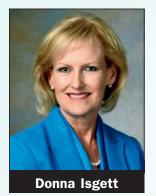
te 40, Issue 3, 2025 Management of the contract of the contra Volume 40, Issue 3, 2025 **Lanell Timmons** Florence, SC PARTNERS IN YOUR CARE & COMMUNITY

Views



At McLeod Health, your trust in our services and our people fuels our mission to improve the health and well-being of the patients we serve.

As a not-for-profit organization, McLeod Health reinvests in local communities, creating ripple effects of improved patient outcomes, stronger community trust and opportunities for mentorship and professional development.

In 2024 alone, McLeod Health invested more than \$1,000,000 in support of community projects throughout the counties we serve, as well as partnerships in

scholarships. These programs enhanced the environment as well as the health of our citizens.

Our teams have served as mentors, actively supporting the development of educational programs for youth. Supporting these efforts provides an incredible opportunity to help shape the future of a professional workforce who will in turn care for the people of our region.

At the core of our mission is a dedication to the provision of healthcare for local people, by local people through highly experienced professionals, the widest spectrum of health services available in the region, extraordinary outcomes and cost-efficient care.

McLeod Health continues to establish a legacy of advocating for the health of our patients, and in turn, the health of our communities.

We accomplish this through a renewed dedication to our four core values: Caring, The Person, Integrity and Quality.

In the pages that follow, we pay tribute to the individuals who entrusted us with their care and overcame remarkable challenges. It is because of these individuals – and you – that McLeod Health continues to strive for excellence in all that we do.



President and CEO, McLeod Health



ON THE COVER:

A history maker in his own right, Lanell Timmons was the first male cheerleader at South Florence High School and ultimately competed in and won the "Super Bowl" of cheerleading, The Summit Championship, with his team Athletic Cheer Force (ACF) in Florence. However, during his championship run, Lanell was suffering from a recurring abdominal issue that eventually revealed a diagnosis of Stage II Anal Cancer. Lanell's cancer diagnosis led him to the McLeod Center for Cancer Treatment and Research for powerful chemotherapy and radiation treatments. As a former athlete, Lanell said he had to meditate, focus, pray and really trust that everything was going to be okay. Today, Lanell has completed treatment and returned to cheer coaching with ACF. He also enjoys spending time with his miniature schnauzer Riot, with whom he is pictured on the cover. Read Lanell's story on page 8.

McLeod Health, Florence, S.C.

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A BIRTHDAY TURNED BLESSING | PAGE 6



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RECLAIMING HER SPARK | PAGE 24

by Ashley Boles

Sharon Rosenberger knows she doesn't look or act like she has Stage IV Colon Cancer.

Her story began in 2017, when she and her boyfriend Keith moved to Little River, South Carolina, from the Valley Forge area of Pennsylvania.

With a background in estate planning as a self-employed paralegal, Sharon continued working for another year as a professional guardian. Upon retirement, she spent her days kayaking, crocheting, reading and finding new medical providers for Keith and herself.

"You can't help but notice McLeod Health Seacoast. It's massive and still growing. Plus, we live within walking distance of it," said Sharon.

In January 2021, Sharon recalls taking Keith out for dinner and bluntly stating she wanted to get married. She said he responded with, "I think it's about time."

The couple planned a Thanksgiving wedding that same year. They rented a house for their family and friends in Garden City and would become husband and wife on "Black Friday."

Six weeks before the ceremony in October 2021, Sharon received her diagnosis of cancer. **Dr. Donny Huynh**, Sharon's oncologist with McLeod Centers for Cancer Treatment and Research, explained that her cancer was advanced – Stage IV. "Sharon presented with a large tumor with perforations that penetrated her colonic wall. She also had

liver lesions. She underwent a right colectomy to remove the tumor, and we quickly started her on chemotherapy," said Dr. Huynh.

Sharon started receiving treatment at McLeod Health years before the Center for Cancer Treatment and Research opened on the Seacoast campus. She loves taking Lily throughout the new building, knowing the exceptional care happening inside.

Sharon recalls all sorts of thoughts going through her mind when she first heard the news. But she also remembers how much trust she had in Dr. Huynh.

"I have this young doctor, but he was so on top of everything, and he listened to me.

I felt I was in the right place at the right time," said Sharon.

She initially went through 12 cycles of treatment, which took roughly six months, and felt elated when her scans came back clear. She was still uncertain what would come next.

"I said, 'Okay God, you're keeping me here, what do you want me to do?' And that's when I felt the pull to volunteer," said Sharon.

Thanks to an oral chemotherapy treatment for maintenance, Sharon was able to start her journey as a McLeod Health Volunteer at McLeod Seacoast.

She worked with Volunteer Coordinator Peggy Skudera to find the best role since her treatment limited her ability to stand on her feet for long periods of time.

"I met Sharon in early 2023, and I learned quickly that she is a quiet hero," recalls Peggy.

Sharon managed volunteering and staying on an oral chemotherapy treatment until late fall 2023.

When a follow-up appointment revealed some new lung nodules, Dr. Huynh decided to put Sharon back on active chemotherapy.

"After that treatment, she went into remission in spring 2024. Then, a new CT scan showed she had some residual lesions, so a lower right lung surgery was performed.

"Sharon did very well, and she went back on low dose chemotherapy for maintenance until fall 2024," explained Dr. Huynh.

In December 2024, Dr. Huynh utilized a newer technology on Sharon – Circulating Tumor DNA (ctDNA). This analysis can be used to monitor treatment response and detect recurrence early.

Dr. Donny Huynh has walked through Sharon's cancer diagnosis and treatment with her since 2021. Sharon credits Dr. Huynh for always listening to her and helping her stay as active as possible by trying different types of treatments.

The results of the first scan prompted an additional PET/CT scan, which showed a few small lesions deep inside her stomach.

Based on these results, Dr. Huynh placed Sharon back on active chemotherapy in the spring of 2025.

"It's a rollercoaster, or a marathon – and it's a balance between treatments. But I like to give my patients a shared decision-making ability. We want to make sure they have as much normalcy in their lives as possible, and that's exactly what Sharon has," said Dr. Huynh.

Sharon enjoys staying as active as she can.

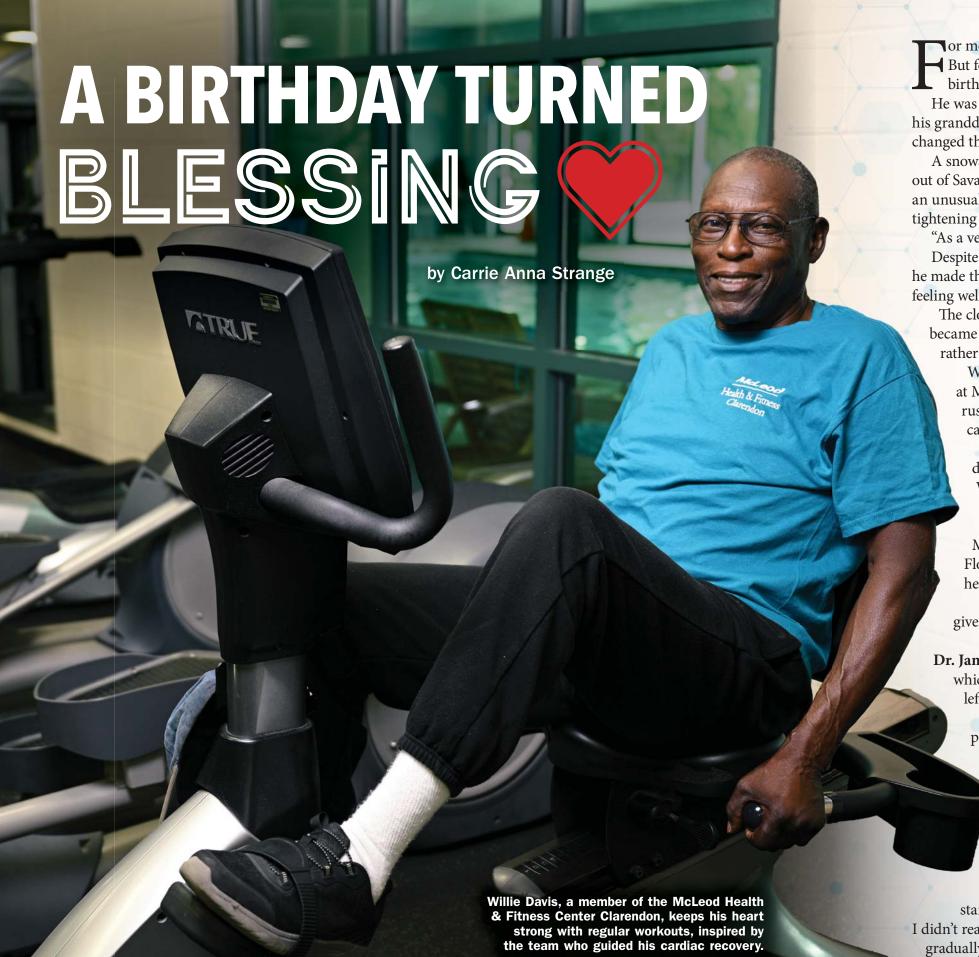
Each time she dons her teal volunteer vest, her three-year-old Border Collie and registered pet therapy dog Lily by her side, Sharon feels blessed to help fellow cancer patients.

"I have been very pleased with everything at McLeod. I remember how scared I was when I first began treatment, so when I see people going through their first infusion, I spend extra time with them," said Sharon.

The new McLeod Center for Cancer Treatment and Research, housed on the campus of McLeod Health Seacoast, was designed with patients like Sharon in mind.

"Cancer impacts every aspect of an individual's life and requires comprehensive care, which is exactly what our new cancer center offers patients in Horry County," said Dr. Huynh.





or most people, birthdays are a time of celebration.
But for Willie Davis of Manning, this year's birthday began under the shadow of loss.

He was traveling to be with family after the passing of his granddaughter when an unexpected series of events changed the course of his life and health for the better.

A snowstorm had delayed flights, and after his flight out of Savannah was canceled, Willie began feeling an unusual tightness in his chest. "It felt like a belt tightening around me," he recalled.

"As a veteran, I knew something wasn't right."

Despite icy roads and treacherous driving conditions, he made the decision to head home because he wasn't feeling well.

The closer he got to home, the more anxious he became and decided to go straight to the hospital rather than home.

When he arrived at the Emergency Department at McLeod Health Clarendon, the staff quickly rushed him into an exam room, suspecting a cardiac issue.

The medical team performed an EKG and drew labs, and the test results confirmed that Willie had indeed experienced a cardiac event.

The McLeod Health Air Reach helicopter transported Willie to McLeod Regional Medical Center in Florence, South Carolina, for an emergency heart catheterization.

"I joked with the flight crew that God had given me my own private flight," said Willie.

McLeod Interventional Cardiologist **Dr. James T. Lee** performed the procedure,
which revealed a 100 percent blockage in the
left anterior descending artery.

Dr. Lee performed a minimally invasive procedure to place a stent and restore

blood flow. The rest of Willie's heart and vessels were strong and did not require intervention.

But his recovery would require more than a hospital stay.

Just one week later, he began McLeod Cardiac Rehabilitation at McLeod Health Clarendon. "They started me slow, but I wanted to do more. I didn't realize how important it was to build up gradually. The staff monitored everything and made sure I was getting stronger safely."

After graduating from the Cardiac Rehabilitation program earlier this year, Willie did not stop there. Motivated to maintain his progress, he joined the McLeod Health & Fitness Center through the SilverSneakers® program.

Now, he works out four days a week, following many of the same exercises he learned during Cardiac Rehab.

"I feel great," he says. "I can honestly say I'm stronger now than before my heart attack."

At 80 years old, Willie sees his journey as both a blessing and a reminder.

"It could have gone either way that night. I believe God had a plan for me. This was my birthday gift.

"More time, better health and a chance to encourage others to listen to your body, seek help when something feels wrong and take full advantage of the resources McLeod offers for recovery and long-term wellness.

"Cardiac Rehab didn't just get me back on my feet; it helped set me up for a whole new way of living."

*Both McLeod Regional Medical Center and McLeod Health Seacoast offer Interventional Cardiology services. In addition, McLeod Cardiac Rehab services are offered at McLeod Health Cheraw, McLeod Health Clarendon, McLeod Health Dillon, McLeod Health Seacoast and McLeod Regional Medical Center.

SIGNS OF A HEART ATTACK



For both men and women, the most common signs of a heart attack include:

- Pain or discomfort in the center of the chest
- Pain or discomfort in the arms, back, neck, jaw, or stomach
- Shortness of breath
- Nausea
- Feeling faint
- Breaking out in a cold sweat

If you think you are having a heart attack, call 911. Never attempt to drive yourself to the Emergency Department. Emergency Medical Services staff are trained to begin heart attack treatment immediately while en route to the hospital.



hen Lanell Timmons started cheering, he made history by being the first male cheerleader at South Florence High School.

His cheer experience continued at Francis Marion University. Lanell then joined a cheer company and fell in love with coaching. When his good friend Alex wanted to open her own cheer gym, they worked together to establish Athletic Cheer Force (ACF) in Florence.

"We've been on a roll ever since," Lanell said. "In 2022, I competed in cheer as an adult at the Summit Championship in Florida which is known as the 'Super Bowl' of cheerleading. This was a really great experience, but during that competition, I was having one of the abdominal episodes I had been dealing with for some time."

After being hospitalized in Florida for treatment, Lanell

was discharged just in time to compete and win the Summit.

"However, I knew something was wrong. When people say you know your body – you just know when something doesn't feel right. You want to make sure you listen to yourself."

After several emergency department visits over a threeyear span, Lanell had become accustomed to hearing 'everything is fine' because there was never a diagnosis for his symptoms.

"Everything is good.' That was the answer that I heard time and time again. No one knew what was going on."

After seeing another physician in Columbia and undergoing a procedure, Lanell was prepared to hear again that everything was fine.

Instead, he was informed that he had Stage II Anal Cancer.

"I experienced a wide range of emotions after receiving my diagnosis. I initially felt relieved because I finally had an answer to what I had been dealing with, but also a little shocked.

"I didn't know how serious this was but once it settled in, I knew I needed the right mindsight before I even started the process of treatment. I had to meditate, focus, pray and really trust that everything was going to be okay," recalled Lanell.

Lanell's family doctor referred him to McLeod Oncologist **Dr. Arrvind Raghunath** and spoke highly of him, adding that the McLeod Centers for Cancer Treatment and Research was the place to go for his treatment.

"Dr. Raghunath was able to answer all of my questions. He kept me calm and in a good headspace throughout my whole treatment process."

Initially, Lanell underwent radiation and chemotherapy at the same time but it was too much on his body, so he completed all his radiation then resumed chemo.

In the McLeod Radiation Oncology department, Lanell was under the care of **Dr. Jordan Gainey**. "I love Dr. Gainey. He was cool, calm and collected. Dr. Gainey knew my treatment would be slightly uncomfortable, so he always tried to make me feel as comfortable as possible, which I really appreciated."

After Lanell began treatment at the McLeod Center for Cancer Treatment and Research, it was so hard on him physically that he was unable to keep working. With

"When people say

you know your body -

you just know when

something doesn't

feel right. You want

to make sure you

listen to yourself."

- Lanell Timmons

no income coming in, Lanell was close to being evicted from his apartment.

Fortunately, during his treatments, Lanell met Sarah Beth Averette, the McLeod HOPE Coordinator. Sarah Beth's role is to meet every new cancer patient at McLeod and determine how she can help them during their journey with assistance from the HOPE (Helping Oncology Patients Everyday) Fund.

"After talking with Sarah
Beth, she explained how she
could help me with my rent
payments so I would not be
evicted as I continued my
treatment. Once I met her, it
was like a breath of fresh air.
She never made me feel like I was

less than or that I couldn't come to her. I will forever be grateful for Sarah Beth and the HOPE Fund donors," said Lanell.

Lanell completed all of his treatments in April 2025. He has returned to work and coaching. "I don't feel 100 percent yet, but I'm getting there every day. As a former athlete, I'm used to being able to get up, move and do what I want to my fullest potential.

"That has been the hardest part – getting back to being as agile and strong as I used to be, but I know it's a process. I'm not trying to rush it. You just have to give it your best and keep moving on."



BEHIND EVERY SURGERY: THE CRITICAL ROLE OF CRNAS

by Leslie Mikell & Jessica Wall

Undergoing surgery, whether expected or unexpected, is one of the most vulnerable moments a person can face. From preparing for surgery to managing medications and recovery, the experience can be filled with uncertainty and anxiety. In times like these, it is crucial that patients trust their entire healthcare team.

For **Joshua DeLong, MSN, RN, CRNA**, that trust is the foundation of his work every day at McLeod Health Seacoast. As a Certified Registered Nurse Anesthetist, Josh provides expert anesthesia care before, during, and after surgery, ensuring each patient's safety and comfort.

"When a patient arrives for surgery, we develop an individualized anesthesia plan based on their health and the procedure," Josh explains. "I make it a point to meet with patients beforehand to walk them through their plan and help ease any concerns."

Josh's role extends beyond administering anesthesia. Once in the operating room, he continuously monitors vital signs and responds immediately to any changes in the patient's condition. After surgery, he manages pain control, helping patients recover with as little discomfort as possible.

"Helping patients come through a procedure safely and with minimal pain is fulfilling and what drives me every day," Josh shares.

Josh knew early in college that nursing anesthesia was his calling. After earning his nursing degree, he gained valuable experience in an intensive care unit (ICU), caring for heart patients recovering from surgery. This experience prepared him well for the demands of anesthesia care.

"I've always been drawn to the technical aspects of regional anesthesia – targeted nerve blocks to numb specific areas of the body – particularly how it can significantly improve a patient's postoperative experience by eliminating or greatly reducing pain," Josh says. "Pursuing a fellowship in Chronic Pain Management allowed me to expand my knowledge and skill set beyond routine anesthesia care."

For Josh, the work is deeply purposeful. "Every patient has unique needs, and it is our responsibility as nurse anesthetists to deliver specially tailored anesthesia care, ensuring their safety throughout their surgical experience."

Rocky Cagle, DNAP, CRNA, and Chief of Anesthesia at McLeod Regional Medical Center, emphasizes the breadth of their role: "CRNAs manage pain, maintain vital signs, and respond to emergencies. We provide anesthesia care to

all patient populations, from neonates to centenarians, and often serve as the anesthesia providers in rural hospitals, surgery centers, and underserved communities, expanding access to essential care."

At McLeod Health, CRNAs practice in a collaborative environment alongside anesthesiologists and surgical teams, with access to advanced technology and ongoing professional development.

"CRNAs are integral members of the operative care team," says **Starlette Godwin, DNP, MSN, CRNA**, and Chief of Anesthesia at McLeod Health Seacoast. "McLeod has a family atmosphere and a team culture that fosters collaboration and high standards. The working relationship between CRNAs and anesthesiologists here ensures patients receive the best care possible."

Josh appreciates this environment, noting, "I returned to Myrtle Beach 14 years ago and found McLeod was the perfect place to grow professionally while making a meaningful contribution.

"From the beginning, I saw tremendous potential at McLeod Health Seacoast. I've stayed because of the strong sense of teamwork, supportive leadership and the hospital's commitment to high-quality patient care.

"The relationships I have built and the trust shared within the surgical team make this a professional home."

For Josh and his colleagues, being a CRNA is more than a job – it's a commitment to helping patients through some of their most vulnerable moments with expert care and compassion.

"Our patients need to trust that their health and safety is the highest priority for their care team, and I find purpose every day in meeting that need," he says.

Josh DeLong cares for patients before, during and after surgery, developing an individualized anesthesia plan and ensuring positive surgical outcomes.

At McLeod Health, Advanced Practice Providers (APPs) are key members of the health care team. There are several classifications of advanced practice providers, but most fall into one of two categories based on their training paths: Advanced Practice Registered Nurse (APRN) and Physician Assistant (PA).

Within the scope of APRN, there are several subspecialties, including Certified Registered Nurse Anesthetists (CRNA), Family Nurse Practitioners (FNP), and Certified Nurse-Midwives (CNM). To achieve these credentials, each provider is a registered nurse who has completed a master's or doctoral program at an accredited institution.

APPs are an increasingly integral part of patient care at every level and touchpoint in the McLeod Health system. Whether in an inpatient hospital department, physician office, emergency room or urgent care center, APPs partner with physicians to create a continuous environment of care. Their skills and presence significantly increase patient access to the care they need.

Shaping the Next Generation of Physicians: McLeod Health Residency Programs

by Shaw Thompson & Jessica Wall

Graduate Medical Education (GME) is a critical phase in a physician's journey, bridging the gap between medical school and independent practice. Through hands-on training, mentorship, and real-world experience, residency programs prepare physicians to deliver exceptional care.

"These programs signal our commitment to expanding medical education as well as remaining at the forefront of innovative treatments and medical advancements," says **Dr. Dale Lusk**, Senior Vice President and Corporate Chief Medical Officer for McLeod Health.

McLeod Health, a system of seven hospitals serving one million people in 18 counties throughout South Carolina, distinguishes itself by offering on-site residency programs

that train compassionate, skilled physicians to meet the diverse needs of their communities.

"The Graduate Medical Education Program at McLeod Health has experienced significant growth in recent years, and we remain diligent in supporting greater access and services for our communities," says Emily Matthews Coker, Vice President of Advanced Education for McLeod Health.

With a mission to improve the overall health and well-being of people throughout the region, McLeod Health's residency programs in Family Medicine, Rural Family Medicine, and Internal Medicine stand out for their comprehensive training, community focus and commitment to excellence.

McLeod Family Medicine Residency Program: A Foundation for Comprehensive Care

Located on the campus of McLeod Regional Medical Center, a 517-bed regional tertiary care center in Florence, South Carolina, the McLeod Family Medicine Residency Program is a cornerstone of McLeod Health's GME efforts.

Established in 1980, this program has trained more than 300 physicians to deliver full-scope family medicine, equipping them to care for patients across all ages and medical needs.

The Family Medicine Residency Program emphasizes a rigorous, hands-on curriculum that includes inpatient pediatrics, high-volume inpatient services and intensive ambulatory experiences in the Family Medicine Center.

Residents gain exposure to intensive care units and serve a medically complex, often underserved population, preparing them for diverse clinical challenges.



Members of the McLeod Family Medicine Residency (pictured) and McLeod Family Medicine Rural Residency Programs attended the American Academy of Family Physicians Future 2025 Conference to showcase what each program has to offer.



The program also offers osteopathic recognition, catering to residents pursuing osteopathic training.

"The McLeod Family Medicine Residency Program is designed to graduate skilled physicians who are committed to compassionate, comprehensive care, particularly in rural or underserved settings," says Program Director Gerard C. Jebaily, MD, MHSA, CMD. "Our focus on family extends beyond patient care to include our residents, faculty, and staff, creating a supportive community that fosters personal and professional growth."

This unique setting allows residents to develop critical skills in managing high-acuity cases while cultivating the physician-patient bonds that are the hallmark of family medicine.

Beyond clinical training, residents earn management and administrative skills, preparing them to navigate the complexities of modern healthcare systems.

McLeod Family Medicine Rural Residency Program: Serving Underserved Communities

Established in 2020, the McLeod Family Medicine Rural Residency Program addresses the critical need for primary care in rural areas. With training sites in Cheraw and Manning, this unopposed program trains residents to deliver full-scope family medicine in resource-limited settings.

the particular challenges of rural healthcare.

"Our mission is to graduate well-rounded physicians who can understand and treat the distinct conditions of patients in rural and underserved areas," says Program Director Lisa E. Heichberger, MD, DipABLM.

Continued on next page



As part of their community medicine rotation, Clarendon Rural Family Medicine residents had the opportunity to visit Captain Marc Brewer of Clarendon County Fire Rescue to learn more about the Community Paramedic Program.

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"Rural medicine is more than clinical expertise – it is about building relationships and being part of a community. Our residents engage in outreach and quality improvement projects that directly impact the lives of those they serve. The bonds formed with patients in small towns are powerful and lasting, and we strive to create

that same sense of connection and support within our program," continues Dr. Heichberger.

Through community outreach and quality improvement projects, residents engage directly with the populations they serve, addressing healthcare disparities and improving outcomes.

The program's focus on rural medicine ensures graduates are prepared to thrive in settings where access to care is limited, making a tangible difference in the lives of their patients.



Cheraw Residents spend time with **Dr. Gabe Simpson**, Medical Director of the McLeod Health Cheraw Emergency Department, at left, and the SIM team running a mock code simulation.

McLeod Internal Medicine Residency Program: Training Versatile Physicians

Set to welcome its first class of residents in July 2026, the McLeod Internal Medicine Residency Program is poised to train compassionate, competent physicians for careers in primary care, hospital medicine and subspecialty fields.

It offers a comprehensive curriculum that includes inpatient and outpatient training, procedural skills, and exposure to teams across all disciplines, including case managers, social workers and pharmacists.

"Our goal is to create an environment where residents develop clinical autonomy while receiving the support and mentorship needed to succeed," says Program Director Victor E. Collier, MD, FACP, FHM.

"We are building a program that fosters clinical curiosity, encourages quality improvement and prepares residents for the business of medicine."

The program emphasizes a standardized didactic curriculum with formal lectures, case presentations, and journal clubs, ensuring residents are well-versed in the breadth of internal medicine.

By engaging with administrative leaders and participating in committee work, residents gain insights into healthcare systems, positioning them for success in diverse career paths.



Dr. Victor Collier, Program Director of the Internal Medicine Residency Program at McLeod Health, at left, pictured here with host Jay Lavrinc, was a guest on Greater Florence Chamber's ChamberLink Radio to promote the new residency program and what it means for the growth of McLeod Health.

A Legacy of Impact

McLeod Health's residency programs are more than training grounds – they are incubators for the next generation of physicians who will shape the future of healthcare.

More than 40 physicians who graduated from the McLeod Family Medicine Residency Programs currently practice at a McLeod Health facility, a legacy that will continue for generations to come.

By combining rigorous clinical training with a commitment to community and compassion, McLeod Health ensures its graduates are equipped to meet the challenges of modern medicine while fostering meaningful connections with their patients.

Whether in the bustling environment of McLeod Regional Medical Center or the close-knit communities of Cheraw and Manning, these programs are transforming healthcare, one physician at a time.

Continued on next page



Team-Based Care in Family Medicine Residency: Providing Accessible, High-Quality Care

At McLeod Health, our Family Medicine Residency Centers use a team-based approach to care that enhances the educational experience for residents while ensuring patients receive the best possible care. Here's how it works:

What is Team-Based Care?

In a family medicine residency program, each team consists of first, second, and third-year residents (PGY-1, PGY-2, PGY-3), along with an attending physician who supervises and mentors the residents. This model not only supports the residents' learning but also ensures continuous, high-quality care for patients.

How the Teams Are Structured:

- PGY-1 Residents: In their first year, residents focus on building their clinical skills, learning to interact with patients, and understanding the workflow of the practice.
- PGY-2 Residents: With more experience, these residents take on increased responsibilities in patient care and begin to mentor PGY-1 residents.
- PGY-3 Residents: As leaders of the team, third-year residents coordinate care plans and prepare for independent practice after graduation.
- Attending Physician: The attending physician oversees all clinical decisions, providing essential mentorship and ensuring the team maintains high standards of care.

Benefits of Team-Based Care:

- 1. Continuity of Care: Patients have access to consistent care, with someone from the team always available to see them, even if the resident is rotating out.
- 2. Comprehensive Learning: Residents benefit from the collaborative environment, gaining hands-on experience, learning from their peers, and attending physicians in a variety of clinical scenarios.
- **3. Leadership & Mentorship**: Senior residents guide and mentor junior residents, building leadership skills while reinforcing their clinical knowledge.
- **4. Collaborative Decision-Making**: Team discussions of cases encourage critical thinking and evidence-based practices, improving outcomes for patients.
- **5. Patient-Centered Care**: This approach ensures personalized, coordinated care, leading to better patient satisfaction and healthier outcomes.

Team-based care offers an excellent learning platform for residents and ensures patients have access to coordinated, efficient care. This approach enhances both the educational journey of residents and the well-being of the McLeod Health community.



McLeod Health welcomed 18 physicans to the McLeod Family Medicine and McLeod Family Medicine Rural Residency Programs earlier this summer.



Access. Choice. Convenience.

At McLeod Health, patients have access to nearly **70** physicians throughout our **four residency care centers**. Our teams work together to provide excellent care that is both coordinated and personal.

New patients are welcome, and same- or next-day appointments are available. To schedule an appointment, contact one of our locations below.





McLeod Family Medicine Center 144 North Ravenel St., Florence, SC, 29506 (843) 777-2800

With 36 highly skilled faculty and resident physicians as well as a Clinical Psychologist and Clinical Pharmacist, the McLeod Family Medicine Center offers a wide scope of services from birth to geriatric care, including: same-day, in-office labs; in-office procedure rooms; women's health; pediatrics; behavioral health and more.



McLeod Primary Care Clarendon 50 East Hospital St., Manning, SC, 29102 (803) 435-8828

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McLeod Internal Medicine Residency Center 101 William H. Johnson St., Ste 205, Florence, SC, 29506 (843) 777-7671

The McLeod Internal Medicine Residency Center opened in July 2025. This physician practice expands access to internal medicine care across our region and will serve as the training ground for the McLeod Internal Medicine Residency Program.

Located in Suite 205 of McLeod Medical Park East on the campus of McLeod Regional Medical Center, adult patients in need of an internal medicine provider are welcome, including individuals transitioning from the hospital or those seeking a long-term medical home.

The practice is staffed by two experienced internal medicine physicians, Dr. Victor Collier and Dr. William Betz.



McLeod Primary Care Cheraw 710 Chesterfield Hwy, Cheraw, SC, 29520 (843) 537-2171

With 29 highly skilled faculty and resident physicians as well as a Clinical Psychologist and Clinical Pharmacist, McLeod Primary Care Clarendon and McLeod Primary Care Cheraw offer a wide scope of services for the entire family. Services include: acute and chronic illness management; pediatric, adult and geriatric care; referrals to specialists and more.

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A NEW CHAPTER IN PAIN RELIEF

by Tammy White

Low back pain is one of the most common complaints that bring patients into a doctor's office. Low back pain is very common, with most people experiencing some degree of it in their lives.

When there is persistent pain after two to four weeks of back rest combined with over-the-counter medications, the first line of treatment would be a visit to a primary care physician.

If the pain progresses to a chronic state with no response to the physician's prescribed treatment methods, the patient can then be referred to an Interventional Pain Management Specialist.

An Interventional Pain Management Specialist is a physician who focuses on the diagnosis and treatment of pain through minimally invasive procedures.

Dr. Michael Warden and Dr. Michael Sein with Florence Neurosurgery and Spine at McLeod Health are Interventional Pain Management Specialists on McLeod Medical Staff. Their goal is to not only provide pain relief but also improve patients' physical function and overall quality of life.

While some may consider working on income taxes painful, it was just a coincidence for Glenn Rose McFadden that it resulted in the worst back pain she ever experienced.

Sitting for an extended period of time preparing for the April 15 tax filing deadline, Glenn began to feel twinges in her back. She took over-the-counter pain relief and applied a heating pad, but the pain just intensified.

"Every time I moved, I felt like someone was stabbing me," recalled Glenn. "Even though I've given birth to two children, this pain was unlike anything I'd experienced before."

She called 911 and was transported to the nearest emergency department to her home in Kingstree. After a CT scan, the physicians there diagnosed her with mild disc bulging. The recommendation was a follow-up with orthopedics.

At McLeod OrthoNow, an orthopedic walk-in clinic in Florence, Glenn met with Sports Medicine physician Dr. Brandon McDonald.

Dr. McDonald believed Glenn's bulging disc was pressing on her sciatica nerve, which runs from the lower back, down the back of the leg, causing inflammation and pain.

Dr. McDonald referred Glenn to Dr. Sein.

"My daughter went with me to the appointment with Dr. Sein," said Glenn. "We were extremely impressed with his credentials and found him to be a very kind and compassionate person with a good sense of humor. I really felt he cared about me as an individual.

"I told Dr. Sein I wanted my life back. I wanted to be able to drive again, walk without frequently stopping to rest and spend my day without a heating pad as my constant companion.

"Thankfully, Dr. Sein had a plan on how he was going to make this happen."

"We wanted to tailor her treatment to what best suited her needs," said Dr. Sein. "Glenn wanted to avoid surgery, and traveling for physical therapy would have been challenging as she is the caretaker for her husband in Kingstree."

To help reduce nerve inflammation and decrease Glenn's pain level, Dr. Sein used epidural steroid injections, a common treatment for chronic pain such as the severe sciatica from which Glenn was suffering.

"After recovering from my first injection, I didn't have the results I was hoping for," said Glenn.

"I was feeling better but still experiencing pain. I made a note in my McLeod MyChart for Dr. Sein. After reading my comments, Dr. Sein said it was time for a second injection."

"It is common for patients not to have complete relief from their pain with just one injection," said Dr. Sein. "It took a series of three injections to get Glenn's life completely back on track.

"There was nothing Glenn did that brought on this sciatica pain," said Dr. Sein.

"It may have been brewing for a while and then suddenly happened, very similar to how a heart attack can happen. So now the 'heart attack' was over, but she was still experiencing pain that we were working to alleviate."

Thanks to Dr. Sein's work, Glenn is happy to be mobile again, which makes it easier to spend time with her husband, two daughters, nine grandchildren and one great-grandchild.

"I am so thankful for Dr. Sein. He exceeded my expectations. I am very cautious now when it comes

to my back and know I need to take better care of it. I trust that if I need Dr. Sein in the future, he will be here."

THE INTRACEPT PROCEDURE

For those with persistent low back pain that does not respond to treatment, there is a new option available called ablation of the basivertebral nerve, also known as the intracept procedure.

This is a minimally invasive procedure, performed by Dr. Michael Warden, that ablates, or burns, small branches of nerves that go into the vertebral body and cause chronic pain.

"The vertebral bodies are the bones that make up the spine," said Dr. Warden. "They are stacked on top of each other like coins. Between them is the shock absorber, or disc mater ial, that allows us to absorb all the pressure and the weight as we walk, move, jump and enjoy our lives."

Over time, the disc starts to break down, causing irritation and inflammation in the bone. As the disc degenerates, it irritates the nerves,

Typically, many patients with low back pain experience pain with activity but find relief when they sit down.

Patients with basal vertebral nerve pain tend to still have pain even when sitting - no matter the activity, the pain is always there.

This same-day procedure is performed at the McLeod Outpatient Surgery Center in Florence. The offending nerves for ablation are accessed through a very small "poke" incision, leaving no scarring or wound.

In five-year studies, patients were reported to have prolonged and sustained pain relief since the nerve is unable to grow back once it is

"Patients who have been working with their primary care physician for at least six months trying various conservative measures, including physical therapy, can be evaluated to see if they are a candidate for this procedure," said Dr. Warden.

"An MRI scan is part of the evaluation process. On the MRI, we are looking to see if there has been any breakdown of their disc. The irritated nerves inside the bone are the nerves we target during this procedure.

"Patients with significant unresolved back pain did not have many options prior to this procedure," said Dr. Warden. "It can be an effective therapy, and we are excited to now offer this option for our patients."



From Caregiver to Patient by Jaime Hayes

n the morning of May 17, nurse Regena Lowry was working her shift on the Medical Surgical unit at McLeod Health Dillon.

"All of a sudden, I was struck with severe abdominal pain," said Regena. "The pain was so bad I could hardly stand, and it was hard for me to focus."

Dr. Nicholas Wallace, a McLeod Dillon Hospitalist, was working that day as well. "Dr. Wallace took me immediately to the Emergency Department," she said. The staff quickly got Regena back for a CT scan.

After seeing the results of her scan, Dr. Wallace consulted with **Dr. Hugh Willcox** with Pee Dee Surgical Group.

Her CT scan had shown a cecal volvulus, a condition where the cecum, a part of the intestine, causes an obstruction.

"When there is an intestinal obstruction, the normal passage of digested foods, fluids and gas is prevented – meaning waste cannot exit your body," said Dr. Willcox.

"This can potentially become a lifethreatening situation – if left untreated, the intestine could rupture, causing a serious infection."

The medical team quickly administered a nasogastric (NG) tube to draw out built-up fluid from Regena's intestinal tract and help relieve pressure.

"Dr. Willcox calmly explained that my case was serious, and I needed immediate surgery," said Regena.

"I have now been on the other side of patient care here at McLeod Dillon, and I am grateful to have been cared for by such amazing people."

-Regena Lowry

"He detailed exactly what would happen, and what could happen. He wanted me to be informed every step of the way."

His calm demeanor put Regena at ease even as she headed into a frightening situation.

During the surgery, Dr. Willcox removed close to a third of Regena's large intestine.

After surgery, Regena spent five days in the Medical Surgical Unit at McLeod Health Dillon. "I was cared for by my own co-workers, and I cannot say enough about the excellent care I received."

Dr. Willcox and his nurse Chelsea Hunter checked in on Regena twice a day throughout her recovery. "I have never known a surgeon to check on a patient twice a day," she said.

"That truly shows his dedication and compassion for his patients."

After several weeks of healing at home, Regena was back to caring for patients as a nurse at McLeod Health Dillon.

"I have now been on the other side of patient care here at McLeod Dillon, and I am grateful to have been cared for by such amazing people.

"Everything about my experience was wonderful. Dr. Willcox saved my life. I received top-notch care. McLeod Health Dillon has it all – there's no need to travel anywhere else."

*General Surgery is offered at all McLeod Health Hospitals.



Child Life Program Expands to Serve All Pediatric Patients

by Roxanna Prezioso

For children, a hospital stay can feel unfamiliar and overwhelming. Bright lights, beeping equipment, and many caregivers coming and going can be difficult to process, especially when a child does not feel well. What seems routine for adults may be confusing or even intimidating to a young patient.

For families, the stress is compounded. Few experiences create more anxiety than seeing a child hospitalized. Yet, every member of the care team is there to provide comfort, support, and the best possible treatment.

By keeping the child's perspective in mind, parents and providers can work together to ease their fears and create a more reassuring environment.

Through generous gifts to the McLeod Health Foundation, the McLeod Children's Hospital Child Life Program began nearly four decades ago.

Child Life is a medical specialty geared toward development, education, psychology, preparation and self-expression as children navigate healthcare and medical experiences.

For patients, especially children, perception is reality. Creating a positive and therapeutic healthcare experience is the cornerstone of Child Life and ultimately impacts lasting healthcare choices and wellness.

Cory Prescott, McLeod Child Life Coordinator, serves as a reassuring and consistent staff member on hand to guide young patients and their families when admitted to the Pediatric Intensive Care Unit and Pediatric Floor.

Approximately 500 children are admitted annually, and often they experience the highest level of fear of invasive procedures.

"Child Life Specialists help patients cope with hospitalization, provide normalization techniques and advocate for patients, families and nurses," explains Cory. "This involves explaining procedures by focusing on the child's senses – what they may see, hear, smell, taste or touch regarding their medical treatment.

"Based on the child's development, temperament and coping style, the Child Life Specialist then creates an individualized treatment plan for each child."

Each year at McLeod Regional Medical Center, there are nearly 9,300 visits from patients under age 18 to the Emergency Department, and more than 2,000 children undergo surgical procedures in the Outpatient Surgery Center or Day Hospital.

Due to limited availability, these children did not benefit from the personal connection of a Child Life Specialist.

Once again, generous McLeod Foundation donors were invested in McLeod Health's mission to serve all in the region with the best care.

Their support has provided funding to expand the Child Life Program beyond the pediatric floor through the addition of a second Child Life Specialist, a playroom in the Day Hospital and a specialized treatment room in the Emergency Department.

"Expanding the Child Life program at McLeod Regional Medical Center will be incredibly helpful for the psychosocial care of the children while they are undergoing care anywhere throughout the hospital," Cory remarks.

The Day Hospital playroom provides an environment where children can engage in fun activities prior to surgery, reducing anxiety for both the child and the family.

The addition of a specialized treatment room in the Emergency Department greatly enhances a child's experience. In the treatment room, procedures like inserting IVs, drawing blood and needle sticks are performed. Since these procedures can be extremely stressful for children, the Child Life Specialist provides distraction and comfort.

"Our additional Child Life Specialist will expand these invaluable services to even more children who may

be experiencing apprehension and pain," explains Cory.

"We are so grateful to McLeod Foundation donors who have contributed to the expansion of the Child Life program throughout McLeod Regional Medical Center. It is gratifying and rewarding to know that we will now have greater opportunities to positively impact a child's hospital experience."





Lynette Gee of Conway, South Carolina, began to feel unwell. It wasn't alarming or sudden, but she sensed that something was amiss with her body and mind.

She started having trouble sleeping, experienced night sweats, and struggled with daytime exhaustion and brain fog. Having recently recovered from Covid, she wondered if the lingering symptoms were a result of the virus.

"I thought it might have intensified the symptoms. I was confused, I would feel cold yet sweaty, unable to regulate my body temperature. I kept asking myself, 'What is triggering this? What is happening?"

Lynette described how she would wake at night completely soaked, needing to place towels on her bed to get back to sleep. It was embarrassing, especially with her husband, Jayson, right beside her.

She felt exhausted, gained weight and developed a negative outlook, which persisted for years.

"I became very health conscious. My weight fluctuated, and I didn't feel like myself. I decided to invite God on this journey. My pastor asked me to lead a Bible study, and I chose to focus on my overall health," recalled Lynette.

After exploring various programs focused on addressing her total health, nothing seemed to be working.

Then came her annual OB/GYN appointment with **Dr. Tracy Nelson** at McLeod Women's Care at Magnolia. Lynette had just turned 50.

Lynette opened up about her concerns and frustrations, saying, "In my mind, I felt negative. I was battling exhaustion and didn't want to take on anything more."

Dr. Nelson listened attentively and recognized that Lynette was experiencing menopause.

Every day, around 6,000 women in the United States enter menopause. With the increasing number of menopausal women and rising life expectancy, there is growing awareness of how this condition affects women's lives.

Generation X is navigating menopause in ways that differ from previous generations.

"Peri- and post-menopausal Gen Xers and Baby Boomers are in the spotlight now," Dr. Nelson noted. "Thanks to influencers, celebrities and social media, there is much more understanding and awareness of treatment options. Women's health is complex and fascinating."

Menopause typically occurs around age 51, but the transition can start earlier or later, influenced by genetics, lifestyle and health factors.

About 80 to 90 percent of women experience symptoms such as hot flashes, night sweats, insomnia, irritability, crying spells, decreased sex drive, painful intercourse, brain fog and weight gain.

Dr. Nelson suggested hormone replacement therapy (HRT) for Lynette to replace estrogen and progesterone, compensating for the body's declining hormone production during menopause.

However, Lynette was hesitant.

"I struggled at first. I wanted to embrace holistic living and wasn't keen on taking medications. It felt like a failure to not go through this naturally."

After a month of hormone replacement therapy, Lynette felt better and stopped her treatment, believing exercise and a healthy diet could now replace HRT.

She quickly realized this was a mistake.

"I had to trust God. This is what's available to me. I wanted to live fully, not just exist. It helped me reconnect with who I was."

Lynette expresses gratitude for having a supportive doctor where she felt comfortable sharing her experience.

Dr. Nelson reflects, "I've enjoyed aging with my patients. It's crucial to discuss emotional, physical and sexual health during that time in their lives. OB/GYNs are experts on hormone replacement therapy and its benefits in helping women feel like themselves again."

Lynette is also thankful for her understanding husband during uncertain times.

"Jayson noticed my weight gain, hot flashes and reduced desire for intimacy, but he was so supportive, making me laugh through it all."

Lynette's next chapter is about raising awareness and encouraging conversations about menopause and treatment options for women. She wants to eliminate any guilt or shame associated with seeking help outside of holistic living.

"It's a natural and normal process. Find a doctor you feel comfortable with. If you're still breathing, God is calling you to do something in your community.

"We can't fulfill that purpose if we're not well. You owe it to yourself to live your best life. It's okay to seek support – don't go through it alone."



Dr. Jessica Brown, Dr. Karyn Markley and Dr. Tracy Nelson of McLeod Women's Care at Magnolia offer a full range of women's health services including menopause treatment. Women's health services are offered at McLeod Health Carolina Forest, McLeod Health Clarendon, McLeod Health Dillon, McLeod Health Loris, McLeod Health Seacoast and McLeod Regional Medical Center.



At this appointment, it was determined that Cheryl would need further evaluation. She was referred to McLeod Orthopaedics in Florence, where she met Orthopedic Surgeon Dr. Chad Thurman.

"At my first appointment with Dr. Thurman, he presented all the treatment options, from steroid injections to knee replacement surgery," says Cheryl. "After weighing my options, I asked if we could start with the steroid injections.

"Dr. Thurman looked at me and said, 'Mrs. Brown, I will do whatever you prefer. We will see how the steroid works, but if you get to the point where the pain is unbearable or it starts affecting your quality of life, I'll be here ready to discuss your next steps."

"It is important to present all treatment options to each patient, from least invasive to most invasive," says Dr. Thurman. "Taking into consideration additional medical concerns, the recommendation is usually to begin with the least invasive treatment.

"However, it is important to me that my patients know the decision is ultimately theirs. I try to put myself in their shoes and think about how this pain is affecting them on a daily basis and give them the best medical advice possible."

For several months, the steroid injections helped tremendously with the pain in Cheryl's knee, but in June 2024, things began to change.

"After a while, the pain would not go away," she remembers. "There were days I could not even walk. I went to my follow-up appointment with Dr. Thurman and told him I was ready for surgery."

McLeod Health Dillon and McLeod Health Seacoast.

The decision to move forward with surgery did not come lightly. Yet, Cheryl found reassurance in Dr. Thurman's honesty about what to expect.

"I like it when people are candid with me, and Dr. Thurman was exactly that. He told me that it was going to hurt at first, but if I was willing to put in the work after surgery and be consistent with my post-surgery therapy, each day would get better. And I appreciated that."

The surgery recommended in Chervl's case was a robotic-assisted total knee replacement. During this procedure, the surgeon, using robotic assistance, removes the damaged bone and cartilage within the knee and replaces it with artificial components made of metal and highgrade plastic.

This type of surgery is most often recommended for patients whose joint damage, typically caused by arthritis or injury, has resulted in chronic pain and limited mobility.

The goal is to relieve pain, restore function and improve the patient's overall quality of life when conservative treatments are no longer effective.

When the day of surgery arrived, everything moved quickly and smoothly.

Just hours after the procedure, Cheryl was walking and went home that same day.

Within five weeks, she was back on her feet, moving through her day with ease and enjoying the things she had not been able to do in over a year because of the pain in her knee.

Reflecting on her experience, Cheryl describes it in one word: "Awesome. Absolutely awesome. From the nurses to the anesthesiologist to Dr. Thurman and the entire office staff, everyone was amazing."

When asked what she would say to others who may be hesitant about knee replacement surgery, without skipping a beat, Cheryl responded, "Bite the bullet! When you get to the point where you cannot walk or move without being in pain, what kind of life is that?

"Dr. Thurman and the team at McLeod Orthopaedics truly care and want to help you get back to a painfree life."



*Robotic-assisted knee replacement surgery is also offered at McLeod Health Carolina Forest, McLeod Health Clarendon,

Honoring 75 Years of Service and Care in Loris

by Jennifer Hulon

For 75 years, people who walk through the doors of McLeod Health Loris—whether patients, families, or staff—have become part of a greater story, one defined by compassion, resilience and the unwavering commitment to treat every patient like family.

Day One: A New Hospital, A New Life

On May 15, 1950, Loris Community Hospital opened its doors ahead of schedule – and just in time to welcome its very first patient. That morning, **Dr. W.K. Rogers** met Arthur and Annie Mae Hardee at the hospital, where they had come for the birth of their first child. The day before, Annie Mae had arrived at Dr. Rogers' clinic in pain, prompting him to recommend that she come to the new hospital for the delivery.



With the hospital not yet fully operational, Dr. Rogers quickly assembled a small team: Geneva Quinn, who served triple duty as hospital administrator, superintendent of nurses, and operating room nurse, as well as Lottie Hardee, the lab technician.

Later that day, Ricky Hardee was born, becoming the first baby delivered at Loris Community Hospital. The hospital was so new that the cafeteria had not even been stocked, so a staff member ran to the local IGA to pick up food for Annie Mae. That moment marked more than just a birth; it symbolized the beginning of a legacy of going above and beyond when caring for patients.

Today, Ricky still lives in Loris with his wife, Marti. A successful local businessman, he has spent his life in the community where he was born, raising his son Jonathan and continuing the story that began on the hospital's very first day.

When the Caregiver Needs Care: Dr. Christopher Po's Journey as a Patient

Caring for patients is the heart of a physician's calling – but what happens when the physician's own heart needs care?

In 1997, **Dr. Christopher Po**, a nephrologist with McLeod Nephrology Associates, began experiencing pain in his left arm while providing care at Loris Community Hospital. As a physician, he knew the importance of listening to his body. When the pain persisted for 12 hours, he went to the hospital where tests confirmed what he suspected: he had suffered a heart attack.

Cardiologists **Dr. Amit Pande** and **Dr. Gavin Leask** with McLeod Cardiology Associates – formerly Pee Dee Cardiology – transferred Dr. Po to McLeod Regional Medical Center in Florence for further evaluation. There, **Dr. Anil Om** performed a heart catheterization and discovered a 90 percent blockage in Dr. Po's left anterior descending (LAD) artery, also known as a "widow-maker." Since then, Dr. Po has managed his condition with blood thinners and an active lifestyle to maintain heart health.

Years later, in 2019, Dr. Po was working as a hospitalist at McLeod Health Loris when he encountered another serious health issue. After completing an evening shift, he began to experience

severe abdominal pain, and after he went home, the pain intensified. Trusting his instincts, he called ahead to the Emergency Department and spoke with Dr. David Smith, describing his symptoms and requesting a CT scan before reporting back to the hospital.

The scan, which provides detailed imaging of internal organs, revealed a bowel obstruction. Because Dr. Po was on blood thinners from his earlier heart treatment, surgeon **Dr. Kenneth Mincey** took a cautious approach. To reduce the risk of internal bleeding during surgery, Dr. Po was treated with an nasogastric (NG) tube and instructed to have nothing by mouth for three days in anticipation of the surgery.

During the procedure, Dr. Mincey discovered a congenital band obstructing Dr. Po's intestines. His appendix had also become entangled in the band, worsening the situation. Dr. Mincey clipped the band and removed the appendix, which immediately relieved Dr. Po's symptoms.

Following surgery, Dr. Po stayed at McLeod Health Loris for three more days on a liquid diet and began physical therapy to support his recovery. Thanks to the swift and compassionate care of his colleagues, Dr. Po was back to work in just two weeks.

Dr. Po continues to care for nephrology patients at McLeod Loris. He is pictured with ICU nurses, Ginger Lewis, RN; Erica Busby, RN; and Tanya Fowler, RN.

Ricky continues to reside in Loris with his wife, Marti.

Decades Later: Courage in the Face of a Crisis

Seventy years after opening its doors in 1950, the world was deep in the grips of the COVID-19 pandemic, and McLeod Health Loris was on the front lines. In July 2020, hospital beds were filled with patients fighting to breathe, as the virus swept through communities at unrelenting speed.

Among those patients was Mary Fowler, who arrived at the hospital with a cough and fever and tested positive for COVID-19. After being sent home with care instructions, her symptoms rapidly worsened. Within days, her primary care physician, Dr. Chuck Mills with Southern Medical Associates, urged her to return to the hospital immediately.

Upon admission, Mary's condition had deteriorated to the point that she required intubation. Up to that point in the pandemic, patients who reached that level of respiratory failure had little chance of survival. Mary's family was contacted multiple times as doctors exhausted every available treatment. From July 21 to September 9, she remained in the ICU – fighting for her life.

Then, against the odds, Mary recovered. She became the first COVID-19 patient at McLeod Health Loris to survive such critical respiratory decline. Her triumph brought joy and relief not only to her loved ones, but to the entire McLeod family. Her resilience gave hope to her medical team, inspiring strength in the face of exhaustion and fear. Mary didn't just survive she reminded everyone why they keep fighting.



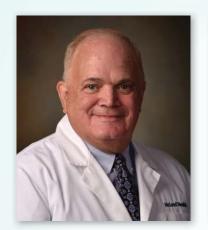
Because of the excellent staff at McLeod Health Loris, Mary Fowler is blessed with valuable time with her children for many years to come.

A Legacy of Healing and Humanity

From the birth of Ricky Hardee on opening day in 1950 to Mary Fowler's remarkable recovery during a global pandemic, McLeod Health Loris has remained a cornerstone of care in its community. As McLeod Health Loris celebrates 75 years, it honors the past while looking ahead to a future filled with hope, healing, and continued service to the people of Loris and beyond.

McLeod Health Welcomes New Physicians

McLeod Health is committed to ensuring the patients we serve have access to extraordinary physicians to meet the ever-growing needs of our communities. New physicians join our medical staff year after year, bringing diverse expertise and advanced training that strengthen our ability to deliver exceptional care. Please join us in welcoming these highly skilled providers to our team, dedicated to improving lives and advancing the vision and mission of quality care for all.



William Betz. MD Internal Medicine/Primary Care McLeod Internal Medicine Center



Alana Cahill-Rodriguez, MD **General Surgery** McLeod Surgical Associates

Little River



Shavne Caswell. DO General Surgery & Trauma Pee Dee Surgical Group



Olga Chrisman, MD Anesthesiology McLeod Loris Seacoast



Denaya Conley, MD Case Management McLeod Health



Brian Cruz. MD Emergency Medicine & Urgent Care McLeod Urgent Care Centers



Scan this OR code to learn more about each physician.

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Family Medicine/Primary Care

Palmetto Adult Medicine

Harris Noor, MD

Hospitalist

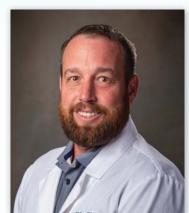
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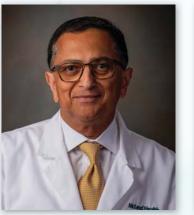
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Clare Reinhardt, MD Family Medicine/Primary Care McLeod Primary Care Sunset Beach



Darshan Sarode, MD Internal Medicine/Hospitalist McLeod Loris Seacoast



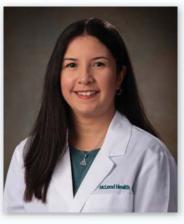
Roshan Shah, MD Pulmonology & Critical Care McLeod Pulmonary and Critical Care Seacoast



Sakshi Sharma, MD Internal Medicine/Hospitalist McLeod Regional Medical Center



Chelsea Thompson, MD Family Medicine/Primary Care McLeod Family Medicine Marion



Nicole Vazquez Plaza, MD Family Medicine/Primary Care Medical Plaza Family Medicine



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Neurosurgery & Spine Surgery

Florence Neurosurgery & Spine at

McLeod Health

Samuel Mensah, MD Internal Medicine/Hospitalist McLeod Regional Medical Center

McLeod News

An Evening of Hope and Inspiration

26th Annual Cancer Benefit Raises More Than \$173,000 for the McLeod HOPE Fund



Providing thousands of cancer patients in the region with assistance related to transportation, medications, nutrition and personal financial challenges, the McLeod HOPE (Helping Oncology Patients Everyday) Fund benefits oncology patient support services and provides oncology staff with improved access for immediate needs for their patients.

This is made possible annually through gifts directed to the HOPE Fund. Since its establishment in 2014, the HOPE Fund has helped more than 15,000 McLeod cancer patients.

Most recently, the 26th Annual *An Evening of Hope* raised more than \$173,000 to further assist patients through the HOPE Fund. Held in Florence this past September at

the Francis Marion University Performing Arts Center, the event included inspirational video testimonials featuring McLeod Cancer Survivors Kim Brown, Alan Cox, Wardie Sanders and Lanell Timmons.

Entertainment was provided by the Masterworks Choir with a celebrity guest conducting performance by McLeod Radiation Oncologist Dr. Virginia Clyburn-Ipock. HOPE Coordinator Sarah Beth Averette and Will McLeod, CEO of McLeod Regional Medical Center, also offered remarks on how the HOPE Fund and this event touches the lives of so many cancer patients and families throughout the region.

For more information on the HOPE Fund, visit www.mcleodhopefund.org.



To watch Kim's and Alan's stories, scan this QR code.



To watch Wardie's and Lanell's stories, scan this QR code.



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