

Views



At McLeod we invite our community, patients and employees to celebrate the excellent care delivered each day to our patients. This work reflects the commitment to the mission, vision and values of McLeod Health, and our investment in the health of our people -- the million and a half patients who entrust us with their care annually.

During the next five to ten years, McLeod remains dedicated to improving health care in our communities from the Midlands to the Coast. Our plan is to expand and exceed patient expectations in that delivery of care by the provision of excellent

and compassionate services through inpatient and outpatient care at every McLeod Health facility.

This year, we celebrate a milestone -- the 115th Anniversary of McLeod Health. There has been, without a doubt, many challenges. But thankfully, we are in this together, and we pledge to be the choice for medical excellence. It is what our residents want and deserve.

We will achieve this aim by providing an outstanding network of physicians, superior patient service and ease of access to our services as well as targeting population health. We want to improve our capacity for serving patients by adding technology and staffing support to be a comprehensive medical home.

Remember, we are local people caring for local people. You are our most important asset: our community of patients and our incredible staff of caregivers -- not the buildings or equipment or tools, but the skillset of our experts in the work of caring and

Our patients are constant reminders that the vocation of medicine is not about business. It is about relationships and being present for the communities we serve. In each issue of the McLeod Magazine, we invite you to be a part of the very personal stories shared by our patients on their journeys to recovery. We learn and improve by listening to their voices and hearts. We are grateful for their openness and positive outcomes.

The highest recognition we can achieve is your trust in our services and our people. Together we are better. Together we will ensure a healthier future for generations to come.



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ON THE COVER:

For four years, Joe Poston lived with the knowledge that he had prostate cancer. Since the cancer was only detected in one tissue sample and because of his age, Joe and his physician chose to monitor his PSA level. In early 2020, Joe's PSA level was elevated and a subsequent biopsy indicated it was time for treatment. Joe did his research and chose radiation treatment at the McLeod Cancer Center. At the height of the COVID-19 pandemic, Joe began his journey of 39 radiation treatments under the care of Dr. Virginia Clyburn-Ipock. In his story, Joe shares a poem he wrote to encourage others on the cancer journey. Today, Joe is back enjoying his favorite pastime -- tending to his beloved rose bushes.

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President and CEO, McLeod Health

SCORING A NEW HIP

by Jennifer Beverly

Working as a nurse for almost 30 years kept Darlington native Dannie McLellan on her feet for hours at a time. Towards the end of her career, Dannie struggled with pain in her right hip. Retired with time on her hands, Dannie's excruciating hip pain prevented her from learning new hobbies such as pickleball. Ready for some relief, Dannie consulted **Dr. Patrick Denton** of McLeod Orthopaedics in Florence.



Dannie explained to Dr. Denton, "I am in agony over my right hip. The pain is unbearable and to a point where I can barely walk."

Dr. Denton reviewed her X-rays and suggested a hip replacement. Dannie had already suspected that this would likely be the recommendation and researched the various types of hip replacement surgeries. She was especially interested in the direct anterior approach.

"I explained to Dr. Denton that
I wanted to see an orthopedic surgeon
who is trained to perform this procedure,"
said Dannie. "A friend of mine needed
a hip replacement and opted for the
direct anterior approach over the more
common posterior approach. She
recovered quickly, and the pain
disappeared almost immediately."

During the less-invasive direct anterior approach, the surgeon positions a patient on their back and makes a small incision at the front of the hip, working between the muscles with minimal to no cutting to insert a new hip joint. This procedure offers eligible patients less muscle damage, reduced post-operative pain, decreased risk of hip dislocation, a shorter hospital stay and a faster recovery.

Dr. Denton referred Dannie to his partner **Dr. Christopher Walsh** of McLeod Orthopaedics Seacoast in Little River. At the time, Dr. Walsh was the only orthopedic surgeon in the McLeod Health system who specialized in the direct anterior approach. Dannie, along with her daughter and granddaughter, drove to the beach to meet Dr. Walsh.

"I put him through the ringer, asking every question that came to mind," said Dannie. "Working as a nurse my whole life, I often saw doctors I knew. I wanted to 'interview' Dr. Walsh first to learn more about his background and specialties, and luckily our personalities clicked right away."

Dr. Walsh reviewed Dannie's X-rays and determined that she was a candidate for the direct anterior hip replacement procedure.

"Dannie's imaging results showed severe osteoarthritis in her right hip causing the joint cartilage to deteriorate," said Dr. Walsh. "She lost all range of motion, and her thigh bone rubbed against the hip socket causing terrible pain and discomfort."

Before her surgery, Dannie attended the Total Joint Program at McLeod Health Seacoast, a class designed specifically for joint replacement patients.

During the less-invasive direct anterior approach, the surgeon positions a patient on their back and makes a small incision at the front of the hip, working between the muscles with minimal to no cutting to insert a new hip joint.

The Total Joint Program educates patients on what to expect during surgery and their stay at McLeod Health, as well as rehabilitation and recovery. Each patient has a team of physicians, rehabilitation specialists and other health care professionals who work together to provide a complete continuum of care.

"On the day of my Total Joint class, I was greeted at the main entrance of McLeod Health Seacoast and escorted by hospital volunteers," said Dannie. "I was unfamiliar with the hospital, but everyone I met went above and beyond to help make my visit easy and convenient."

A few weeks later in March 2019, Dannie underwent direct anterior hip

surgery at McLeod Health Seacoast.

She spent one night in the hospital.

"I received excellent care after my surgery," said Dannie. "From the nurses to the rehabilitation team, I could not have asked for better treatment."

Dannie returned home to Darlington the next day and continued rehabilitation with McLeod Home Health. During her two-week follow up with Dr. Walsh, Dannie showed off her progress by picking up her walker and walking across the room.

"Dannie was an excellent candidate for direct anterior hip replacement," said Dr. Walsh. "After surgery, Dannie could immediately bear weight on her hip which enabled normal range of motion and function, and a faster resumption to daily life."

With her new hip in place, Dannie stays active and enjoys activities that previously caused her pain.

"I am finally learning the sport of pickleball and playing multiple times a week at the local Country Club," said Dannie. "I cannot thank Dr. Walsh, his amazing team and the health care workers at McLeod Health Seacoast enough for the outstanding care I received."

Dannie no longer suffers from excruciating hip pain thanks to McLeod Orthopedic Surgeon Dr. Christopher Walsh of McLeod Orthopaedics Seacoast.



Medical Director of McLeod Orthopedic Services, specializes in knees, shoulders and sports medicine.

"As orthopedic surgeons, we diagnose and treat a variety of conditions affecting the body's bones, joints and muscles."

> - Dr. Pat Denton Orthopedic Surgeon and Medical Director of **McLeod Orthopedic Services**

An Orthopedic Team

Backed by Strength and Diversity

by Kristie Gibbs

Treating orthopedic patients takes precision, compassion and a high level of expertise. Whether the condition is the result of a trauma, a necessary joint replacement, a sports-related injury or a congenital deformity, receiving specialized care is critical to each patient's treatment and recovery.

McLeod Orthopaedics is a team of highly specialized orthopedic surgeons, physician assistants and nurse practitioners who use their wide range of skills and knowledge to treat patients of all ages and ailments. Each member of the team possesses individual talents which complement each other.

Serving patients from the Midlands to the Coast, McLeod Orthopaedics provides an extensive range of advanced surgical and non-surgical orthopedic services and employs the latest advancements in orthopedic care. These services include: joint reconstruction, sports medicine, orthopedic surgery, pediatric orthopedics, foot and ankle surgery, hand and upper extremity surgery, and trauma surgery.

"As orthopedic surgeons, we diagnose and treat a variety of conditions affecting the body's bones, joints and muscles," said Dr. Pat Denton, Orthopedic Surgeon and Medical Director of McLeod Orthopedic Services.

"Because our team is very diverse with each doctor specializing in different types of orthopedic medicine, our practice handles a wide range of injuries and diseases affecting the musculoskeletal system such as arthritis, fractures and genetic abnormalities.

"Our team's focus is on getting patients back to doing what they enjoy," continued Dr. Denton.

McLeod Orthopaedics is continuously pursuing ways to meet the growing orthopedic needs of the communities it serves by elevating the level of orthopedic care for patients across the McLeod Health system. They are a team, which has grown in expertise, talent, and the delivery of new surgical techniques and procedures, all to the benefit of patients.

From general orthopedics and joint reconstruction to orthopedic trauma, pediatrics and sports medicine, each provider shares one goal -- to deliver exceptional, compassionate care to the patients they treat.

McLeod Orthopaedic has offices located in Florence, Cheraw, Manning, Hartsville, Sumter, Dillon, Carolina Forest and Little River.

AN ORTHOPEDIC SPECIALIST FOR EVERY JOINT



Sports Medicine

Dr. Pat Denton

Dr. Zac DiPaolo

Dr. Thomas DiStefano

Dr. Art Jordan

Dr. Jeremy McCallum

Dr. Christopher Stanley

Dr. Kevin Pugh Dr. Jeremy Sparkman **Pediatric Orthopedics** Dr. Albert Gilpin

General Orthopedics, Non-Surgical Dr. Peter Lukowski

Dr. Nigel Watt

Head Coach Gets an Assist from McLeod Orthopaedics



by Leslie A. Mikell

Coach Jeri Porter is not one to stay on the bench. During games, the Francis Marion University women's basketball team head coach can be seen pacing the court sidelines, coaching her squad and analyzing the next play. However, an old injury threatened to keep her on the bench.

Her story actually begins in January 1993, when a terrible car accident dislocated her left hip. She was told that it could lead to arthritis, but went the next 20 years without any major issues.

Around her early forties, Jeri began noticing some arthritic ache in her hip, but the pain was manageable with over-the-counter anti-inflammatories. However, after several years of managing the discomfort on her own, Jeri's pain finally escalated to the point that she was unable to walk at times. Simply standing up out of a chair would cause her hip to lock up.

"The pain made my duties as a coach much more difficult," explains Jeri.

"I cut my standing time into increments just to make it through a twohour practice, and hours-long bus travel to away games became miserable."

The final straw for Jeri was when she began to lose sleep at night due to her hip pain.

Jeri decided it was time to seek further treatment, so she called to schedule an appointment with McLeod Orthopaedics. She saw Physician Assistant Dean Huiet, and he ordered X-rays of her hip.

"He said to me, 'Coach, you have no cartilage left. You are experiencing pain because it is bone-on-bone."

To treat the degenerative arthritis pain, the first line of treatment for Jeri was quarterly steroid injections in her hip. These injections helped, but they did not completely alleviate her pain. Jeri added that after five to seven weeks of relief, she regressed to where she started.

One year and four injections later, Jeri called McLeod Orthopaedics to see Physician Assistant Dean Huiet again and reevaluate her situation.

"Dean and I decided together that the shots were not a long-term solution," said Jeri.

Dr. Thurman

demonstrates

the anterior hip

replacement using

the artificial joint.

"This surgery has given me a new lease on my family, my career and my life. I am so grateful and excited to be pain free. If I could change anything about the process, I just would have done it sooner."

- Coach Jeri Porter

"He offered that since I was younger and fairly active, I could be an ideal candidate for an outpatient anterior hip replacement, and he matched me with **Dr. Chad Thurman.**"

Dr. Thurman, a surgeon with McLeod Orthopaedics since August 2019, specializes in the direct anterior approach for hip replacement surgery.

An anterior hip replacement is less invasive than a traditional hip replacement because it leaves the hip muscles undisturbed. By reaching the hip joint from the front of the hip as opposed to the side or back, the anterior approach is less invasive and requires a shorter incision. This leads to a shorter hospital stay, less pain and a faster recovery.

"Jeri was an ideal candidate for an anterior hip replacement because of her active lifestyle," explains Dr. Thurman.

On the day of her surgery, July 7, 2020, Jeri arrived at McLeod Regional Medical Center at 5 a.m. and by 5 p.m. she was at home relaxing in her recliner.

She received physical therapy in her home with McLeod Home Health and then continued rehabilitation with a local facility

"The moment I came out of surgery, I only had pain from the procedure, and there was no more pain from the degenerative arthritis," recalled Jeri.
"Dr. Thurman said I would get to the point after six or seven months where I would not even think about my hip."

In six weeks, she was walking and exercising regularly. After six months, she returned to her full coaching routine prior to the arthritis pain and had already lost 20 pounds.

"From scheduling to intake to recovery, my overall experience was amazing, and I feel extremely blessed to have had Dr. Thurman and the McLeod team care for me," explained Jeri. "He is innovative and one of the best in the country at what he does."

Jeri recommends McLeod to anyone considering a hip replacement.

In her sixth year as women's head basketball coach at Francis Marion
University, and 28 years into her coaching career, Jeri felt she had perhaps five more years of coaching ahead of her. But now, after her anterior hip replacement, she feels she can keep going longer.

"This surgery has given me a new lease on my family, my career and my life. I am so grateful and excited to be pain free. If I could change anything about the process, I just would have done it sooner."



"I will never forget the day in 2016 when the nurse called me and said the doctor needs to speak with you," said Joe Poston. "**Dr. Winston Vaught** has been my urologist for several years, and I knew he was not calling to ask me if I was having a good day. His next words knocked me off my feet. He said, 'The biopsy shows that you have prostate cancer."

Joe's biopsy indicated cancer in only one of the 12 tissue samples, so after a detailed discussion, he and his physician decided to do active surveillance. Since prostate cancer tends to grow slowly in older men it is not unusual to simply monitor the cancer closely with physician visits one or two times a year.

Over the next four years, Joe's urologist monitored his PSA, a protein produced by both cancerous and non-cancerous tissue in the prostate.

In early 2020, the PSA had increased to a level possibly indicating metastasis, or spreading, of the cancer. A biopsy detected cancer in four tissue samples, confirming the need for treatment.

"I did a great deal of research and decided to pursue radiation treatment rather than surgery," said Joe. "When I met with **Dr. Virginia Clyburn-Ipock** at McLeod Radiation Oncology, she was very thorough in explaining the treatment, side effects and long-term results.

"I had prepared several questions, and she took time to discuss each concern in detail. I left her office that day realizing that my life would never be the same."

Joe says he cannot explain the range of emotions you experience during a battle with cancer. "Each day has to be approached as if you are getting ready to ride a roller coaster at an amusement park. Mentally you have to prepare yourself for the ups and downs that will occur.

"I remember arriving for my first appointment with Dr. Clyburn-Ipock. I looked up at the building as I approached it, and the words McLeod Cancer Center tore at my heart. However, the moment I walked into the Cancer Center, I felt more at ease. Everyone I encountered from the Security Officer at the entrance to the staff at Dr. Clyburn-Ipock's office was kind, caring and professional."

Joe began his 39 radiation treatments on June 15, 2020 during the height of the COVID-19 pandemic.

During his treatment, Joe said he never felt like a cancer patient. "Either Dr. Clyburn-Ipock or Dr. Larry Grubb met with me weekly, taking time to address my concerns and update me on how they felt I was responding to treatment.

They both made me feel as if I was the most important patient they had each time I saw them. That fact alone made my journey less stressful."

Joe was also touched by a few of the Radiation Oncology staff members. "Amanda, the receptionist, was always kind and like a ray of sunshine when I called from the parking deck to tell her I had arrived. And, Morgan and Amy were the two radiation therapists who positioned me for treatment each day. I cannot say enough about these amazing women. However, I want to add that every employee I encountered at the Cancer Center should be commended for the job they do."

On August 13, Joe rang the bell, signifying the end of his cancer treatment. He celebrated with Morgan and Amy since Joe's wife Carol was unable to attend due to the COVID-19 no visitor policy in the Cancer Center. "I was quite emotional the day I finished treatment because Carol was not with me, and it was the anniversary of my mother's passing in 2003. But, it was still a good day."

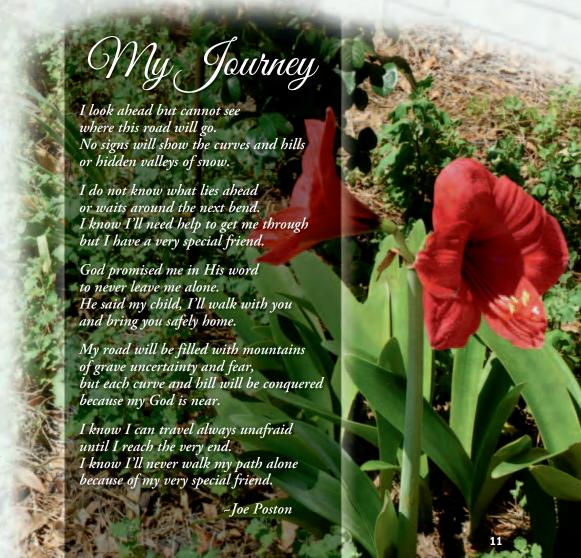
Joe explained that his journey was much better because of everyone at the McLeod Cancer Center, but he said he could not have made it without his faith in God. "Two days before my treatment began, God gave me the words to a poem I wrote. I also had my daughter Sandra's very dear friend, Kristy, on my mind during this time as she was undergoing her own journey with cancer.

"Even though I pray for Kristy daily, I wanted to send her some words of encouragement. As I sat on my couch during my quiet time that Saturday morning I thought of my journey about to begin. I listened as God told me, 'You will walk this road, but remember that I am not far behind.' The words of the poem flowed from my pen, and I thought about Kristy. My journey is small compared to what she has already gone through and still must face. I wanted to let her know that we will never walk alone. Psalm 23 says, 'Yea, though I walk through the valley of the shadow of death, I will fear no evil for Thou art with me."

Joe drew a great deal of strength from the words of his poem throughout his treatment and hopes it can bring peace and encouragement to others as they endure their cancer journey.

Today, Joe is looking forward to celebrating with Carol their 55th wedding anniversary in December. A father of three children and "Pops" to his three grandchildren, Joe's passions include his family, the Clemson Tigers, making homemade ice cream, reading and tending to his beloved rose bushes.

Joe has 60 rose bushes in his yard that he dearly loves to tend to and many bear the names of famous people like Queen Elizabeth, Barbara Bush, Dolly Parton, George Burns, Princess Diana, Mr. Lincoln and John F. Kennedy. He often begins his day enjoying some quiet, reflective time outside when the morning dew touches his stunning roses, especially when a bloom has just opened.



Building on Excellence THE NEUROSCIENCE PROGRAM AT McLEOD

by Tammy White

More than two decades of specialized stroke care has served as the foundation for the McLeod Neurosciences Services of today. Driven by a commitment to provide a full spectrum of services to stroke and neurological patients, McLeod Health continues to make great strides in delivering the most advanced care.

"We have seen an increased need for neurological care related to numerous conditions such as seizures, multiple sclerosis, brain tumors and other neurological disorders," said Internal Medicine Physician **Dr. William Boulware.** "It is more important than ever that we continue to cover the entire spectrum of neurology,

Ready to enter the next phase, McLeod established a Neuroscience Steering Committee, chaired by Dr. Boulware, in 2018 to build upon and expand the work that began decades ago. One of the first actions the committee took was to achieve stroke certification in 2019 at each McLeod Health Emergency Department, an affirmation of being equipped to care for patients with stroke symptoms.





The McLeod Neuroscience Steering Committee is a diverse group of professionals, nurses, physicians, advanced practice providers, pharmacists, physical therapists and occupational therapists, as well as administrative leaders working together in a multidisciplinary approach to improve the care of stroke and neurology patients.

"McLeod had all of the basic elements to care for stroke patients," said **Dr. Timothy Hagen,** Medical Director of Neurology for McLeod Regional Medical Center. "However, we were unable to care for them from an interventional perspective -- meaning we could not remove a large vessel blood clot from the brain. Patients who came to McLeod with symptoms of an ischemic stroke, a stroke caused by a blockage from a large vessel blot clot, had to be sent to a referring center. Now, patients can stay close to home for the care they need."

To make this dream a reality the committee needed both a dedicated space and physician to provide this interventional stroke care.

Construction soon began on a Neurointerventional Bi-plane X-ray Suite, located on the first floor of the McLeod Tower. Designed for the emergency treatment of stroke patients, the new suite is equipped with a sophisticated imaging system that allows doctors to follow the blood flow path to the exact location of the issue.

In December 2020, Interventional Neuroradiologist **Dr. Basil Shah**, a specialist trained in using this new equipment to treat such conditions as strokes and aneurysms, joined the team.

"Thirty years ago, this type of treatment would have required an incision into the brain," said Dr. Shah. "Now, we can access these blood vessels through a large artery in the leg to the exact location of the rupture or blockage without causing harm to other areas of the brain.

"This intervention would not be achievable without the technology of the Bi-plane Suite," added Dr. Shah. Bi-plane imaging is used for such procedures as Thrombectomy, a type of minimally invasive surgery to remove a large vessel blood clot from a brain artery.

"Last year, we treated nearly 1,000 stroke patients here at McLeod and had to send approximately 50 of them to medical centers across the state to undergo a Thrombectomy, which is the preferred treatment for large vessel blood clots," said Dr. Hagen. "Because of our advanced technology, these patients can now stay close to home and loved ones for their care."

Endovascular Coilings, a procedure to treat brain aneurysms from inside the blood vessel, are also performed in this suite. Small metal coils inserted into the aneurysm through the arteries that run from the groin to the brain stop the blood from flowing into the aneurysm.

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With the addition of these new procedures came the identification of another area of need -- the nursing care of these patients.

"At McLeod Regional Medical Center, we expanded from a Stroke Unit to a Neuroscience Care Unit so we could combine postoperative neurosurgery, thrombectomy and coiling patients with stroke patients in one unit to deliver comprehensive care," said Amanda Butler, Vice President of Neurology Services.

Another aspect of the Neuroscience program includes telemedicine services for full-time stroke coverage in all McLeod Emergency Departments.

This service, known as TeleSpecialists, is available on an outpatient and inpatient basis 24 hours a day, seven days a week. Any patient exhibiting sudden stroke symptoms can be evaluated at a moment's notice. TeleSpecialists evaluates a patient using a telemedicine portal at the bedside with Board Certified Vascular Neurologists who are well-versed in stroke care.

Committee member and McLeod Emergency Physician **Dr. Joseph Kearney** led the Telespecialists work.

"Reducing the time to evaluate, care for and treat patients leads to better outcomes. Time is brain and receiving prompt care is crucial in these situations," said Dr. Kearney.

In addition to TeleSpecialists, TeleRounding services are available at McLeod Health Loris and McLeod Health Seacoast for patients admitted to the hospital who need to consult a neurologist.

"A trained staff member brings the cart to the patient's room at the scheduled time and facilitates the appointment," said Kelvin Oakley, Assistant Director of Clinical & Support Services at McLeod Loris Seacoast. "TeleRounding advances us to the next level of stroke care for patients."

"The expansion of Neurosciences
Services at McLeod is of enormous
benefit to our community," said
Dr. William Naso, Neuroscience
Committee Member and Neurosurgeon.
"We live in an area with a high incidence
of stroke and brain hemorrhage. A large
number of patients in our region have
significant risk factors for stroke and

intracranial hemorrhage including hypertension, diabetes, obesity, vascular disease, and cigarette smoking. By launching this program, we now have a significant opportunity to better serve many more of our stroke patients."

"McLeod has made an enduring commitment to a broad-based neurosciences program for the health and future of stroke care," added Dr. Boulware.



McLeod Emergency Physician Dr. Joseph Kearney and Christie Martin, RN, Patient Care Supervisor, demonstrate the TeleSpecialists system that provides 24-hour stroke coverage in all McLeod Emergency Departments.

"Reducing the time to evaluate, care for and treat patients leads to better outcomes. Time is brain and receiving prompt care is crucial in these situations."

- Dr. Joseph Kearney

PERSEWERING THROUGH COVID

Nursing Director Shares Lessons Learned During the Pandemic

By Heather West, BSN, RN-BC

During the COVID-19 pandemic, frontline health care workers throughout McLeod Health rose to every challenge, emerging resilient and heroic. Below is a firsthand account from Heather West, the Nursing Director of the McLeod Regional Medical Center Observation Unit, describing how her team has persevered with a relentless determination to keep patients and staff safe and healthy.

On March 27, 2020, I learned of the plan to convert our floor from an outpatient Observation Unit to the longterm COVID area for floor patients.

Relatively new in my role as Nursing Director, I did not know how I would lead my work family into something so unknown while also keeping them safe, motivated and positive. In the weeks that our unit was being converted, our staff began learning about the personal protective equipment (PPE) and protocols involved in caring for COVID patients. I vividly remember the first time we suited up as a group to go into these patients' rooms. I can still see the fear in my staff's eyes as they fought back tears and trembling hands. Despite the fear of the unknown, every single one of them made a choice to care for the patients who needed them.

Posted throughout the Observation Unit are words of encouragement and thank you notes, including this one from a patient, written on a lunch tray.

It was in that moment, I realized that fear would be the greatest barrier to overcome in this journey.

After floor preparation was completed, we opened a hybrid unit with 24 Observation patients on one end and 28 COVID patients on the other. By this time, after working with COVID patients in the temporary area for several weeks, staff were less apprehensive.

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The early preparation was a saving grace for us and what was about to come.

On June 26, 2020, the COVID census exceeded capacity, and we relocated Observation patients to other areas within the hospital to allow us to convert to a full 52-bed COVID floor.

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We remained this way for three months until the first peak ended.

The first peak was brutal. It was unlike anything I have ever professionally experienced. We were truly just existing in survival mode. We battled full Tyvek suits and N-95 masks in the July and August heat. We felt vulnerable and isolated from everyone else in the hospital. Like the rest of the world, we did not have precedent or evidence-based practice to fall back on. The guidelines for COVID care changed almost daily and were difficult to keep up with. The patients were so much sicker than the Observation patients we typically cared for.

By September 20, 2020, we resumed our hybrid model with both Observation and COVID patients. We were both relieved and grateful to have pushed through those difficult months.

We did not want to think of the possibility of a second wave. We still struggled with the isolation from other areas of the hospital, but our staff was healthy, our confidence had improved, and our fears of the unknown had eased with time and experience.

We were now the experts on COVID patients, learning from the first wave and changing some of our original practices. We moved from survival mode to improving mode. Our increased collaboration with Hospitalists allowed us to identify areas of opportunity in care. Critical early intervention and ambulation of these patients proved helpful in preventing complications.

In late November, we were one of the first hospitals in the state to offer the outpatient drug Bamlanivimab to COVID patients. It played a vital role in keeping them out of the hospital. Because the drug was administered via IV infusion, finding a safe location to administer it while fulfilling staffing requirements was a challenge. On November 24, 2020, we initiated the outpatient COVID infusion service in one of our larger patient rooms.

We were now home to three populations of patients -- Observation patients, COVID patients, and COVID infusion patients. COVID numbers continued to rise and on December 7, 2020, we were forced to convert back to a 50-bed COVID unit and two COVID infusion rooms.



McLeod Regional Medical Center Nurse April Sheppard, second from right, and National Guard Medics SFC Blake Rhodes, SGT Walter Braddock, SPC Sam Wiley and SPC Rayni Newman, were presented Challenge Coins from United States Air Force Command Chief Master Sergeant Kevin Thomas, South Carolina National Guard Command Senior Enlisted Leader, for their tremendous efforts caring for COVID-19 patients in the Bamlanivimab Infusion Treatment Area.



Because visitors were restricted due to the pandemic, the nurses and staff went above and beyond to lift their patients' spirits during the Christmas season.

At the height of the second peak we were caring for 74 patients per day on the floor -- 50 inpatients and 24 infusion patients. This lasted until mid-February when the numbers finally declined enough for us to convert back to the hybrid for the third time.

Our entire team learned invaluable lessons from this experience, including the true meaning of teamwork which led to a greater level of trust and respect between nursing staff and providers.

In addition, we saw innovation at work. Even through the isolation we were experiencing, many colleagues throughout the hospital assisted us in unique ways.

• Engineering created the safest environment possible by replacing windows and installing equipment to place our floor under constant negative pressure. They installed UV lights to sterilize the air and massive air conditioners to help combat the heat from the PPE.

"My team has taught me that resilience is not about one person, and it is not simply effective leadership. For us, resilience was a team effort."

- Heather West, BSN, RN-BC, Nursing Director of the Medical Observation Unit

- Operational Effectiveness and Procurement planned early to conserve PPE and other critical supplies.
- We converted the sunroom on our floor to an area where Central Supply could sterilize N-95 masks.
- We created a new service with the infusion rooms and maximized our resources by thinking bigger. We used the availability of the Army National Guard Medics to fulfill the nursing need and increase the number of daily infusion slots.
- Patient Representatives called families to offer moral support.
 Even though they could not give clinical information, families felt more connected to us.
- Athletic Trainers from local schools helped ambulate patients. We found this to be critical in preventing complications during the second wave. Our trainers had never worked in a hospital, but they suited up beside us and brought a new burst of life to the team. They willingly stepped off the elevators with smiles on their faces, ready to work.
- We received donations from the McLeod Health Foundation so we could distribute gifts to our 50 patients who were in the hospital alone on Christmas without their families.

What I am most proud of is how hard this staff has fought for our patients. They did so much more than just show up every day and provide nursing care to COVID patients. Because we were isolated from other areas we relied on, we had to take on many additional tasks to meet the needs of these patients, including but not limited to: microwaving and distributing 50 meal trays three times each day; making multiple trips daily to the lobby or elevators to collect deliveries for patients; troubleshooting computer issues over the phone; hand-delivering all COVID swabs to the Laboratory and picking up COVID medication from the Pharmacy.

I see a team who found a way to push through barriers of isolation and fear to care for more than 3,000 COVID positive patients in their community. My team has taught me that resilience is not about one person, and it is not simply effective leadership. For us, resilience was a team effort -- a conscious choice that we made to overcome our fears. It took all of us, fighting every single day to take care of those patients in the way they deserved. We had to take what initially felt like an impossible circumstance and turn it into an opportunity to grow and learn -- and ultimately succeed -- as a team.



Heather West, BSN, RN-BC, Nursing Director of the Medical Observation Unit, and Jenna Swindler, PharmD, BCPS-AQID, Process Manager and Pharmacist with Operational Effectiveness, spoke with approximately 40 individuals from the Health Ministry of the 7th Episcopal District of the AME Church earlier this year about advancements in the treatment of COVID-19 through outpatient Bamlanivimab infusions. They provided education about the treatment as well as its positive outcomes followed by a Q&A session with the group.

A Stroke Wake-up Call

by Tammy White

The sound of hard coughing from her husband Ron Kimpson woke Delisha at 2:00 a.m. on January 5, 2021. She asked if he was okay, but received an incoherent, mumbled response.

After several prompts, Delisha helped him sit on the side of the bed. Ron simply stared at his hands. Alarmed at this unusual behavior, Delisha called 911. EMS quickly arrived and transported Ron to McLeod Regional Medical Center.

At the hospital, McLeod Emergency Physicians performed a CT scan and an X-ray. Not only did the results show pneumonia, but also indicated Ron had experienced a heart attack as well as a stroke with a blood clot obstructing blood flow to the brain. Treating Ron's stroke became the top priority. McLeod Hospital Neurologist Dr. Timothy Hagen and McLeod Interventional Neuroradiologist Dr. Basil Shah were called in for a consultation.

"The gold standard of care for patients diagnosed with an Ischemic stroke is a drug called tissue plasminogen activator (tPA), which dissolves the blood clot," said Dr. Shah. "If tPA is not successful, we can attempt to remove the clot with the help of sophisticated devices to restore blood flow and prevent further damage."

"Ron had a 'wake-up stroke,' meaning when he went to bed earlier that evening it would be his last known normal," said Dr. Hagen. "This was problematic because tPA has a four-and-a-half-hour window of opportunity for administration. Since he woke up with the stroke we could not determine when it began, which eliminated Ron as a candidate for the tPA clot-busting medication."

Dr. Hagen and Dr. Shah met with Delisha and explained that the blood clot needed to be removed from Ron's brain using a procedure called Thrombectomy.

A Thrombectomy involves using advanced imaging technology to remove a blood clot from an artery in the brain and restore blood flow. To remove the clot, a catheter, or long flexible tube, is inserted through an artery in the groin up to the blocked artery. Time is of the essence with the Thrombectomy procedure, and not all hospitals are equipped with the staff, training and equipment necessary to perform this procedure.

At McLeod Regional Medical Center, a dedicated Neurointerventional Bi-plane X-ray Suite for such procedures as Thrombectomy has an imaging system that produces highly detailed three-dimensional views of blood vessels heading to the brain and deep within the brain.

This technology allows doctors to follow the blood flow path to the exact location of the issue. Designed for the emergency treatment of stroke patients, the suite includes two rotating cameras, one on each side of the patient, to take images simultaneously. The cameras can be rotated to study the blood vessels from multiple angles.

The Bi-plane X-ray imaging helps guide the catheter to the blocked artery. Once there, a stent retriever, a tiny netlike device, is inserted into the catheter and guided to the blockage to capture the clot and return blood flow back to the brain.



Delisha Kimpson credits Mary Baker, MSN, RN, McLeod Neurosciences Nurse Navigator; Dr. Timothy Hagen, McLeod Hospital Neurologist; Dr. Basil Shah, McLeod Interventional Neuroradiologist; and Dr. Anil Om, McLeod Cardiologist; were the right people needed at the right time to provide stroke care for her husband Ron.

"I was scared," said Delisha. "I had faith in the hospital's capabilities, but this was my husband. I walked by his side as they wheeled him to surgery."

Ron helped McLeod make medical history as Dr. Shah performed the area's first Thrombectomy procedure on January 5, 2021.

The Neuroscience Intensive Care Unit staffed by nurses who are specially educated in the care of stroke patients cared for Ron after his surgery. He spent two days in the Intensive Care Unit and three days on the Neurology Nursing Unit before returning home.

To help with his recovery Ron received assistance from McLeod with cardiac rehabilitation and speech therapy.

"Ron is doing so well," said Delisha.
"You would never know he had a stroke at the beginning of the year.

"He is a diabetic and on blood pressure medicine, but he never took these conditions too seriously before his stroke. For the 17 years we have been married, I would consistently remind him to take his medicine, but he would not do it. Now, he does it all on his own. Ron is more concerned about his health than he has ever been," added Delisha.

Ron had originally been scheduled to undergo a heart catheterization one day after his stroke occurred with McLeod Cardiologist **Dr. Anil Om**. Ron's Primary Care Physician **Dr. Charlotte Francis** of Pee Dee Regional Family Medicine referred him to Dr. Om when he went to her with complaints of shortness of breath and cough.

When Ron finally underwent his heart catheterization, Dr. Om diagnosed him with a weak heart due to his unmanaged diabetes and blood pressure. Dr. Om prescribed medication and to help increase his heart strength, Ron began daily walks and bike rides.

"This stroke was a wake-up call for me," said Ron. "I have made positive changes in my life. I make sure to get out and move each day while setting goals to lose weight and do whatever is necessary to stay on track and get healthy.

"My family has been incredibly supportive and even embraced these changes by eating healthy meals. In my youth I never ate healthy and now, I am paying for it as an adult at only age 40. I do not want my children to ever have to go through what I experienced."

A New Home for Extraordinary Care



The campus of McLeod Regional Medical Center looks a little different these days. Located between the McLeod Pavilion Tower and McLeod Medical Park East sits a building where emergency and trauma teams save lives, neonatal babies thrive, newborns bond with their mothers and gastrointestinal specialists perform highly technical procedures.

McLeod Pavilion East is home to the new McLeod Regional Medical Center Emergency Department, Advanced Endoscopy and Recovery area, Neonatal Intensive Care Unit (NICU), and Postpartum and Gynecological Services.

Emergencies happen and when they do, receiving care quickly is vital.
Whether it is a multi-vehicle crash, heart attack, stroke, or broken bone, time is of the essence.

The new McLeod Emergency
Department provides a comfortable
healing environment and greater access
to the very best emergency and trauma
physicians and clinical teams the region
has to offer.

This is the first move of Emergency Services since the 1979 relocation of McLeod Regional Medical Center to its current address on Cheves Street. "The new Emergency Department helps us meet the needs of the population served in the northeastern region of South Carolina," said **Dr. Thomas Lewis**, Medical Director of Emergency Services at McLeod Regional Medical Center. "With 81 patient rooms, the Emergency Department is designed to serve nearly 110,000 patients a year.

"The new space benefits patients, improves patient care and enables our doctors, nurses, and clinicians to quickly and efficiently meet the needs of emergency and trauma patients who seek lifesaving treatment at McLeod."

With the area's highest trauma designation, the McLeod Emergency Department includes state-of-the-art trauma rooms, triage rooms for immediate patient evaluation, a covered drop-off area for patients at the front entrance, and lab and radiology located in the department for quick access.

(Continued on next page)

"While the
McLeod Emergency
Department is the
environment where our
medical teams do their
work, it is the people
who make that work
lifesaving."

The McLeod Neonatal Intensive Care Unit (NICU) features stateof-the-art equipment to care for the most critically ill babies of

the region.

- Dr. Thomas Lewis,
Medical Director of Emergency Services
McLeod Regional Medical Center

The new department also includes a private consultation room for providers to meet with family members, a new helipad adjacent to the ambulance entrance, and five ambulance bays at a dedicated entrance. The spacious waiting area also offers a warm and comfortable environment for visitors.

"While the McLeod Emergency
Department is the environment where
our medical teams do their work,
it is the people who make that work
lifesaving," said Dr. Lewis. "The hearts
and souls of our medical teams are in
everything they do. Each and every
patient who enters the doors at
McLeod is a valuable life, and many of
these patients have life-threatening
conditions.

"Our team is equipped and stands ready to deliver the care they need."

The McLeod Emergency
Department medical team consists
of well-trained and experienced
emergency medicine physicians and
nurses, trauma surgeons, general
surgeons, neurosurgeons, neurologists,
orthopedic trauma surgeons, pediatric
intensivists, oral and maxillofacial
surgeons, and plastic and reconstructive
surgeons.

"The McLeod Emergency
Department serves a vital role in our
communities," said Will McLeod,
Administrator of McLeod Regional
Medical Center. "It is a crucial
component to the effective management
of acute illnesses and injuries.

"By relocating the Emergency
Department to the east side of the
campus we are opening access, creating
capacity and providing the most up-todate services for our patients."

In its new location, the McLeod Emergency Department occupies the first floor of the newly constructed four-story building.

The Advanced Endoscopy and Recovery area, located on the second floor, is equipped with the latest technological advances and provides space for McLeod gastrointestinal specialists to perform a full range of highly technical procedures with state-of-the-art equipment.

The 25 endoscopy rooms, 20 transitional rooms, 15 procedure rooms and spacious patient rooms and family waiting areas opened for patients in April 2021.

The third floor adds much needed space for the relocation of the Neonatal Intensive Care Unit (NICU). The 48 private rooms provide rooming-in opportunities for families as well as adjoining rooms for families with multiple babies, allowing them to move freely between each room. The McLeod team of Neonatologists, Neonatal Nurse Practitioners, and specially-trained nurses and care teams deliver the most advanced care to the tiniest of babies.

As a Level III NICU, the highest designation in the region, the McLeod NICU cares for babies weighing less than even one pound.

McLeod Women's Services also has a new home for postpartum and gynecological care. The addition of approximately 31,000 square feet on the fourth floor created space for 40 new spacious OB/GYN suites. This area has been thoughtfully designed for the comfort and convenience of the patient and includes bathrooms with enhanced safety accessibility features such as walkin showers. This is especially helpful for new mothers and women recovering from GYN procedures.

The suites also feature bathing sinks to enjoy baby's bath time as a family and adjustable bassinets that provide greater security and ease for both mom and baby.

"Enhancing our facilities is part of our continued commitment to be the choice for medical excellence," said McLeod. "With the support of the community, McLeod has cared for families of this region for 115 years. As our McLeod family looks to the future and with the opening of the new McLeod Emergency Department, Advanced Endoscopy, NICU, and Women's Services the teams remain deeply committed to our pledge to improve the health and well-being of our families, friends and neighbors for years to come."





Despite the many challenges presented by the COVID-19 pandemic over the last year, McLeod Health Cheraw has undergone a season of transformation with the addition of a new hospital administrator as well as several major infrastructure improvement projects.

In late fall 2020, Bren Lowe, started his new role as Administrator of McLeod Health Cheraw. His first objective was to listen and learn. He gleaned valuable information from extensive feedback of local McLeod physicians, leadership teams, employees and community members.

Next steps involved strategizing on existing strengths to build upon and services to grow. The focus of this work centered on ensuring the availability of superlative medical care in Cheraw.

A health care executive with more than 13 years of experience in acute and outpatient care, Bren brings a wealth of knowledge to McLeod Health Cheraw.

He previously served as Chief Executive Officer for three medical systems since 2008 in Wyoming and Montana.

With a proven track record in transforming financial, clinical and service performance -- clearly the hospital is in great hands with a bright future

Bren spent his entire childhood and most of his health care career living and working in rural America, so South Carolina seems like familiar territory to the Lowe family. He feels the greatest asset of rural communities is the humanity of its people. Personal and familial connections drive the values that knit people together as neighbors, and friends.

As Chesterfield residents, Bren, his wife Melinda and their six children have already become part of the community. They have seen firsthand the need for local quality care and the importance of supporting their own rural hospital.

"Trust is vital for any health care delivery system. The key to success will be consistently delivering on our promise to serve those around us in an honorable way. As a health institution, we must stick to a higher standard of integrity in all we say and do in order to maintain confidence in our brand, our services and our diagnoses," said Bren.

Much work is being done to target educational outreach while providing relevant health information to the surrounding communities to meet the needs of residents. Another focus will be connecting residents to local primary care physicians as one more crucial way to develop a healthier community.

"We have found that the overwhelming majority of community members who currently have an established family doctor, trust and respect their advice," explained Bren. "In addition, patients who see their physician on a regular basis often tend to dramatically improve their overall health.

"In Cheraw, we truly are local people who are caring for local people," he continued. "It is an exciting time for us as we look to the future. We want to make obtaining health care easier for anyone who needs it -- when they need it. That is why we are constantly working on ways to bridge any gaps in care for residents which requires flexibility and ingenuity on our part.

"Trust is vital for any health care delivery system. The key to success will be consistently delivering on our promise to serve those around us in an honorable way." - Bren Lowe

Administrator, McLeod Health Cheraw



the community during tours of the new space.

"We are growing and tailoring our services to better serve the community in addition to making improvements to our

Several growth initiatives have recently been completed at McLeod Health Cheraw including a massive expansion of the hospital's Intensive Care Unit, a new inpatient Hospice Room and the addition of Bone Density Screenings.

"If you come to us for your care and we do not have a specialty service available here that you need, our goal is to get you to one of our sister hospitals within the McLeod Health system," said Bren.

"Our hospital has such an opportunity before us to make a real difference in turning around the current population health of our communities. This is a pivotal time to step in and commit to create a healthier tomorrow."

The healing, care and comfort that McLeod teams provide at the patient's bedside to interactions in the hospital hallways, will cause a positive ripple through the community. Each day, McLeod employees are presented with constant opportunities to make a lasting impression on others as they connect through their calling to take care of their community.

A Change of Heart

by Jennifer Hulon

Chris McDaniel stays busy driving a semi-truck, often cross-country. When home, he spends as much quality time as possible with his four children and wife, Mary. Little did Chris know that one summer day would change his busy life forever.

In July 2020, 35-year-old Chris suddenly became short of breath, along with chest pain, cough and congestion with a headache.

Because Chris's symptoms mimicked COVID-19, his wife drove him to a local hospital near their home in North Carolina, where he tested negative. However, the physician discovered that Chris had pneumonia and prescribed him an antibiotic as well as an inhaler to help alleviate Chris's symptoms.

Two days after leaving the hospital, Chris's symptoms seemed to worsen. He had to use his inhaler every two hours to breathe.

The next day, Chris and Mary started their day doing yard work.

While Chris was on the lawnmower, Mary noticed his ankles were much larger than normal. She asked him about it, and he told her his ankles had been swelling over the past few days. When Chris's speech suddenly became slurred, Mary immediately drove him to the McLeod Health Loris Emergency Department.

Upon Chris's arrival, attending physician **Dr. Michael Morgan** found Chris's heart rate to be extremely high and administered a medication to normalize it.

Chris had an adverse reaction, and his blood pressure dropped to 22/16. This is dangerously low, considering a normal blood pressure reading is 120/80. The medicine was stopped, but his blood pressure remained low.

Chris suddenly went into cardiac arrest.

Dr. Morgan and his team performed CPR as well as an emergency cardioversion, shocking his heart back into a normal rhythm. After the medical team stabilized Chris, he was placed on a ventilator.

Chris's heart was in atrial fibrillation and in cardiogenic shock.

Atrial fibrillation simply means irregular heartbeat. When the heart's electrical signals do not fire correctly, it can lead to a heartbeat that is too fast. Cardiogenic shock is a serious condition that occurs when the heart cannot pump enough blood and oxygen to the brain, kidneys and other vital organs.

Because of the quick response of Dr. Michael Morgan and his team, Chris is improving each "At this point, numerous medications were supporting Chris's poorly functioning heart," said Dr. Morgan. "Chris was critically ill, and I did not know if he would make it through the night."

Due to his quick decline, Dr. Morgan met with Mary and discussed Chris's condition.

Dr. Morgan explained that Chris needed to be transferred to McLeod Regional Medical Center in Florence for additional cardiac support.

McLeod HeartReach was then deployed to McLeod Health Loris to transport Chris.

The McLeod HeartReach Mobile Critical Care Unit provides emergency transport services to hospitals and patients throughout the 18 counties served by McLeod Health. It is equipped with cardiac monitors, defibrillators, pacemakers, a ventilator, hi-tech IV pumps, blood pressure equipment and the capabilities for a 12-lead electrocardiogram (EKG). The technology and personnel available in transport is equivalent to the care received in an Intensive Care Unit at a medical center. McLeod HeartReach offered Chris the lifesaving support needed for safe transport.

Upon Chris's arrival to
McLeod Regional Medical Center,
Interventional Cardiologist
Dr. Fred Krainin with
McLeod Cardiology Associates
took over Chris's care.

An echocardiogram revealed Chris had a very weak heart muscle, with only a 10 to 15 percent pumping function.

"Chris's story is a testament to the expert

outcome possible for our patients."

coordination of medical teams at each of our

McLeod Health hospitals to achieve the best



David Cooley is one of several Critical Care Paramedics who provide emergency transport services through the McLeod HeartReach Mobile Critical Care Unit.

"Chris had a poor prognosis due to his low-functioning heart," said Dr. Krainin.

A cardiac catheterization showed that the arteries to his heart were normal. Chris was officially diagnosed with cardiomyopathy, which is a weak heart muscle. Dr. Krainin placed Chris on another medication to maintain and hopefully increase his heart function.

Chris responded well to the medication and continued to improve throughout the week. Dr. Krainin felt Chris could be discharged with certain precautions in place.

Chris was given a LifeVest, which is a wearable cardioverter defibrillator. Since Chris previously went into cardiac arrest, Dr. Krainin was concerned about a reoccurrence. The LifeVest allows a patient to return to most of their normal daily activities with the peace of mind that they will have protection from sudden cardiac death. Chris wore the LifeVest for four months, offering his heart time to heal.

During that time, Chris experienced a strong recovery. His heart pumping function increased to 35 to 40 percent.

"Chris's story is a testament to the expert coordination of medical teams at each of our McLeod Health hospitals to achieve the best outcome possible for our patients," said Dr. Morgan.

"I am very thankful for all of the care I received during my time at McLeod Health Loris and McLeod Regional Medical Center," added Chris.

- Dr. Michael Morgan



Mary Ammons and her husband, Nick, longed for a sibling for their son Hayes. The journey proved difficult, as the couple battled infertility for almost two years.

"After being diagnosed with Polycystic Ovary Syndrome, I underwent multiple failed fertility treatments, the last of which resulted in miscarriage," said Mary.

The Ammons were devastated and on the verge of giving up.

"I then made an appointment with **Dr. Stephen Jones**, a new OB/GYN who had recently joined McLeod Health Dillon," said Mary. "He was our last hope."

Mary and Nick began fertility treatments under Dr. Jones' supervision in November 2019.

Mary's treatment regimen included medications, testing and injections to improve her chances of becoming pregnant.

The following April, Mary took a pregnancy test -- and it was positive. "I was cautiously excited," recalled Mary.

"We did not know for sure if the pregnancy would be viable. My initial hCG levels showed I was pregnant, but the levels were extremely low.

"I could not imagine going through yet another miscarriage."

Human chorionic gonadotropin, or hCG, is a hormone produced when a woman is pregnant. Rising hCG levels indicate a pregnancy is progressing as it should.

Dr. Jones ordered lab work on Mary every few days. As time passed, Mary's levels continued to rise, and the Ammons breathed a sigh of relief.

Throughout her first trimester,
Mary frequented the medical practice
to be monitored. "Dr. Jones gave me the
confidence and reassurance I needed,"
said Mary. "That was extremely
important to us after our fertility
struggles and miscarriage.

"I remember the day we were able to see our baby on the ultrasound and hear the heartbeat," said Mary.

"I am happy that
Mary and her family
did so well and were
able to bring a healthy
daughter into their
family."

- Dr. Stephen Jones

Mary Ammons is appreciative of the compassionate medical care she received from Dr. Stephen Jones of McLeod OB/GYN Dillon. Dr. Jones has more than 30 years of experience providing obstetric and gynecological care to women of all ages.

"I will never forget the tears of happiness and the gratitude I felt that day."

On December 7, 2020, at 12:41 p.m., Mary and her family welcomed their daughter, Emma Grace, into the world.

"As I held her in my arms and gazed into her eyes, I was overwhelmed with emotion," recalled Mary.

"Nick and I had endured so much to get to this moment, and the journey was worth it all. Dr. Jones helped us complete our family, and we will always be grateful to him."

"Providing health care for women is an honor and a privilege that I do not take lightly," said Dr. Jones. "I am happy that Mary and her family did so well and were able to bring a healthy daughter into their family."

The COVID-19 pandemic presented a new challenge during Mary's childbirth experience. "Like many new parents, our family and friends could not visit us in the hospital due to visitation restrictions," added Mary. "However, it was a blessing to really bond and enjoy every moment with our sweet blessing."

What is Polycystic Ovary Syndrome?

Polycystic Ovary Syndrome (PCOS) is a hormonal imbalance disorder common among women of reproductive age, affecting up to 10 percent of women.

In PCOS, a hormonal imbalance can prevent ovulation from occurring, often causing infertility. Other symptoms include irregular menstrual cycles, ovarian cysts and weight gain.

PCOS is one of the leading causes of infertility. However, with diagnosis and treatment, many women with infertility due to PCOS are able to conceive. Medication may be prescribed to regulate the menstrual cycle and boost ovulation. Lifestyle changes such as increasing exercise, eating healthier and losing weight may also help fertility.



TRANSFORMING HEALTH CARE IN THE MIDLANDS

by Carrie Anna Strange

As the area's health care leader, McLeod Health Clarendon continues to fulfill its mission to improve the health and well-being of the residents in Clarendon and surrounding communities.

Clarendon Health System joined McLeod Health on July 12, 2016 and began a season of transformation that continues even today. "As a testament of our commitment, we are continually developing plans to expand our services, staff and medical capabilities," explained Rachel Gainey, McLeod Health Clarendon Administrator.

The highly-skilled physicians and medical staff at McLeod Clarendon provide a wide range of services from Emergency and Critical Care to Labor and Delivery and Surgery.

The hospital also offers Infusion, a
Sleep Lab, Radiology, Laboratory, a
Wound Care Center and a Swing Bed
Unit. In addition, Cardiac, Speech,
Physical and Occupational Rehabilitation
services are located at McLeod Health
and Fitness Center Clarendon. Also
available at the hospital are Cardiology,
General Surgery, Orthopedics and
Urology specialty services. The
continuum of care for patients outside
the hospital setting is provided by
Home Health, Hospice, Nurse-Family
Partnership, Sports Medicine and
Occupational Health.

Renovation and Expansion

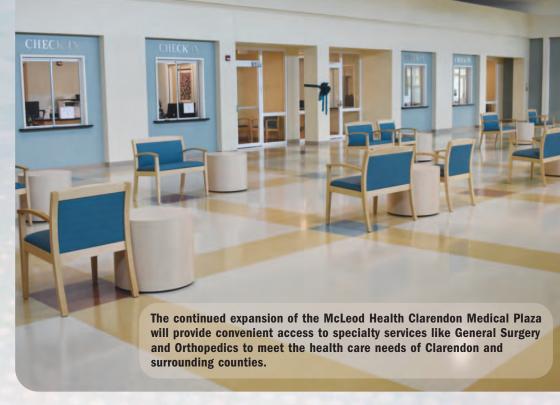
Numerous projects have been completed to renovate and modernize areas within McLeod Health Clarendon. These efforts include the recent expansion of the Intensive Care Unit (ICU), which has been crucial in the care of COVID-19 patients.

The expansion offers increased square footage to allow for more spacious patient rooms and a designated exam room. There is also a private family consult room for providers to meet with family members as well as a family waiting room.

"When patients suffer a critical illness or injury, they want quality care close to home," stated Rachel.
"Our ICU patient volumes have rapidly grown over the past few years. Not only does this renovation underscore our continued investment and commitment to bring quality health care to Clarendon and all communities from the midlands to the coast, but it also allows patients and their families to heal and recover close to home."

McLeod Medical Plaza Clarendon also recently underwent its initial phase of development with the addition of the new McLeod Family Medicine Rural Residency Program, McLeod Primary Care Clarendon, McLeod Rehabilitation Clarendon and The Spa at McLeod Health Clarendon.

The second phase of development will include additional medical office space for primary and specialty care services. Expected completion of phase two is late fall 2021.



Increasing Access to Primary Care and Specialty Services

To increase access to primary care, the McLeod Family Medicine Rural Residency Program launched its first class of residents in June 2020.

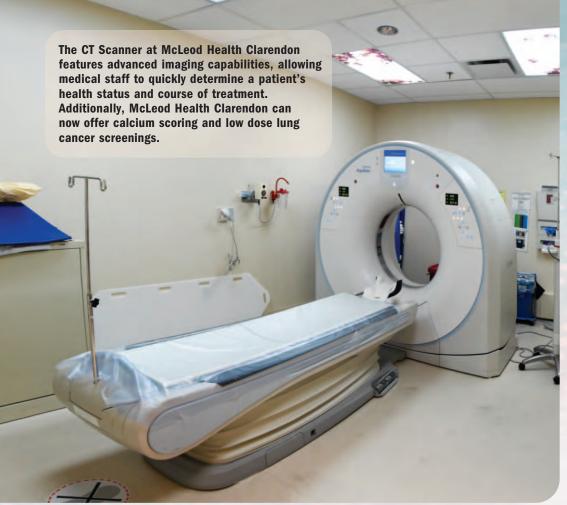
The Intensive Care Unit expansion includes increased square footage for more spacious patient rooms and improved functionality, allowing patients to heal and recover close to home.

The mission of the McLeod Family Medicine Residency Program is to graduate skilled physicians committed to intensive training in caring for patients and practicing the full scope of Family Medicine, particularly in rural settings.

Resident physicians train in the Family Medicine specialty under the close supervision of physician faculty. They provide care for the entire family -- from delivering babies to end-of-life care -- including pediatrics, women's and men's health and obstetrics. Residents care for patients both in the office and in the hospital. Family Medicine Residents Dr. Kevin Londe, Dr. Laine Way, Dr. Jessica Gordon, Dr. Cecilia Ralyea, Dr. Jarrod Mullen and Dr. Maxwell Pickering serve patients at McLeod Primary Care Clarendon.

"Expanding the McLeod Family Medicine training program into the Manning community provides much needed access to physicians, enhances recruitment efforts, and affords physicians the opportunity to practice medicine in a small community setting," explains Rachel.

(Continued on next page)



In addition to the residency program, McLeod Health welcomed several new providers in 2020 to include General Surgeon **Dr. Danielle Saldana** with McLeod Surgery Clarendon; Hospitalist and Board Certified Cardiologist **Dr. John Rozich**;

Board Certified Orthopedic Surgeon **Dr. Rodney Alan** with McLeod Orthopaedics Clarendon and McLeod Orthopaedics Sumter; **Dr. Michael Ouzts** with Palmetto Adult Medicine; and Certified Nurse Midwife Allison Saran with McLeod Women's Care Clarendon. Additionally, McLeod Primary Care Turbeville was established in the late summer of 2020. Family Nurse Practitioners Amanda McConnell and Abbie Kirby provide primary care for adults and children.

"We are pleased to provide convenient access to primary care in the Turbeville community," said Rachel. "In a time when access to health care is crucial having local providers for primary care is essential in meeting one's health care needs."

Advancements in Technology

McLeod Health Clarendon now offers patients more advanced imaging services through a newly installed CT Scanner and 3D Mammography unit, which includes a breast biopsy attachment.

"Three-dimensional mammography allows early detection and diagnosis of breast cancer and is a highly effective tool in detecting breast cancer long before any physical symptoms develop. Early detection is documented to be critical in reducing mortality rates," Rachel explained. "With the new CT Scanner, we can produce higher quality images with lower radiation and more efficiency.

"When patients suffer a critical illness or injury, they want quality care close to home. Our ICU patient volumes have rapidly grown over the past few years. Not only does this renovation underscore our continued investment and commitment to bring quality health care to Clarendon and all communities from the Midlands to the Coast, but it also allows patients and their families to heal and recover close to home."

Rachel Gainey
 McLeod Health Clarendon Administrator

"This means quicker treatment of acute issues like stroke, which are very time sensitive. It is our mission to continue providing the most advanced diagnostic imaging equipment for our patients."

Installation of a new, state-of-the-art MRI has also begun. With the addition of the new technology, physicians will be able to receive more complex imaging faster. This will provide patients at McLeod Health Clarendon earlier diagnoses.

Additionally, patients will now be able to receive Breast Magnetic Resonance Imaging. This is used as a supplement to mammography and ultrasound imaging for the detection, treatment and monitoring of breast cancer and other possible breast abnormalities.

Quality Health Care

McLeod Health Clarendon has achieved many noteworthy accomplishments to ensure high quality health care for the patients it serves.

McLeod Health Clarendon was recently awarded an 'A' in the Leapfrog Hospital Safety Grade, a national distinction recognizing the hospital's achievements in protecting patients from harm and providing safer health care. The Leapfrog Group is an independent national organization committed to health care quality and safety. The Safety Grade assigns an 'A', 'B', 'C', 'D' or 'F' grade to all general hospitals across the country and is updated every six months. Grades are based on a hospital's performance in preventing medical errors, injuries, accidents, infections and other harm to patients in their care.

Additionally, the hospital achieved the Healthgrades 2020 Outstanding Patient Experience Award™. This distinction recognizes McLeod Health Clarendon as being among the top 15 percent of hospitals nationwide for patient experience, according to Healthgrades, the leading resource that connects consumers, physicians and health systems.

"McLeod Health Clarendon is pleased to receive these quality recognitions achieved through the teamwork and dedication of our entire hospital staff. However, our pursuit of quality improvement is unending. These accomplishments are a positive step in our patient experience and quality journey, yet we recognize that we can never stop improving care for patients. Health care is constantly becoming more complex and challenging, and our team is committed to providing the best care possible to our patients both now and in the future," added Rachel.



Free From the Fire

T.I.F. - Relieving Acid Reflux Beyond the Purple Pill



by Shaw Thompson

Kelly Thompson was ready for a change. Nearly every day, she struggled with persistent heartburn and abdominal pain after eating. The indigestion and discomfort interrupted her sleep, dampened her desire to dine out with family and friends and made much of her daily life miserable.

As a McLeod nurse since 1993, Kelly was aware of the cause of her symptoms. Like more than half the population in the United States, she was experiencing gastroesophageal reflux disease, commonly known as GERD, or simply "acid reflux." This condition occurs when acid secreted in the stomach moves up the esophagus, causing a burning sensation in the middle of the chest, or regurgitation of food in the mouth.

"GERD is so much more than just heartburn," said Kelly. "For me, it was not certain foods that triggered my pain -- I could have avoided them -- but never knowing when it would flare up was awful. I had been on many medications and treatment regimens, used all of the 'purple pill' medications that normally work, but I still had ongoing problems."

The most common treatment option available for this condition is a class of medications known as proton pump inhibitors (PPI). Primary care physicians and gastroenterologists often prescribe PPIs for patients to combat GERD symptoms while enjoying a normal diet. In many cases, patients can access over-the-counter PPIs. For Kelly, the medications helped, but did not bring full relief.

"I consulted **Dr. Guy McClary**, my primary care physician, and asked if there was something else we could try," said Kelly. "We discussed having a diagnostic procedure called an EGD (esophagogastro-duodenoscopy) to determine exactly what was happening. He referred me to Dr. Pannu, and I am forever grateful he did."

McLeod Advanced Endoscopist and Gastroenterologist **Dr. Davinderbir Pannu** performed the EGD to confirm that Kelly's symptoms were truly caused by reflux. Under light anesthesia, Dr. Pannu inserted a specially designed tube, or endoscope, down Kelly's throat that allows gastroenterologists to look inside the body. Not only did the test confirm Kelly's diagnosis, it also revealed a small hiatal hernia in her abdomen. This combination of symptoms and diagnoses made Kelly a perfect candidate for a procedure called a Transoral Incisionless Fundoplication, or TIF.

"The TIF procedure is a method of reinforcing the gastroesophageal valve mechanism with a minimally-invasive endoscopic procedure," said Dr. Pannu. "In Kelly's case, her reflux was caused by a weak lower valve that serves as a natural barrier to acid reflux. TIF is a non-surgical outpatient procedure that allows us to reduce the small hiatal hernia and recreate that barrier."

The positive results of TIF are often a shorter treatment time, less pain and faster recovery than with typical surgical procedures for GERD and hernia.

It is performed using the same endoscope that is used for routine EGD with some modifications.

"I spent one night in the hospital and went home the next day. I really had no pain from the procedure," said Kelly. "The first few weeks of eating a mostly clear liquid diet was the biggest challenge -- lots of popsicles and chicken broth -- but it was worth it."

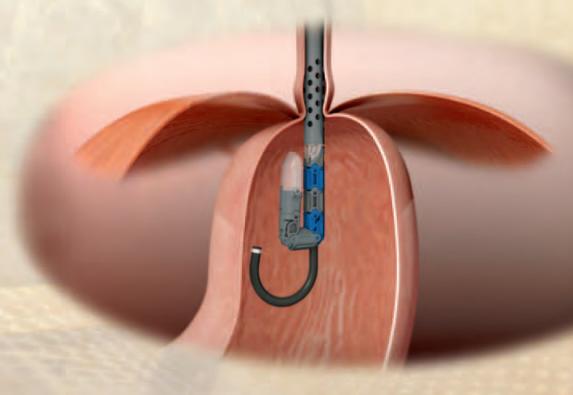
"Many patients who choose this treatment option go home the same day or may, like Kelly, require a short stay in the hospital," said Dr. Pannu. "Antibiotics or other medicines for symptoms may be prescribed. For the first 24 hours following the procedure, patients can have only clear liquids, followed by a week of soft foods, and then gradually returning to a regular diet. Patients will need to rest and recuperate carefully, but most are back to normal physical activities in a few weeks."

For Kelly, it was more than a return to normal activities. It was new freedom from the limits acid reflux imposed on her life.

"Just four weeks after the procedure, I was completely off all acid reducing medications and experiencing no pain or symptoms whatsoever," said Kelly. "Now I sleep through the night with no need for extra pillows to elevate my head and sleep on an incline. I am feeling so much better, and I am optimistic about my outcome."

As with all medical treatments, not all patients are appropriate for every procedure, but TIF is an extraordinary option for many who suffer from acid reflux. Kelly is grateful the choice is available at McLeod and for the skilled hands who provide the care.

"We are really blessed to have advanced specialists like Dr. Pannu at McLeod Health," said Kelly. "I have complete confidence in his expertise. Because of him, I can enjoy my life to the fullest."



Using the TIF Device, McLeod advanced endoscopists can repair hernias that cause acid reflux, relieving pain and discomfort, and limiting the need of regular acid reducing medications.



by Kelly Hughes

This year, Charnique Fairley has already planned several trips for the summer and joined the Delta Sigma Theta Sorority, Inc. to celebrate a new lease on life -- a stark contrast to last year.

In January 2020, Charnique had an appointment with her Ear, Nose and Throat (ENT) physician for chronic sinus

As a nurse, Charnique understood the importance of listening to her body and talking to her doctor when she knew something was not right.

During her assessment, the physician felt a lump in her throat. He performed an ultrasound of her throat and found several nodules near her thyroid gland.

The thyroid gland plays a major role in the body's endocrine system. The thyroid gland releases hormones that help regulate many body functions such as metabolism, growth and development.

Her doctor recommended additional tests and a biopsy to see if the nodules were cancerous. Unfortunately, the biopsy was inconclusive, and her physician recommended a partial thyroidectomy to remove the mass and check for cancer.

With a partial thyroidectomy, only a small portion of the thyroid is removed. Often after this procedure, the remaining thyroid gland can function normally.

In the midst of Charnique's medical concerns, the world was beginning to talk about COVID-19 and the unintended consequences that would soon unfold.

"Hospitals cancelled non-emergent procedures for patient safety, so I was afraid I would be unable to schedule the surgery I needed," Charnique recalls. "The fear of the unknown was really the worst part."

Hospitals across the country, including McLeod Health, were taking steps to minimize the impacts of COVID-19 while also prioritizing medical cases that needed emergent care. Charnique contacted Dr. Mamdouh Mijalli for counsel. She had previously worked with him at McLeod and knew he was an awesome surgeon and passionate about caring for his patients.

In addition to her role as a Population Health Care Manager with CareSouth, Charnique also works PRN, or as needed, as a nurse at McLeod Health.

Dr. Mijalli is a general surgeon at McLeod Loris Seacoast Surgery.

Dr. Mijalli examined Charnique and her previous scans. He agreed she needed a partial thyroidectomy -- and soon. They scheduled the surgery for later that week.

"Charnique had real concerns, and it was important that we removed part of her thyroid," said Dr. Mijalli. "Women are three times more likely to develop thyroid cancer than men. We needed to know if her nodule was cancerous."

While Charnique's procedure went well, she did experience a temporary loss of her voice -- a common side effect after thyroid surgery.

"Dr. Mijalli was amazing. He often called me to check in and do voice exercises with me over the phone," Charnique said. "I have never had a physician make me feel like he did. It was evident he genuinely cared."

At her follow-up appointment the next week, the results from the pathology report indicated that the nodule was cancerous.

"I was devastated and scared, but Dr. Mijalli reassured me that I was going to be fine," said Charnique. "He told me to trust him, and I knew it was a God thing that I had been led to seek out Dr. Mijalli.

I knew I was in good hands."

Dr. Mijalli recommended a total thyroidectomy to remove the remaining part of the thyroid gland. A second procedure was scheduled for the end of August.

A success, the total thyroidectomy completely removed Charnique's cancer and further treatments were not necessary.

"This ordeal has given me a different perspective on life. I want to get out and enjoy this life I have been given," said Charnique. "I want to share my story to encourage others to take control of their health care and trust your instincts when you know something is not right. What started out as sinus trouble that would not go away led me to find thyroid cancer. Everyone needs to make themselves and their health a priority."

"Dr. Mijalli was amazing. He often called me to check in and do voice exercises with me over the phone. I have never had a physician make me feel like he did. It was evident he genuinely cared."

- Charnique Fairley

As a general surgeon, Dr. Mamdouh Mijalli guides patients through unexpected health care challenges.

A LIFESAVING COLLABORATION

by Jessica Wall

Lauren Tilton knew something was wrong. It was late in the day, when her seemingly healthy eight-day-old baby, Roman, began to breathe differently. His breathing was so fast and labored that his chest noticeably pulled in under his ribs. Because of the COVID-19 pandemic, Lauren worried over taking him to the Emergency Department. She instead decided to go to Roman's pediatrician, Dr. John Keith with Eastern Carolina Pediatrics, the next morning. The events that would soon unfold were unimaginable.

Lauren and her husband Trey arrived at Dr. Keith's office and the nurse proceeded to check Roman's pulse on his foot. Lauren noticed that the nurse was trying to remain calm, but was very concerned. Dr. Keith came in and evaluated Roman and then stepped out to speak with the nurse.

A few moments later, he returned and explained that Pediatric Cardiologist Dr. David Steflik was waiting for them at McLeod as soon as they could get to his office. Roman needed additional testing.

"My heart dropped, and I began to cry because this was confirmation that Roman was sick, and we did not know yet what was happening," recalled Lauren.

The Tilton family traveled about ten minutes to Dr. Steflik's office, located on the campus of McLeod Regional Medical Center.

Upon Roman's arrival to his office, Dr. Steflik proceeded with an echocardiogram, a safe and painless test that allows the doctor to evaluate the anatomy and function of the heart. Lauren noticed the look of concern on Dr. Steflik's face.

Dr. Steflik diagnosed Roman with severe coarctation, or narrowing, of the aorta. This is one of the more dangerous heart conditions seen in babies and requires prompt treatment.

The aorta is the largest artery in the body and responsible for moving oxygenrich blood from the heart to the rest of the body. Severe narrowing of the aorta forces the heart to pump harder to move blood through the artery.

"Our top priority in that moment was ensuring that blood flow continued to reach the lower half of Roman's body to avoid organ damage," explains Dr. Steflik.

The Tilton family is grateful for the lifesaving care Roman received at McLeod Children's Hospital.

"Ultimately, we needed to open the ductus arteriosus."

The ductus arteriosus is a blood vessel that connects a baby's left pulmonary artery to the aorta and allows blood to bypass the lungs while the baby is growing in the womb. Shortly after birth, the ductus arteriosus closes, but Roman's remained open, which is called a patent ductus arteriosus. This explains why he did so well for eight days and suddenly showed signs of the condition.

Once Dr. Steflik's nurse connected Roman to a portable monitor, Dr. Steflik quickly walked Roman to the McLeod Pediatric Intensive Care Unit (PICU), with Lauren and Trey following behind him.

When they arrived in the PICU, Pediatric Intensivist Dr. Carl Chelen and his team were ready to begin immediate treatment.

Dr. Chelen placed a catheter into Roman's femoral vein. This allowed him to infuse a medication called prostaglandin to open the ductus arteriosus and stabilize Roman.

Roman also received a breathing tube to help minimize any extra oxygen demand that his body was utilizing to breathe so fast.

The medical team then began working with ChildReach to arrange for Roman's transport to an outside facility for additional care. The McLeod ChildReach ambulance features specialized equipment and paramedics trained to transport critically ill babies.

and Pediatric Intensivist Dr. Carl Chelen, right.

Lauren and Trey were beside themselves.

"Everything happened so fast," recalled Lauren. "One moment we are in Dr. Keith's office and the next we are following a specialist to the PICU to save my son's life. The social worker and several nurses really helped us through those agonizing moments after Dr. Steflik walked Roman into the PICU.

"Once Roman was stable, Dr. Steflik met us outside the unit and explained in detail exactly what was going on with Roman's heart. I remember he sat down and drew a picture so we could get a better idea of what was occurring. Trey and I were both heartbroken and afraid that we were going to lose our son, but fully confident in his care team."

Days later, Roman underwent surgical repair for his condition and is now a happy, healthy baby who enjoys being spoiled by his brother Emerson and sister Sadie Pearl.

"I am so thankful that we have access to these services and specialists locally. Without them, my son might not be alive today. Every day is a special day because we never know what we will face. But, I am grateful to know that McLeod is here to provide those services when we need them most."

Dr. Steflik emphasizes the importance of the immense collaboration that took place in saving Roman's life.

"A delay of even one or two hours may have resulted in the worst possible outcome," explains Dr. Steflik. "His artery was extremely narrow, and once it closes, there is no blood flow to the lower body. Because of the collaboration of Dr. Keith, myself, and Dr. Chelen, we stabilized Roman and remarkably, he suffered no organ damage.

"As the region's Children's Hospital, we are equipped to quickly diagnose and administer treatment that ultimately saves lives. I am honored to work with this team of local experts."



"A delay of even one or two hours may have resulted in the worst possible outcome. Because of the collaboration of the Dr. Keith, myself, and Dr. Chelen, we stabilized Roman and remarkably, he suffered no organ damage."

- Dr. David Steflik

HEALTH CARE AT WORK



McLeod Health recently opened a nearsite location at McLeod Occupational Health Carolina Forest. A second nearsite clinic is located in Florence within the McLeod Support Services Center.

Imagine the ability to see a health care provider at work, or better yet, the ability to call a provider and explain your ailments without ever having to leave the office. Through the services of McLeod Occupational Health and McLeod Onsite Services, this is reality for thousands of employees.

McLeod Onsite Services currently works with 15 companies to provide a variety of health services to their employees. These services include, but are not limited to, primary care and urgent care, pre-placement screenings, wellness programs, immunizations and injections, ergonomic assessments and drug screenings.

Companies such as Honda of South Carolina, Horry Electric Cooperative, Inc., Harbor Freight and OTIS Elevator have chosen to provide onsite health centers for their employees. Through these partnerships, McLeod Onsite Services help employers reduce costs, increase workforce productivity, decrease long-term health and safety risks and ensure compliance with regulatory agencies while improving the health of employees.

With the recent addition of McLeod Onsite Telemedicine, McLeod Onsite Services continues to find other innovative ways to increase health care access among industries and their employees.

In their provision of care, employees connect with a health care provider for non-emergent medical care through a McLeod TeleHealth kiosk.

Individuals can be quickly diagnosed for common illnesses, workplace injuries or recurring conditions such as bronchitis, cough/cold, sore throats, flu and ear infections.

Carolina Canners, Inc. in Cheraw, South Carolina, became the first industry to utilize the McLeod TeleHealth kiosk.

"I appreciate the convenience this option offers," explains Luther Oxendine, Manager of Corporate Environmental Health & Safety at Carolina Canners, Inc. "I simply created an account and met with a provider in a matter of minutes. It was a positive experience from beginning to end.

"Living an hour away, I find great value in this option. It saves me both time and money."

Caring for employees of local businesses and industries for nearly 30 years, McLeod Occupational Health continues to expand its footprint in the region with the addition of new nearsite locations in Florence and Horry counties.

McLeod Occupational Health recently opened two nearsite locations, McLeod Occupational Health Enterprise located at 2210 Enterprise Drive in Florence and McLeod Occupational Health Carolina Forest located at 907 Startek Drive in Myrtle Beach.

Both locations offer a wide range of services, including Department of Transportation (DOT) certified exams and physicals, sick and urgent care visits, work-related injury/illness treatment, drug screenings, EKGs and more to the surrounding businesses and industries.

With the addition of these offices,
McLeod Occupational Health now
provides health care to area businesses
and industries at six locations including
McLeod Occupational Health on the
campus of McLeod Regional Medical
Center, McLeod Occupational Health
Commerce Park located at Pee Dee
Touchstone Energy Commerce City
Park in Florence, McLeod Occupational
Health Cheraw and McLeod Occupational
Health Sumter.

"The City of Sumter began using McLeod Occupational Health in September 2019 for work related injuries/illnesses, drug screens, and pre-employment physicals, including Firefighter and Police Officer physicals," said Audrey Shirley, Human Resources Director for the City of Sumter.

Luther Oxendine, Manager of Corporate Environmental Health & Safety at Carolina Canners in Cheraw, SC, demonstrates how to use the McLeod TeleHealth kiosk. "We began using McLeod Occupational Health in September 2019 for work-related injuries/ illnesses, drug screens, and pre-employment physicals. The staff are great to work with, eager to help in any situation and genuinely dedicated to providing quality care. Working with McLeod Occupational Health Sumter has truly been a positive experience."

- Audrey Shirley
Human Resources Director for
the City of Sumter

"The staff are great to work with, eager to help in any situation and genuinely dedicated to providing quality care. Working with McLeod Occupational Health Sumter has truly been a positive experience."

McLeod Occupational Health remains committed to maintaining and expanding quality, convenient care to employees of local businesses and industries throughout the region.

For more information about McLeod Occupational Health, please call 843-777-5146.



McLeod News

MCLEOD HEALTH HONORS COLONES WITH PORTRAIT



McLeod Health President Emeritus Rob Colones is pictured with his portrait, which was unveiled earlier this summer at McLeod Regional Medical Center.

McLeod Health celebrated the unveiling of a portrait to honor President Emeritus Robert L. Colones on June 1, 2021.

During the ceremony,
Benjamin T. Zeigler, Chairman of the
McLeod Health Board of Trustees,
opened the evening by video welcoming
Colones' family members, friends,
current and former colleagues.

Zeigler was followed by remarks on Colones' 40-year career with McLeod Health by John Braddy, Former Chairman of the McLeod Health Board; **Dr. Dale Lusk**, Chief Medical Officer for McLeod Health; and Donna Isgett, President and CEO of McLeod Health.

Isgett explained that McLeod honors the lifetime achievements of role models who have impacted the organization in superlative ways with the commissioning of a portrait.

"During the past year, the
McLeod Health Board of Trustees
directed this well-deserved recognition
of Rob Colones, President and CEO for
the past 20 years. It was also important
that Deb, Rob's beloved wife, was
included in this planning and process.
It was during many quiet and thoughtful
sessions that she worked with the artist to
ensure that the quality, professionalism,
compassion and likeness of Rob's
character was reflected on the canvas.
Deb's heart and eyes provided oversight
of this gift.

"Rob has poured out daily for more than four decades his gifts of insights, brilliance and integrity, and I am one of many people, better for it," added Isgett.

Rob and his beloved late wife, Deb, have three sons, John Thomas, Wil and Stephen and two grandchildren.

SPEAKER PAUL RYAN VISITS MCLEOD HEALTH CLARENDON

McLeod Health leaders were joined by specials guests Speaker Paul Ryan, American Idea Foundation; Frank Daidone, CEO of Nurse-Family Partnership (NFP); Christian Soura, Board of Directors, Nurse-Family Partnership (NFP); and Eric Bellamy, Chief Partner Engagement Officer for Children's Trust of South Carolina; at McLeod Health Clarendon on June 18, 2021 for an insightful discussion on the policies that have shaped the McLeod NFP program. Daidone also acknowledged the McLeod NFP team as the best model in the nation, and the panel explored in further detail what differentiates the McLeod team. In addition, several NFP Moms graciously shared personal stories of how this program has transformed their lives.



Speaker Paul Ryan is pictured with the McLeod Nurse-Family Partnership team as well as current NFP Moms who participated in the discussion on what makes the McLeod team best in the nation.

Since 2014, the McLeod NFP Team has completed approximately 33,000 home visits.

They have served more than 1,000 families in Florence, Clarendon, Sumter, Darlington, Dillon, Chesterfield and Marlboro Counties.

MCLEOD STROKE CARE.

Close To Home. Far From Ordinary.



Dr. Basil Shah, Interventional Neuroradiologist

In today's world, it is more important than ever to have extraordinary medical care close to home. The region's leader in advanced stroke care, the McLeod Stroke and Neurosciences team performs the latest life-saving procedures in emergent stroke care. In our dedicated Neurointerventional Bi-Plane X-ray Suite, Interventional Neuroradiologist Dr. Basil Shah performs the minimally invasive Thrombectomy procedure to treat Ischemic Strokes, the most common type of stroke.



McLeod Health has the advanced stroke care you need, when you need it.

Close to home, far from ordinary.

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