette’s life has been her faith. Going to church, she could hear and enjoy some of the music and take in what she could hear of preaching and bible study. With her new hearing device, Lynette can participate in worship and teach Sunday School, and can even hear the other classes going on at the same time.

For Susan, being an audiologist blesses her daily by helping people like Lynette lead fuller lives. “Lynette now has more freedom in her life, and confidence to go places, do things, and partake in activities at her church and her community with

family and friends. I knew how much those things meant to her, and I am humbled and glad we could help.”

Lynette will continue to see “Mrs. Susan” for monitoring of any changes in her condition. For now, she is enjoying the new found world of sounds, noises, voices and laughter that before would have passed her by.

Should You Have Your Hearing Tested?

Hearing loss often occurs gradually, over long periods of time, as you age. Many people do not realize that they have suffered hearing loss unless it is pointed out by a friend or family member. Some questions to consider if you think you may have hearing loss are:

- Do people seem to mumble or speak in softer voice than they used to?
- Do you feel tired or irritable after a long conversation?
- Do you sometimes miss key words in a sentence or frequently ask people to repeat themselves?
- Do you need to turn up the volume on your TV or radio louder than anyone else in your family?
- Do you find it difficult to hear the doorbell or telephone ring?
- Is carrying on a telephone conversation difficult?
- Has someone close to you mentioned that you might have a problem with your hearing?

If you answered yes to any of these questions, you may benefit from a hearing consultation. For more information or to schedule an appointment with Audiologist Susan Wentzel at McLeod ENT Associates, call 843-667-3533.

ANOTHER MEMBER OF THE FAMILY

by Jessica Wall

Chantel Isaac (right) and Kayden (center) are grateful for the support of Nurse-Family Partnership Nurse Home Visitor Heather Gainey (left).



Every new mom needs someone who can check on them, ask about their doctor's appointment or provide reassurances that everything is going to be fine. Yet, there are many young, first-time mothers struggling to get by financially who have little or no support.

Understanding this need, McLeod Health recently implemented Nurse-Family Partnership® (NFP), a home visitation program that pairs nurses with young moms during

pregnancy and for the first two years of the baby's life.

NFP has three primary goals: to improve pregnancy outcomes, to enhance child health and development

and to strengthen the economic self-sufficiency of the families it serves.

Chantel Isaac of Hartsville knows firsthand the benefits of the Nurse-Family Partnership Program.

Chantel enrolled in the program in May when she met NFP Nurse Home Visitor Heather Gainey at a Gestational Diabetes Class, offered weekly through the McLeod Diabetes Center.

Heather, a new member of the NFP team, attended the class at the encouragement of her supervisor.

"As part of our initial training, NFP nurses attend at least one gestational diabetes class to understand the resources available to us and our patients," says Heather. "After meeting Chantel, I felt she could greatly benefit from NFP. I was delighted when the registered dietician provided the referral and Chantel agreed to enroll."

Through regular in-home visits, nurses work with mothers to improve maternal health, promote healthy child development and support mothers with issues such as continuing school, finding work or establishing adequate housing. Home visits start early in pregnancy and continue until the child's second birthday. The program also encourages participation from the father and other members of the family.

"Without Nurse-Family Partnership and Heather, I would not have known what to expect during my pregnancy," says Chantel.

"Being able to talk to Heather and ask her questions has been so helpful to me. I was afraid when I learned that I would deliver via C-section, but I felt calm and prepared after talking to Heather. She coached me through the entire process and helped me understand what would happen," continues Chantel.

On August 5, Chantel gave birth to a healthy baby boy, Kayden.

"Having your first child can be overwhelming, but Heather has made the journey much easier," explains Chantel. "It's reassuring to know that what concerns me, concerns her as well. Heather is more than my nurse. She is family."

"The beauty of Nurse-Family Partnership is that each mom has one nurse the entire time, allowing the mom and nurse to build trust and a lasting friendship," explains Heather. "Our goal is to provide the best care possible and help prepare our moms for motherhood. In addition, we work with other organizations when necessary. For example, we secured a pack-and-play through McLeod Safe Kids' Cribs for Kids program and taught Chantel how to create a safe sleep environment for Kayden. Education, resources, and support are critical to helping our moms thrive.

"This has been a rewarding experience for me," added Heather. "Having the opportunity to support Chantel and watch Kayden grow and develop enriches my life both professionally and personally."

About Nurse-Family Partnership

Nurse-Family Partnership® (NFP), a nationally recognized, evidence-based program for low-income, first-time mothers recently expanded to serve mothers in Florence, Darlington, Dillon and Marlboro Counties.

"Our program is designed to empower and transform the lives of at-risk mothers and their young children, which in turn will help these families thrive and our communities prosper," says Kristen Miller, RN, MSN, Manager of the Nurse-Family Partnership for McLeod Health.

The team includes six nurses Denita Davis, Karen Driggers, Heather Gainey, Wendi Miller, Jennifer Turner, and Tam Weatherly as well as Clinical Data Specialist Susan Bailey. The team has the capacity to serve 150 families.

NFP is one of the oldest and most thoroughly evaluated nurse home visitation programs in the nation.

In South Carolina, initial results from Nurse-Family Partnership have shown that:

- 90 percent of babies were born full term and 89 percent were born at a healthy weight (at or above 2,500 grams/5.5 pounds).
- 73 percent of NFP mothers had no subsequent pregnancies at program completion (2.5 years). Comparatively, in a national study of low-income mothers, 39 percent of pregnancies occurred within 18 months of a previous birth.
- 48 percent of mothers who entered the program without a high school diploma or GED are working to obtain one.

The expansion of NFP to Florence, Darlington, Dillon and Marlboro Counties is supported by a public-private partnership that includes the Children's Trust of South Carolina, the McLeod Health Foundation, Boeing South Carolina and the Marlboro County General Hospital, a private foundation.

NFP now serves families in 26 South Carolina Counties. For more information, please visit www.McLeodWomen.org or call (843) 777-6495.



The McLeod Nurse-Family Partnership team includes, from left to right: Wendi Miller, Susan Bailey, Denita Davis, Kristen Miller, Karen Driggers, Jennifer Turner, Tam Weatherly, and Heather Gainey.

YOUNG HEART

by Heather H. Newsom

Sonny Usher, Director of McLeod Cardiac Rehabilitation in Cheraw, checks on Alieth Bruner during her exercise session.



At 91 years old, Alieth Bruner will be the first to tell you that she has more “spunk” today than she did 18 years ago.

In 1997, Alieth suffered a heart attack and underwent coronary artery bypass surgery. After her recovery from surgery, she returned to Cheraw and immediately enrolled in Cardiac Rehabilitation.

Since beginning Cardiac Rehabilitation, Alieth has barely missed a week over the last 18 years. Sonny Usher, Director of Cardiac Rehabilitation at McLeod Health Cheraw, says, “Alieth is very faithful and most certainly a role model participant.”

Alieth has not suffered another heart attack since her initial event in 1997. She attributes this to the care and dedication to her health that she has received at Cardiac Rehabilitation.

Like most of her fellow participants, Alieth thoroughly enjoys going to Cardiac Rehabilitation. “Most of my friends and people my age are in wheelchairs or nursing homes.” By going to Cardiac Rehabilitation, Alieth explains that it not only reduces her risk for further heart attacks but it also keeps her from sitting at home. Enjoying the social time with other patients and friends enrolled in the program is “icing on the cake” she says.

Since both of Alieth’s parents died from heart attacks at a young age she also understands that in addition to medicine, continuous cardiovascular activity is key in battling cardiac disease.

Alieth routinely exercises on treadmills as well as stationary bikes. Thanks to Sonny and her physicians, she is also well versed in maintaining a heart healthy diet.

“In cases like this where it is most likely genetic, I make sure to educate the family on heart disease risk,” Sonny explained.

“McLeod Health Cheraw Cardiac Rehabilitation has always been and continues to be very attentive to my needs,” added Alieth. “I’m extremely grateful for the Cardiac Rehabilitation services and wonderful staff who have helped me continue enjoying these precious years.”

Cardiac Rehabilitation involves a prescribed exercise, education and diet program that helps an individual with heart disease return to a more normal and productive lifestyle. Patients receive many benefits, such as reduced body fat, slowed heart rate, lower blood pressure and cholesterol levels, and improved muscle tone.

At McLeod Health Cheraw, rehabilitation begins after a patient is discharged from the hospital with a heart-related illness or procedure. Patients come to Cardiac Rehabilitation one to three days a week to participate. During exercise, their blood pressure, pulse rate and oxygen levels are monitored by staff to ensure they stay within safe levels.

For more information on Cardiac Rehabilitation, consult with your physician or contact the McLeod Health Cheraw Cardiac Rehabilitation Department at (843) 320-3378.



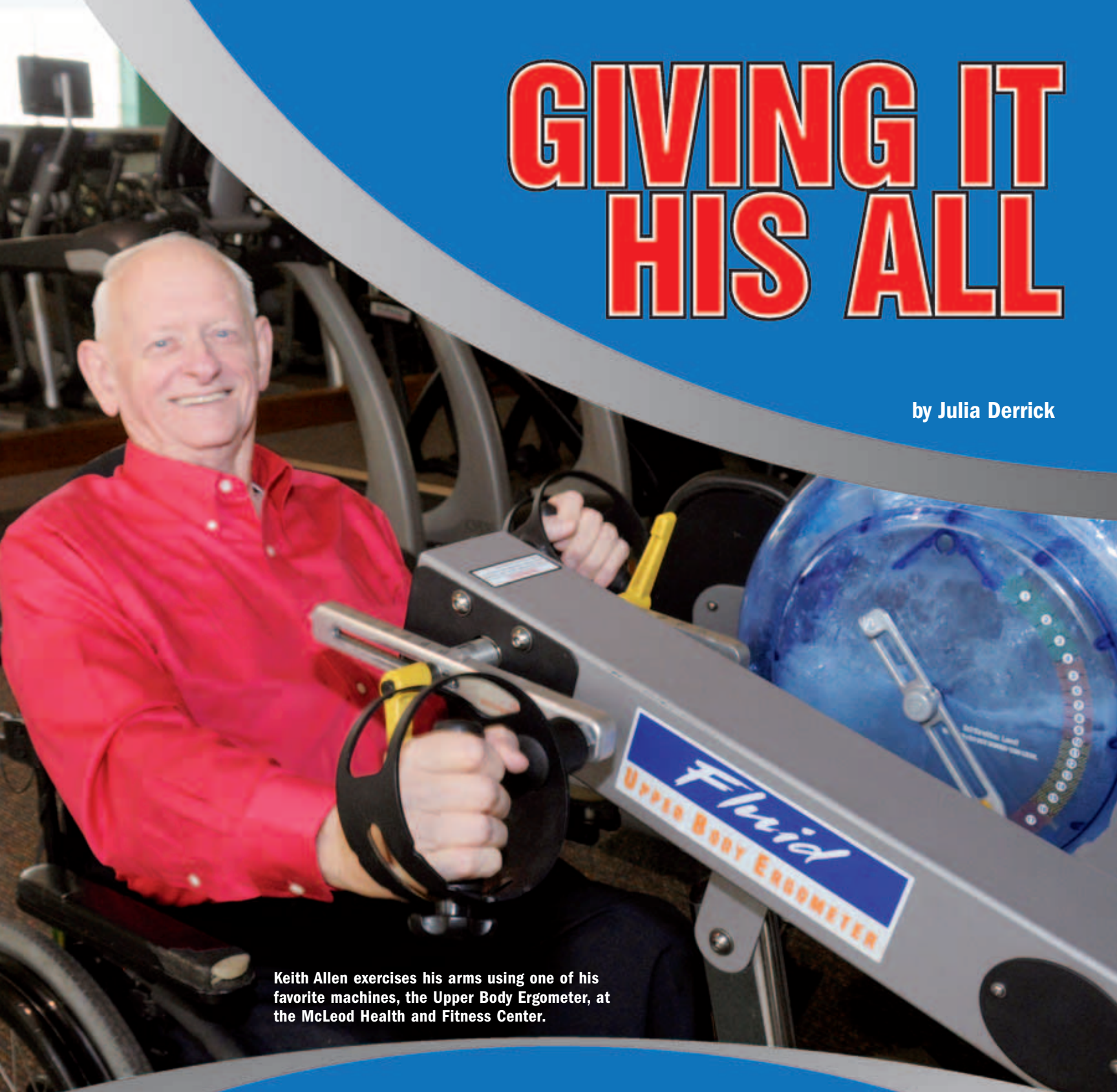
Alieth Bruner has been a participant in Cardiac Rehabilitation for 18 years.

“I’m extremely grateful for the Cardiac Rehabilitation services and wonderful staff who have helped me continue enjoying these precious years.”

– Alieth Bruner

GIVING IT HIS ALL

by Julia Derrick



Keith Allen exercises his arms using one of his favorite machines, the Upper Body Ergometer, at the McLeod Health and Fitness Center.

Monday, September 14 of 1987 started like any other day at work for Keith Allen. As a mechanic for the Dupont Florence Mylar Plant, it was not uncommon for him to work on storage racks up to 20 feet high.

"After finishing a job that day, I was climbing down and fell backwards, severing my spinal cord and breaking my neck," said Keith.

Keith was immediately transported to the McLeod Regional Medical Center Emergency Department. The medical team confirmed that the injury occurred at the Cervical 7/Thoracic 1 level (where the spine meets the neck). He received care at McLeod for two weeks before he could be moved to HealthSouth Rehabilitation Center.

Keith's treatment began in the McLeod Surgical Intensive Care Unit in a Stryker frame, a device that holds the patient between two boards and rotates 180 degrees every few hours to prevent respiratory problems.

The second week, he was fitted with a Halo brace, which is a hard-shell vest with brackets and screws that are bolted into the skull to keep the neck in traction. After a week of being monitored with the Halo brace, Keith was transferred to the rehabilitation center.

Understanding that he would never be able to walk again, Keith knew he had a long road ahead. Throughout this ordeal, he had faith, believing God was with him and everything would be okay.

After a few weeks of Keith's stay at HealthSouth, a local college psychology professor knocked on his door and wanted to speak with him.

The instructor explained that the staff was concerned about him because "someone in your condition just shouldn't act as happy as you do." Keith responded, "The thing of it is, I've got a friend I met several years ago. He's my comfort, He's my guide... Jesus is with me all of the time."

"We do not realize sometimes that God is all we need until He is all we have got. You understand this when your life is completely changed and will be forever," said Keith.

Some of his days were tough -- going weeks at a time having a headache every day. Keith persevered. He also visited other patients in HealthSouth, bringing his joyful attitude and support to many of them.

In mid-January 1988, Keith's Halo brace was finally removed. After wearing the brace for months without using his neck muscles, it was hard for Keith to hold his head up in the beginning.

It also took a while for Keith to adjust to living at home, now renovated to accommodate a wheelchair. Paralyzed from the chest

down, Keith experienced being in a wheelchair as his new way of life. He had help each morning and night from his wife Linda.

They slowly began to build a new routine for Keith.

Instead of feeling sorry for himself, Keith decided to help where he was needed and make the most of his life. He was determined that the wheelchair would not slow him down or prevent him from spending time with his daughters, Gaye and Joy.

A fond memory of those first few months out of HealthSouth was the day Keith and Linda went to pick up the customized van that allowed him to drive again as well as the day he passed the driver's exam for the van.

Keith also felt a strong urge to get involved with the community, which is why he started volunteering at McLeod Regional Medical Center. He worked with Patient Representatives, visiting with patients to ask how they were doing and if they needed anything.

Keith remembers one day in particular. "I rolled around the corner in the Cardiovascular Intensive Care Unit and ended up having a long conversation about life with this lady standing there. She could not thank me enough."

(continued on next page)

Instead of feeling sorry for himself, Keith decided to help where he was needed and make the most of his life.

Keith travels unassisted with a lift and special hand controls on his customized van.





Keith and Linda Allen have been together in sickness and in health for more than 48 years.

birthday and his 48th wedding anniversary with Linda. He spends a large amount of his time teaching Sunday School at Grace Baptist Church, where he serves as a deacon. He also continues working out at the McLeod Health and Fitness Center.

Keith does not recall feeling “Why me? How is this happening?” He says God took over his life in an indescribable, yet incredible way.

“People approach me at the gym and ask me how I do this every day and it gives me an opportunity to share my faith.”

Today, Keith considers himself blessed, being told that had his injury been one vertebrae higher, he would have been a quadriplegic with no use of his arms.

When he began using a wheelchair on that day in 1987, Keith was 47 years-old. This year, he celebrated his 75th

She said, ‘I knew when you turned that corner, God sent you to talk to me today.’ That made my whole experience worth it, just to be a blessing to one person. Isn’t that what it is all about?”

Keith also taught a bible study at an assisted living center once a week. When the McLeod Health and Fitness Center opened in 1999, he joined the first month. Since then, Keith has been working out five to six times a week.

McLeod News

MCLEOD INSTALLS ADVANCED IMAGING TECHNOLOGY

With a continued focus on quality care and improved patient experience, McLeod Regional Medical Center recently became the first hospital in the state to install the Siemens Biograph mCT, an innovative PET/CT scanner which offers accurate, fast and comfortable exams for a wide range of patients.

The new PET/CT scanner offers exceptional patient comfort with a large 78-cm cylinder. Its open design and fast scan times also help patients feel less claustrophobic.

“We are very pleased to bring this technology to McLeod to advance our PET/CT capabilities. This system will provide our physicians with a wide range of imaging options for many different types of patients,” says **Dr. Steven Glassman**, a McLeod Radiologist.

The unit’s innovative dose-reduction technologies minimize patient exposure to radiation. Additionally, the system’s fast scan times result in less patient motion, optimizing both image quality and the overall patient experience. Exams that previously lasted 40 minutes are now performed in less than 20 minutes.

The combined PET/CT technology also increases the physician’s ability to diagnose diseases that may have previously remained unidentified. Oncologists can characterize the tiniest cancer lesions more precisely, which permits better staging and monitoring of changes in activity over time. This allows for a more accurate assessment



Kenneth Russell, Nuclear Medicine Technologist, assists a patient undergoing an exam in the innovative and comfortable PET/ CT scanner recently installed at McLeod Regional Medical Center. McLeod is the first hospital in the state to install a PET/ CT with this advanced technology.

of treatment response. Cardiologists can also more accurately assess multi-vessel disease, and the system may also aid neurologists in the evaluation of neurological disorders and dementia.

“The Siemens Biograph mCT gives McLeod one of the most cutting-edge imaging systems available today,” says Dr. Glassman. “We now have a versatile PET/CT system that is fast, highly accurate, and allows us to deliver comfortable imaging experiences to our patients. With the many workflow-enhancing features on the system, we

anticipate that it will enable us to increase the number of patients who can take advantage of these valuable imaging services. This technology sets another new standard in diagnostic imaging.”

McLeod News

MCLEOD HEALTH & FITNESS CENTER INSTALLS NEW STRENGTH TRAINING EQUIPMENT

The McLeod Health & Fitness Center recently replaced its LifeFitness Strength Circuit weight training machines with the new LifeFitness Insignia Series. The Insignia strength line allows members to exercise on state-of-the-art strength training machines.

Ergonomically-correct handles, easy adjustable seats and the contoured upholstered cushioned back supports provide users with comfort and proper posturing. All of the LifeFitness Insignia strength machines are outfitted with Fitlinxx, an interactive computer network.

In addition to displaying personal range of motion, Fitlinxx also records cardiovascular exercise minutes performed and the amount of weight lifted on the strength machines. The McLeod Health & Fitness Center is the only gym in the area to offer Fitlinxx to its members.



Milli Obregon, McLeod Personal Trainer, demonstrates one of the new shoulder strength training machines.

MCLEOD VASCULAR SERVICES EXPAND TO THE COAST

Patients in Northern Horry County who suffer from vascular conditions now have access to two outstanding vascular surgeons. **Dr. Christopher Cunningham** and **Dr. David Bjerken** bring more than 50 years of combined experience and innovative skills in vascular surgery to McLeod Seacoast.

With advanced surgical expertise and minimally invasive technology, Dr. Cunningham and Dr. Bjerken provide treatment for conditions including stroke,

peripheral arterial disease and aneurysms.

At McLeod Vascular Associates, patients can be evaluated for surgery and treatment as well as undergo diagnostic studies in the McLeod Seacoast Vascular Lab.

Dr. Bjerken is a member of the American Board of Surgery, the American College of Surgeons and the Vascular Access Society of the Americas. His specialties include dialysis access surgery and intervention, carotid surgery for stroke prevention and open aortic aneurysm repair.

“I enjoy the challenge, complexity and attention to detail required for vascular surgery,” said Dr. Bjerken. “Dialysis access is also a very creative process. Our patients are wonderful people in circumstances that can be challenging. I appreciate the opportunity to help them with my services.”

Dr. Cunningham is board certified in vascular surgery and has

Dr. David Bjerken, at left, and Dr. Christopher Cunningham, at right, are now caring for the vascular needs of patients in Northern Horry County.

additional advanced interventional fellowship training. His areas of expertise include: carotid surgery and stenting for stroke prevention, aortic aneurysm repair, advanced limb salvage therapy and several other complex vascular procedures.

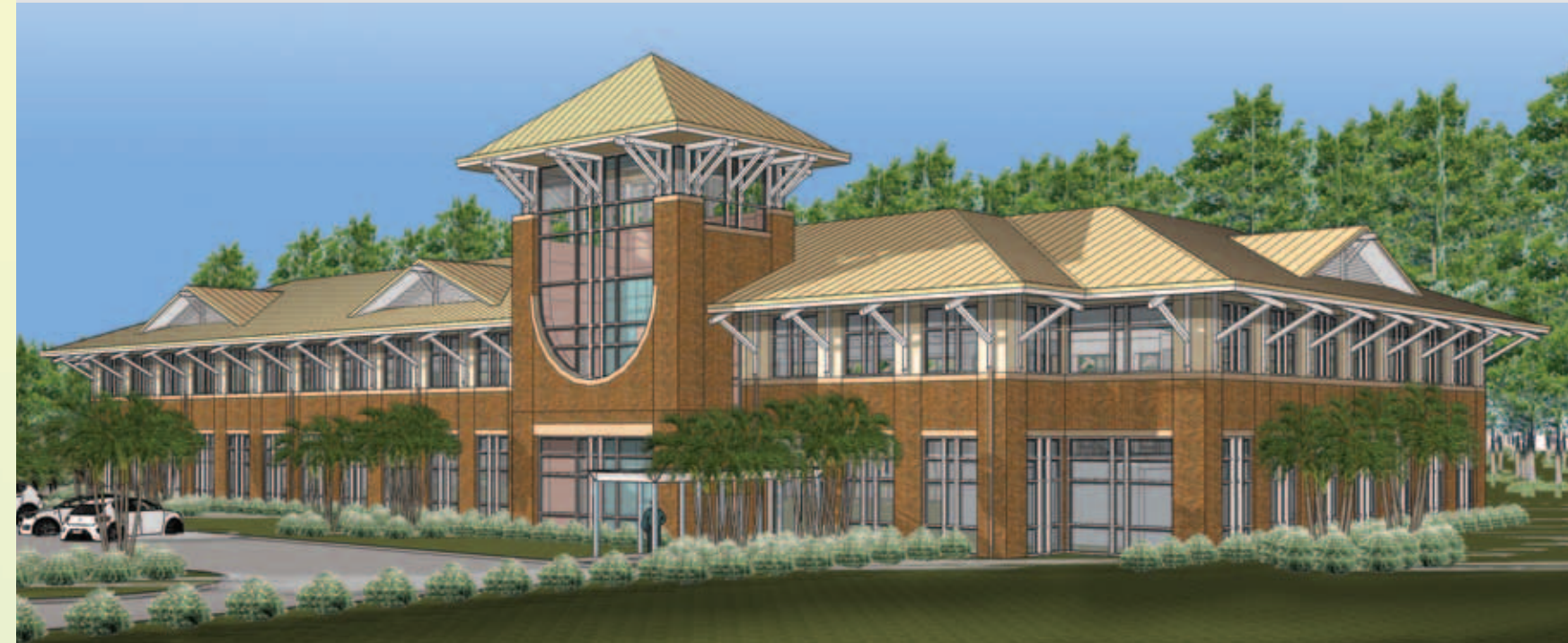
Dr. Cunningham is also a Fellow of the American College of Surgeons and member of the Society of Vascular Surgery and the Southern Association for Vascular Surgery. He is the recipient of numerous awards and honors, including America’s Top Surgeons, the Navy Commendation Medal and the McLeod Merit Award. Dr. Cunningham is the Medical Director of Vascular Services for the McLeod Heart and Vascular Institute.

“I am humbled by the courage of my patients,” said Dr. Cunningham. “Their gift to me is the inspiration to push myself and my team to be better everyday.”

McLeod Vascular Associates welcomes new patients with a physician referral. To schedule an appointment with Dr. Bjerken or Dr. Cunningham at the McLeod Seacoast office, please call 1-888-812-5143.

The Choice for Medical Excellence
is coming to Carolina Forest:

McLeod Health



We’ve Broken Ground and Started Construction.

McLeod Health is pleased to announce that we have broken ground on our new outpatient services center and medical office building in Carolina Forest. Our desire is to provide the community with access to much-needed medical services and highly-skilled physicians – meeting the health care needs of residents within and around the Carolina Forest area.

For more information about McLeod Health and our services, visit McLeodHealth.org

McLeod Health

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McLeod Health

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