











Letter from the CEO

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Making Rounds is the official magazine of Cape Fear Valley Health, a 1,000+ bed, 8-hospital regional health system, with more than 1 million inpatient and outpatient visits annually.

A private not-for-profit organization with 7,600 employees and 1,000 physicians on our medical staff, it includes Cape Fear Valley Medical Center, Highsmith-Rainey Specialty Hospital, Cape Fear Valley Rehabilitation Center, Behavioral Health Care, Bladen County Hospital, Hoke Hospital, Health Pavilion North, Health Pavilion Hoke and Harnett Health.

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Summer is finally here, with its heat and fun and long, bright days. I hope you all are making the most of this season and enjoying all the adventures our great region has to offer at this time of year.

Five years ago, we embarked on our own special adventure for Cape Fear Valley Health when we rolled out the Epic electronic medical record system and its patient-facing portal, MyChart. Epic and MyChart are now irreplaceable parts of our daily patient care throughout the health system, including at Harnett Health, where we added Epic not that long ago.

If you're not already using MyChart to stay on top of your medical records, refill prescriptions, make appointments, communicate with your healthcare team and more, I strongly encourage you to check it out. I know you'll be impressed to see all the great functions that MyChart offers patients. It's amazing to think about how much more convenient MyChart is for our patients to take charge of their healthcare.

One of the stories in this issue talks about Bladen's Bloomin'. a project in Bladen County, but it's not just Bladen County where Cape Fear Valley is growing. We're blooming everywhere! We recently completed an expansion of our

Cancer Center at Health Pavilion North, and the Cancer Center and medical office building in Harnett County is on track to open in December. Cape Fear Valley Medical Center's Valley Pavilion expansion, which is adding 100 beds to the hospital, is due to be completed in early 2025.

Methodist University's new medical school on our campus is also developing rapidly, though the growth right now is more focused on hiring staff, planning and fundraising. It won't be long before there'll be signs of construction down Village Drive, as we clear out existing structures to make way for this project.

Our residency programs are flourishing, too. Currently we have 14 medical and surgical residency and fellowship programs in the health system, with another two coming soon. A Pulmonary Medicine Fellowship starts this month, and we're going to start the accreditation process for a Pulmonary Critical Care Fellowship in September.

The Pulmonary Critical Care fellows will go on to be providers in Intensive Care Units, where they will see the most critically ill patients. As the pandemic highlighted for everyone, it's also a field in high need of more providers, and we're very proud to train doctors to help meet that need.

Mike Nagowski

CEO, CAPE FEAR VALLEY HEALTH



A young stroke patient works to rebuild her life

by Lia Tremblay

Most parents fondly remember the many milestones of their child's development: first

words, first steps, first time saying "Mommy" or "Daddy." At 26, Morgan Hubbard gave her parents this joy again, when she fought to recover from a serious hemorrhagic stroke. At times, her parents weren't sure she'd be able to do these things ever again.

It all started one Saturday last August. At lunch with her father, Duncan, Morgan complained of a headache and dizziness. But it wasn't severe, so she tagged along to a quick stop at Duncan's parents' house. There, she went inside to lie down while he stayed outside chatting with his dad.

"After about 10 minutes, my father walked inside to check on her," said Duncan. "She was on the floor in the den."

When Duncan asked her why she was on the floor, her answer chilled him.

"She said to me, 'My legs don't work."

Within the next frantic hour, an unconscious Morgan was being airlifted to another medical center. She had suffered a major brain bleed and would need intensive care to survive. For days, Duncan watched with his wife, Lisa, and their younger daughter, Clara, as Morgan lay unconscious, occasionally opening an eye or moving an arm to indicate that she could hear them. A tracheostomy and feeding tube helped her to breathe and eat while her brain healed, but her prognosis was a big question mark.

A burst of hope came a few weeks later, with the results of a functional MRI that measured her brain activity as she responded to some simple requests.

"Morgan's brain is showing that all connections for speech, movement and other main areas of functioning are intact," said Duncan in a Facebook post to update family and

friends. "The doctor could not guarantee the extent of her functionality long-term, but feels hopeful about her ability to regain some meaningful functioning with time and extensive rehabilitation."

> Morgan improved beyond the need for the care she'd been receiving. But she was not yet strong enough to go home or for the daily hours of effort required by inpatient rehabilitation.

Her doctors recommended placing her in a longterm acute care (LTAC) hospital. The Hubbards were presented with a list of LTACs across the state and were relieved to see Highsmith-Rainey Specialty Hospital

"We were desperate to get to Fayetteville," Duncan said. "We spent many days and nights away from home, but the commute for laundry, stuff like that ... it was taking its toll on us as a family."

Kelly Steere, RN, is the Chief Nursing Officer at Highsmith-Rainey. She said the LTAC is a lot like other hospitals, but the difference is that their patients require a stay of at least 30 days, presenting a unique opportunity for staff to get to know their patients and families.

"They really do become like family to us," she said. "And our staff have huge hearts. They're very skilled in their work, but they're also an incredibly caring team."

Morgan arrived at Highsmith-Rainey on Sept. 19, a month after her stroke. She spent the next few weeks getting stronger and meeting new milestones. With occupational and physical therapy, she gained more control of her limbs. She began



answering questions with yes/no flash cards, laughing at jokes and putting puzzles together.

"She was a strong young lady before all of this happened to her," said Steere. "She worked very hard and was very determined. All of that contributed to her progress."

In time, the LTAC is where she took her first steps and spoke her first words: "Hi, Mommy, Daddy and Clara." In November, Morgan was strong enough to move to Cape Fear Valley Rehabilitation Center.

"We are ever grateful to the staff at Highsmith-Rainey for what they have done to help get us to this point," Duncan wrote on Facebook the day of her move. "Rehab starts in the morning! Morgan is ready for the challenge!"

Working hard every day, Morgan was soon walking longer, eating and drinking without assistance and playing games with the staff. On Dec. 7, she headed home.

Morgan continued to work hard in outpatient therapies and in her daily home life. She rode her beloved horse, KitKat, for the first time in six months, and even drove her dad's riding lawnmower.

"I'm so proud of Morgan's positivity through this whole thing," said Lisa, her mother. "I think it's helped push her to meet all these milestones. I'm just so proud of her."

Morgan, who previously worked with her father at Holmes Security for six years, continues to rebuild her life. And when asked what she's most looking forward to, it's the kind of thing most of us take for granted.

"Driving," she said. "And going back to work."



by Tom Fugalli

Surgeon Ravinder Annamaneni, MD, is Chief of Surgery at Cape Fear Valley Health and has practiced in the Fayetteville community for 20 years, specializing in colorectal surgery. He's also Cape Fear Valley Health's Robotic

Surgery Chairman.

"Colon cancer is the second leading cause of cancer-related death in the country, for men and women," he said. "Every year 150,000 new cases are diagnosed, out of which almost 45,000 people die. But unlike other cancers, 90 percent of colon cancers are curable, provided they are detected early."

Only 40 percent of cases are detected early across the country, however, partially because people are not getting regular screenings. Additionally, colon cancer is being detected more often in a younger population.

"As a result, the screening guidelines changed in 2018," Dr. Annamaneni said. "Now you should have a colonoscopy starting at 45, instead of 50. This is for people at average risk. People at high risk need to be screened earlier."

Dr. Annamaneni says the way colorectal surgeries are performed has changed over time as well, thanks to robotics, which allows the surgeon to precisely control delicate robot "arms" to perform minimally invasive surgeries.

"The advancement of medical technology has been tremendous in the last two decades," he said. "Whatever is happening in the outside world, technology-wise, it immediately percolates into the medical field. The best example of this is robotics."

"After speaking with Dr. Annamaneni, I wasn't really nervous ... I trusted the process and I would do it again."

 Colleen Bracken **Diverticulitis Patient**



There are many benefits to robotics versus traditional open surgery, including smaller incisions, less pain, faster recovery and fewer long-term complications, such as hernias.

"Robotics is being used for colorectal surgery, but also for other specialties, including urology, gynecology and bariatrics," Dr. Annamaneni said. "What we have now is an advanced, versatile system. We do more robotic surgery than anyone in the region. Our results are equal or maybe even better than any center in the country."

One of Dr. Annamaneni's patients who benefitted from robotic surgery is Colleen Bracken, who was diagnosed with diverticulitis last summer.

"I had a flare-up while I was out of town, so I assumed it was just something I ate," she said. "I was diagnosed with diverticulitis through my CT scan. Diverticulitis is like pouches in your colon. Things that don't digest very easily get stuck in these pouches and they get infected, so then you get a flare-up."

She went on to have a robotic sigmoid colectomy.

"After speaking with Dr. Annamaneni, I wasn't really nervous," she said. "He just has a really nice bedside manner. My case was pretty

severe and I was a good candidate for the surgery because I am relatively young and healthy. So we decided to go ahead and do it, so I wouldn't be in an emergency situation later."

Bracken has returned fairly quickly to her normal life. When she came out of surgery, she didn't even feel the need for pain medicine.

"I went home in three days," she said. "You really can't see the incisions on my abdomen at all. I went back to work after six weeks. I'm back to running again and I ate a salad for the first time since last summer. I was so excited over it. I'm glad to be a part of the latest technology. It seems a little scary but I trusted the process and I would do it again."

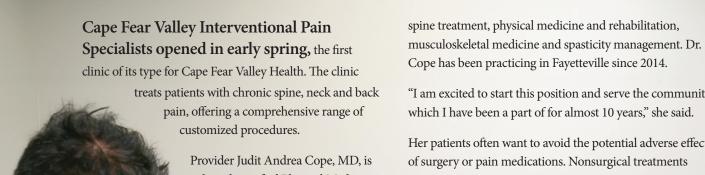
Know your risk of colorectal cancer:

Statistically, people with a higher risk include men, Black and Hispanic populations and those with a family history or certain health conditions. Though these genetic risks cannot be changed, most risks are things you can change, such as diet and lifestyle. Talk to your doctor about your colorectal cancer risks and screenings.

Easing Pain

New clinic specializes in nonsurgical treatment for chronic pain

by Tom Fugalli



"I am excited to start this position and serve the community,



Of course, there is a time and place for that as well. However, we try to avoid the long-term use of such treatment."

Some patients come to her after back surgeries or neck surgeries, if they still have symptoms. Also, if injections are not sufficient and patients have to see a surgeon, sometimes they come back with recurrent symptoms.

"There is no one magic treatment or magic pill," Dr. Cope said. "It's medications in combination with restoring function, which many times means physical therapy, as well as the interventional procedures themselves."

The most common symptom treated at the clinic is lower back pain. In fact, that is often why people come to the hospital in general.

"Back pain is the second most common reason why patients show up at the emergency department," Dr. Cope said. "Patients can lose a lot of work because of back pain. It's really affecting our communities on a daily basis."

Leslie and Rich Guinto came to Fayetteville four years ago from Charlotte. Finding new doctors quickly became more necessary than expected.

"I fell within two months of having moved here," Leslie said. "I hurt my back, and it wasn't getting better. That's how I first saw Dr. Cope. She's been one of the most caring doctors around. She listens and explains things thoroughly. We've discussed multiple options to alleviate, without surgery, some of the back issues I've had."

Leslie recommended Dr. Cope to her husband when he started having back problems of his own. He has received steroid injections from Dr. Cope for his pain.

"I appreciate her attention to detail when modifying my care in order to find just the right combination of medications to get the pain under control," he said.

The Guintos have been able to largely return to their normal activities, which can require standing up for long periods, such as when Rich leads chapel services or stands playing piano.

"Her treatment allows (Leslie) to stand on her feet while she sings along beside me," he said. "We've been able to do that for some time now."

Douglas New, another patient, has received treatments for about six months, while continuing to work as an electrician.

"I have severe arthritis in my neck," New said. "I still work, so

"I appreciate her attention to detail when modifying my care ... to get the pain under control." - Rich Guintos

Patient

The Guintos have been able to largely return to their normal activities, which can require standing up for long periods, such as when Rich leads chapel services or stands playing piano.

I definitely need to be mobile and turn my head. We're a small company so we don't get to decide when to work or not work."

New values the personalized care he's received, which has included injections and nerve ablations.

"Past caregivers wanted to prescribe Percocet, but I work with hot wires so for me that's not an option," New said. "Dr. Cope takes time to talk to you and does her best to find a solution for the problem."

"It's good for the patients and I to be on the same page," Dr. Cope said. "I explain that pain medications are not necessarily the answer, and we make a plan. Usually, we can agree on different things and at least try them before we move on to surgery or other interventions."

Dr. Cope makes a difference in people's lives through education, planning and encouragement. However, she emphasizes that her patients also play an important role in their care.

"They have to be willing to do their part, because I can't do it for them," Dr. Cope said. "They go to physical therapy, get the injections, and take the anti-inflammatories if needed. And I think that partnership throughout the years has been the most rewarding to me."



1205 Walter Reed Road, Fayetteville Monday through Thursday, 8 a.m. to 5 p.m. Fridays, 8 a.m. to Noon.

To learn more, visit capefearvalley.com/pain



Derrick Green gets new hope after return diagnosis

by Kim Hasty

Warily, hesitantly, and admittedly feeling a bit downtrodden, Derrick Green walked through the doors of the Cape Fear Valley Cancer Treatment & Cyberknife Center for the first time last fall.

"I'm 67, and I've worked all my life to get to the point of retirement," he said. "These are my golden years. I'm supposed to be doing whatever I want to do. Having fun, traveling, all the rest of these good things that we dream about."

He wanted to be doing almost anything else other than facing a daunting cancer diagnosis for the third time. However, Green said, his uplifting experience at Cape Fear Valley gave him hope.

"I could feel it right away," he said. "For example, staff members were walking down the hallway, making eye contact with me, smiling and greeting me. I mean, it was just a great first meeting and that's what started me off saying, "Well, this place is all right."

"The staff was so willing to help, and I could actually feel it ... It helped improve my outlook quite a bit. I started looking forward to maybe, just maybe, I might come out of this on the other side." - Derrick Green

He went home and told his family he had never experienced a more welcoming medical facility and that he was ready to persevere with his treatment.

"The staff was so willing to help, and I could actually feel it. And that meant a lot to me. It helped improve my outlook quite a bit. I started looking forward to maybe, just maybe, I might come out of this on the other side."

First diagnosed with prostate cancer at another medical facility in 2006, Green had undergone surgery back then to have his prostate removed. He figured that would take care of everything. But in 2012, he was diagnosed with lung cancer. A nonsmoker, his only symptom had been a persistent cough.

For a retired Army paratrooper accustomed to gaining a measure of control in most situations, another cancer diagnosis proved difficult for Green to accept or understand. His chief concern was for his wife, Yvonne.

"Tears were rolling down my face," he said. "That was rare for me. I was emotionally upset because of the possibility I wouldn't be able to spend more time with my wife, who I met when I was 16 years old, and my daughter."

Still, doctors were able to remove the upper left lobe of his right lung and Green once again returned to an active, hard-working lifestyle. Besides his military career, Green worked in the N.C. Department of Corrections. After a long career, he was looking forward to retirement when a recent, routine prostate-specific antigen (PSA) screening - the leading method of screening for prostate cancer - revealed elevated levels, indicating a recurrence of cancer.

"When I was told the prostate cancer had returned, I felt like the bottom had dropped out," he said. "I don't have a prostate anymore, so how can I have prostate cancer?"

Sunjay Barton, MD, said that prostate cancer recurs in about 10 percent of patients, but that Green's particular recurrence came with a good prognosis. Barton, who completed his residency in radiation oncology at New York University's Langone Health, has helped ensure patients at Cape Fear Valley Cancer Center receive state-of-the-art care. The plan of treatment he

formulated for Green included radiation therapy and hormone therapy, a combination that he said comes with an optimistic outcome.

"We get good feedback from patients and referring urologists," Barton said. "If you go to Harvard, you'll get the same treatment you get here. Patients are glad to hear that."

Barton said that Green also has good family support, along with a resilient spirit. Green said that the supportive and caring staff members at the cancer center make it easier for his resilience to shine through. It helps tremendously, he said, that he's been able to receive outstanding treatment without having to drive an hour or more. Though his full treatment continues, he completed his course of radiation therapy just before Thanksgiving in 2023.

At first, Green had balked at the idea of ringing the bell that hangs in the cancer center, a traditional marker for patients completing treatment.

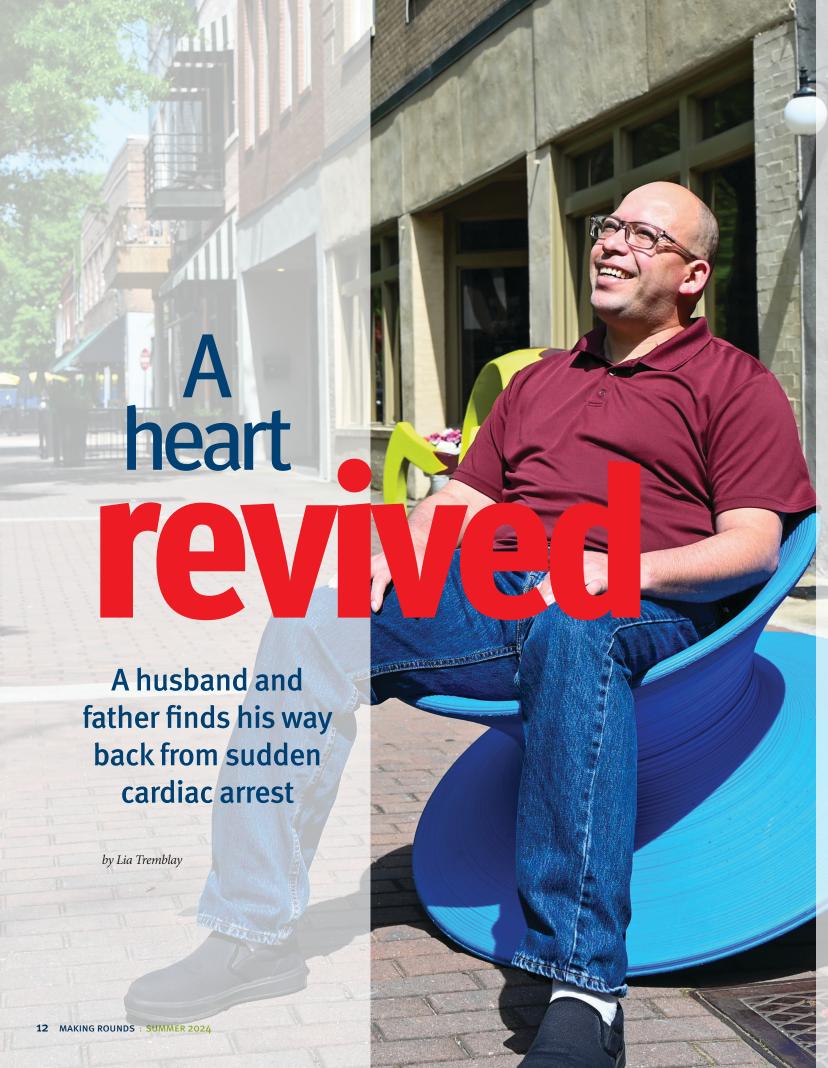
"I said, I'm not doing that, you know, I'm not drawing any attention to myself," he said. "I have seen the bell in other facilities, and I would not ring it because I didn't feel comfortable. The bell is very loud.

"But when my last day came, I said to myself, there's no way I'm not going to ring the bell," he said. "I wanted to do it. I wanted to ring the bell for my medical team to show them my appreciation. Ringing that bell meant as much to me as it did to them."

"So, when I grabbed hold of the rope to get ready to ring the bell, all of a sudden, I see my medical team start coming out of all the doors of their offices," he said. "I rang that bell hard and long, not only for me, but for them. I really appreciate them. And it was such a joy to ring that bell."

Talk to your doctor about getting a PSA screening today.

The Centers for Disease Control and Prevention (CDC) recommends that men ages 55 to 69 should talk to their regular physician to see when a PSA screening is right for them.



Hiram Reyes-Rabell spent last Christmas celebrating with his family in Fayetteville: opening gifts, playing games and laughing a lot. But he doesn't remember any of it.

"My wife told me all of this later," he said, "but I have no memory of that day at all."

That night, in bed, Reyes-Rabell made a strange gasping sound in his sleep. His wife, Yaitza, tried to nudge him awake. When he didn't respond, she turned on the light to find her husband not breathing and turning blue.

Yaitza screamed and their daughter, Yoliana, came running from down the hall. Yoliana started CPR while a 9-1-1 operator talked her through the terrifying moment.

Reyes-Rabell, at 45, had suffered a sudden cardiac arrest. With no warning, his heart had simply stopped beating. Minutes later, he was on his way to Cape Fear Valley Medical Center in an ambulance.

"They were able to get a pulse in the ambulance," he said, "but I think they said they had to shock me like 15 times."

The entire next week is also missing from Reyes-Rabell's memory. He spent most of it unconscious, recovering in Cape Fear Valley Medical Center's Heart and Vascular Center.

"I opened my eyes on New Year's Day," he said. "The first thing I remember was seeing my wife."

He learned that his cardiac arrest stemmed from an arrhythmia, or abnormal heartbeat, that was causing his heart to work very hard to pump blood. He remembered being told about his irregular heartbeat at an earlier doctor visit, but never followed up with a specialist.

"It might be hereditary," he said, "but I also wasn't taking good care of myself. I had put on weight in the past few years, and I wasn't eating like I should."

The day after his eyes finally opened in the hospital, Reyes-Rabell was fitted with an implantable cardioverter-defibrillator (ICD), a device that sits under the skin and is connected to the heart by thin wires. When it detects an abnormal heart rhythm, the ICD delivers a shock to return the heartbeat to normal.

"Two days later I was able to walk around the hall by myself," he said, "and then the next day I was discharged to go home."

While he was glad to be out of the hospital, Reyes-Rabell said the first few days were tough.

"That Saturday I went with my wife to Walmart," he said. "I could only take a few steps and then I had to get one of those electric carts you sit in. I got tired so fast."

An Army veteran, Reyes-Rabell was not used to the downtime and wanted to get back to work. After one month of rest, he was relieved to return to his job at Goodyear.

"Now I'm feeling pretty good," he said. "Better than I felt before all of this."

He also lost dozens of pounds, shrinking from 285 to about 220. He's keeping it off with a daily walking habit and a much more careful way of eating.

"I eat mostly chicken, fish and veggies," Reyes-Rabell said. "And I only drink water now. No sodas, not even on cheat days."

Those occasional cheat days are an opportunity to enjoy some of his old favorites, including some of the delicious foods of his native Puerto Rico.

"A lot of that food is fried," he said, "and I'm not allowed to eat fried food."

In February, Reyes-Rabell attended the Heartfelt Banquet hosted by the Cape Fear Valley Heart & Vascular Center. The annual event invites cardiac arrest survivors to share their stories and to celebrate with some of the people who saved their lives.

"There was one lady who helped me in the ambulance that night," he said. "She walked past me at first because she wasn't sure it was me. I guess I look pretty different now."

He also had a special guest at his side for the festivities.

"My wife didn't want to go," he said. "The memory was still fresh in her mind, and to this day she doesn't like to talk about it. So I brought my daughter with me instead. She saved my life too, with the CPR."

Reyes-Rabell is looking forward to a belated celebration of his wedding anniversary, which fell right in the middle of his hospital stay. He's grateful to have more years with his wife — and glad she didn't ignore what she heard on Christmas night.

"If she wasn't there when this happened," he said, "I wouldn't be telling you any of this right now."

To learn hands-only CPR, call Ben Beason at (910) 615-8294 or email bbeas@capefearvalley.com.



After the birth of her third child, 18 years ago, Michelle Runyan, 48, started to think about a tummy tuck. She didn't like what three pregnancies had done to her body, and she was ready to do something about it. She consulted with a surgeon in South Carolina and set a date for surgery.

"But I just couldn't go through with it," she said. "I don't know, it just didn't feel right at the time."

Fast forward to 2024. With a fourth child now reaching kindergarten age, the idea came to Runyan once again. After losing the weight of another pregnancy, despite good diet and exercise habits, she still didn't look or feel like herself.

"Nothing helped with that part around the belly," she said. "I felt like I always had to hide my stomach."

"I went back to my car and cried happy tears. I was just so, so pleased with how it turned out. [Dr. Nordberg] said I would be so glad to have this done, and he was right."

> - Michelle Runyan **Patient**

She searched online for a cosmetic surgeon and found rave reviews for Leif Nordberg, MD, at Cape Fear Valley Plastic Surgery. Although Runyan lives in Anson County — closer to Charlotte than Fayetteville — she made an appointment and drove two hours for her first consultation with Dr. Nordberg.

"Right away, I felt completely at ease," she said of meeting Dr. Nordberg and his staff. "I felt like I'd known them my whole life. Dr. Nordberg was very honest and open with me and answered all of my questions without hesitation."

Runyan left her consultation with a plan for three procedures in total: the tummy tuck, a bit of liposuction and a repair to some abdominal muscles that had separated during her pregnancies.

And she was pleasantly surprised by the price they quoted for her.

"It was about half of what I thought I might have to pay," she said. "I really thought it would be more."

Three weeks later, Runyan was headed in for surgery. And again, she was pleasantly surprised.

"I am sort of a nervous person," she said, "so I thought I might be sick with nerves when the time came. But all the way into surgery I was laughing and joking. I just felt really ready."



After a few hours in surgery, she woke up feeling groggy but happy. She went home that same day, ready to rest up and heal.

"I had a little bit of pain on day two," she said, "but I was ready for that. I felt great overall."

When Runyan went back to Dr. Nordberg for her first postop checkup, she got her first real look at what the surgery had achieved.

"I went back to my car and cried happy tears," she said. "I was just so, so pleased with how it turned out. He said I would be so glad to have this done, and he was right."

Soon a third pleasant surprise came along: despite planning to take three weeks off of work, Runyan felt good enough to go back after just 10 days. In the following weeks, she found she was no longer planning her outfits to hide anything.

"It's a lot more fun to shop for clothes now," she said.

Now fully healed, Runyan still makes the drive to Dr. Nordberg's office for aesthetic procedures such as Botox and lip fillers.

"That's not uncommon," said Tabitha Strickland, RN, who works with Dr. Nordberg. "We have a lot of patients who come in for one procedure and then come back for others."

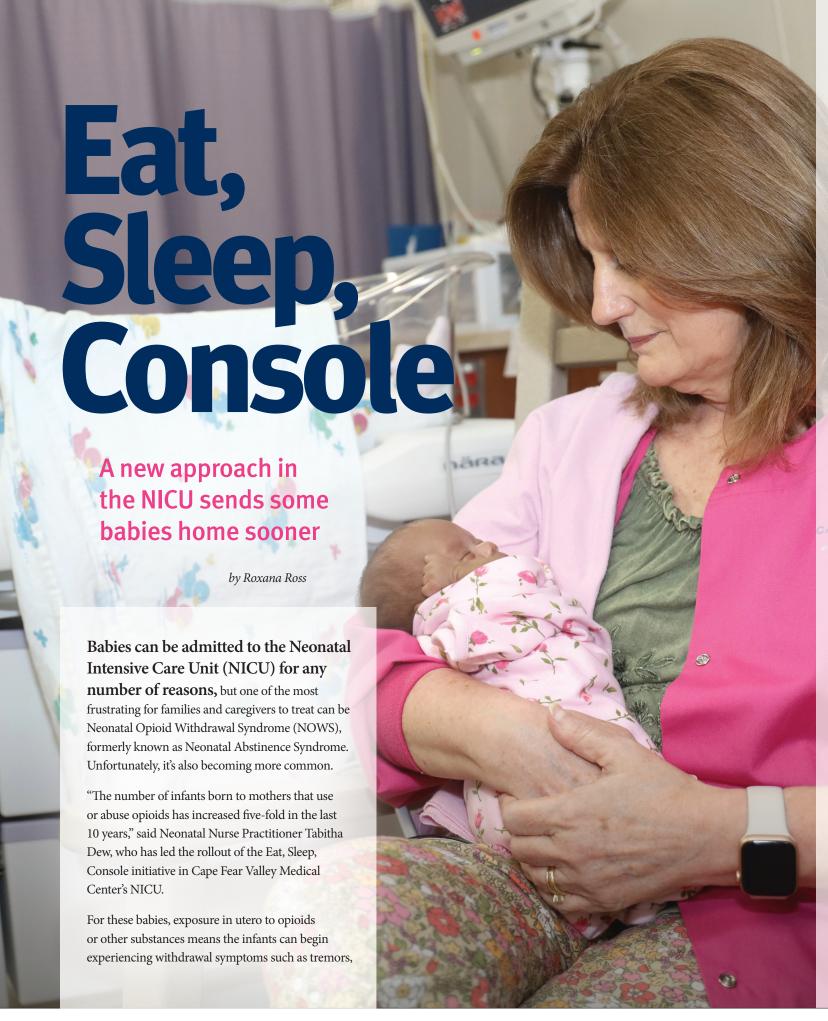
Strickland has been specializing in aesthetic services since the office opened in 2020. She said it's gratifying to see a patient become more comfortable in their own skin. Returning patients and their word of mouth have helped the office become very busy since its first few years.

"I think word gets around," she said. "People have a good experience, and they want to tell their friends. Plus, people are learning more about these procedures — not just the surgeries, but the aesthetic services we offer."

While surgical options such as tummy tucks, breast augmentations and lower body lifts can be a truly transformative experience, the aesthetic services performed in the office are less invasive and offer more immediate gratification. Botox injections can erase years of frowning and squinting in just a few days, and broadband light therapy can quickly do away with sun spots, redness and the loss of elasticity that comes with age.

"My best advice for someone who is curious about these procedures is to just give us a call and schedule a consultation," Strickland said. "That's the best way to get all your questions answered and a plan that's specific to you and your needs."

For more information, visit capefearvalley.com/plastic. To make a consultation appointment with Cape Fear Valley Plastic Surgery, call (910) 829-6588.



excessive crying and irritability and problems with sleeping and feeding. Some infants' symptoms are mild and never require treatment, while others need treatment for weeks or months.

"Depending on when their mother last took the opioid, the baby could be born in active withdrawal," said NICU Medical Director and Neonatologist Kristen Coggin. "For decades, babies who were born with NOWS were assessed using the Finnegan Neonatal Abstinence Scoring Tool, and if they scored a certain number, they were treated with around-the-clock morphine, which helped alleviate their immediate symptoms, but could prolong the need for pharmacological interventions, which extended their hospital stay by weeks."

Since March 2022, the NICU at Cape Fear Valley Medical Center has been using a new evaluation and treatment program called "Eat, Sleep, Console." This program, developed by Yale School of Medicine pediatric hospitalist Matthew Grossman, MD, focuses on the baby's ability to eat, sleep and be consoled, with an emphasis on non-pharmacologic management.

"In 2020, the length of time babies needed pharmacological treatment using the old assessment tool with NOWS ranged up to 60 days and averaged 18.6 days per patient," Dew said. "After we started Eat, Sleep, Console in March of 2022, the longest time of treatment was down to 55 days, an average of 9.8 days. In 2023, the longest treatment course fell to 27 days."

Fewer pharmacological doses mean the withdrawal cycle can be completed sooner, aside from the inherent benefits of prescribing less morphine to infants.

A large part of the "Console" aspect of the program is accomplished by volunteer "cuddlers" who are tasked with sitting and holding NICU babies when their families are away at work or other family commitments and other NICU staff are occupied.

"The goal is to reduce the need for medication by increasing the amount of time a baby is being physically comforted," Dr. Coggin said. "That's a whole focused task for a person, as anyone who has comforted a newborn can understand. Our volunteer cuddlers fill that need for our NICU babies."

Volunteer Marcia Garrett organizes the NICU cuddler program. Volunteers are approved through Volunteer Services and interviewed by NICU staff before being assigned as cuddlers. She describes herself as a "pastor's wife and grandmother" and loves her current title as "Cuddler"

"The NICU nurses are so protective of these tiny patients and it is a privilege to help in any way we can while we are on the NICU."

Marcia Garrett
Volunteer and "Cuddler Coordinator"

Coordinator." She's been volunteering in the NICU since 2018.

Cuddlers work three-hour shifts, and the program has seen a recent resurgence after having to pause during the pandemic. Volunteers must go through a background check and have the same health and vaccination requirements as employees, a necessity for working with vulnerable NICU babies whose immune systems might not be fully developed.

"Physical touch is vital for a baby's healing," Garrett said. "And your voice, too. I sing to them and speak with a gentle voice. You just sit with them, cuddle them, maybe rub their head gently or touch their feet. They need to know someone has them. You don't pick them up or stand with them. You just sit in the rocker, a nurse hands you a baby, and you cuddle them as long as needed. It's sounds simple, but it accomplishes so much."

For some babies with NOWS, cuddlers may need to be quiet, instead.

"Some babies are so overly stimulated that you just have to be quiet," Garrett said. "Whatever it takes to console, just let them hear your heartbeat in your arms."

During their shifts, cuddlers can do more to help the nurses, if there's not a baby in need of cuddling.

"Sometimes all the babies are sleeping, so maybe I help organize baby clothes or run out to pick up a snack for the nurses who can't leave the unit," Garrett said. "The NICU nurses are so protective of these tiny patients and it is a privilege to help in any way we can while we are on the NICU."

Dew said the "Eat, Sleep, Console" program has been so successful that the hospital's NICU staff has met with staff at other area hospitals to discuss implementing the program more widely in the region.

"Staff at other area NICUs were amazed at the success we've experienced," Dew said.



Keith Gallaher, MD, retiring after over 30 years in NICU

by Roxana Ross

Neonatologist Keith Gallaher, MD, came to Fayetteville in 1990 as an attending physician at Cape Fear Valley Medical Center's Neonatal Intensive Care Unit (NICU) while also teaching through the University of North Carolina School of Medicine. In time, he would add teaching and consulting positions at Duke University Medical Center and the Jerry M. Wallace School of Osteopathic Medicine at Campbell University.

As he prepares for retirement this summer, his colleagues and former students took time to commend him for a career dedicated to not only providing exceptional healthcare in the NICU but also teaching the next generations of providers and raising quality standards in his department. In March, he was awarded the 2024 Physician of the Year award by Cape Fear Valley Health Foundation's Caduceus Society.

Neonatologist Scott Cameron, MD, was fresh out of his neonatal fellowship training when he first met Dr. Gallaher in 2005.

"He's this rare combination of a wise teacher, quality improvement guru and compassionate clinician," Dr. Cameron said. "In his over 30-year tenure at Cape Fear Valley, he has tirelessly taught many healthcare students and colleagues, spearheaded the translation of evidence-based medicine and maintained an unwavering vulnerability and optimism both for our babies' families and our coworkers through his quiet, servant-like career."

During his time at Cape Fear Valley, Dr. Gallaher has held many titles, including Vice Chief and later Chief of Pediatrics, and Medical Director of the Neonatal Follow-Up Clinic, the NICU, and the Neonatal Patient Care Management Continuing Education Program. He's also been the Pediatric Representative to the Quality Assurance Committee and a member of the Infection Control Committee.

His accumulated list of presentations, grants, studies and published works is lengthy, illustrating a passion for learning and clinical excellence. Dr. Gallaher's focus on data and improvement stands out among his accomplishments.

"I believe that one of his major accomplishments has been involving our NICU in the Vermont Oxford Network, which is a collaborative of NICUs around the world," said Neonatal Advanced Practice Services Co-Coordinator Judy Philbrook. "Dr. Gallaher has been the sole data entry person for all the babies admitted to our unit. We use the information provided in the annual report to determine our focus for Performance Improvement initiatives." These initiatives have been used to reduce infections, improve outcomes, optimize nutrition and growth and reduce lengths of stay.

Neonatologist Kristen Coggin, MD, took over as NICU Medical Director when Dr. Gallaher stepped down from that position in 2020.

"Over the years, Keith has led our team through multiple transitions with grace, humility and integrity," Dr. Coggin said. "He has remained loyal to his love for academia and possesses an understanding of and appreciation for physiology that makes him a master educator and clinician. His commitment to excellence has never wavered and his vision for this NICU is now our reality."

Dr. Gallaher said he knows that he will deeply miss the NICU, but feels confident that the unit is moving forward in good hands.

"In my 34 years at Cape Fear Valley I have been fortunate to be surrounded by an extraordinarily talented and dedicated team of clinicians, nurses, therapists, secretaries, social workers and environmental health workers that have all been focused on providing the best care possible for our tiny patients," Dr. Gallaher said. "The path to excellence is difficult and tortuous at times, but worth the effort."



by Kim Hasty

A new Cape Fear Valley medical office building

planned for Elizabethtown promises to bring 12 patient exam rooms, two procedure rooms, three healthcare providers, an ExpressCare office, a new X-ray machine, and the latest in ultrasound technology to Bladen County.

The building will be accessible and will have a generator in case of power outages, an important consideration for many reasons, including, for example, the preservation of vaccines.

But the 8,500-square-foot construction, scheduled to be finished this summer, is part of an even bigger picture in Bladen County. The building will be located in the Elizabethtown Industrial Park off U.S. 701 and will fit in well with the county's existing economic development initiative, Bladen's Bloomin.'

"It's a steppingstone," said Jonas Woodruff, Cape Fear Valley's Director of Physician Practices in Bladen County. "It will give Bladen County residents more access to medical care and also to a variety of other services. We'll have room to grow and the ability to add services."

The site of the new medical office building is less than 10 minutes from Cape Fear Valley Bladen County Hospital and is near Cape Fear Vineyard & Winery, a 14-acre resort that also has a museum and restaurant. Woodruff said he and Bladen Healthcare President Spencer Cummings have been in discussions with Bladen County's Economic Development Director Chuck Heustess regarding the potential for growth in the immediate community.

"People will be able to live, work and play in that community," Woodruff said. "The area will have two to three hundred houses, and another portion of the winery is planned. The next phase is a 120-child daycare center."

Cape Fear Valley Health's presence in Bladen County kicked into high gear with the health system's purchase of Bladen County Hospital on March 19, 2012. Since the partnership began, Cape Fear Valley Health has invested more than \$19 million in upgrades. The new medical office building will expand care that already includes - in addition to the critical access hospital - Bladen Medical Associates, Bladen Kids' Care, Women's Health Specialists and Bladen Surgical Specialists.

Kristen Carpenter is overseeing the fundraising campaign for the new building. She moved from Ohio to Fayetteville three years ago to join the Cape Fear Valley Health Foundation staff as a development officer and is collaborating with the 12-member Bladen County Hospital Foundation board to grow philanthropic efforts in Bladen County.

"We've had a really positive response," she said. "I've met with members of the community, and everyone's really excited with our efforts being focused there. I've truly enjoyed going down there and meeting the people who live there."

Carpenter said the initial phase of the fundraising campaign is underway. Much like the new Center for Medical Education and Neuroscience Institute, which opened on the Cape Fear Valley Medical Center campus in Fayetteville last year, the Cape Fear Valley medical office building in Bladen County will offer naming opportunities for individual rooms, as well as five-year fundraising pledges. For more information, email foundation@capefearvalley.com or call Carpenter at (910) 615-1285.



When Recruiter Victoria Cromartie wanted to **go back to school,** she found Cape Fear Valley supports its employees with full hearts. It doesn't just help with schedules and identifying ways to move up or explore different career fields, but it also offers financial assistance.

Through two degrees and a certification, Cromartie has used the hospital tuition reimbursement program, which is now a scholarship program.

"They were very supportive to help me go back to school," Cromartie said.

She started in 1998 as a nursing assistant before going back to school to get a bachelor's degree in business in 2010 at the University of Phoenix, which at the time had a campus in Fayetteville. She was allowed to be supplemental staff, where she could make her own schedule.

"Cape Fear Valley made it easy," Cromartie said. "They reimbursed all of my tuition. I was a single mom with two children. My son was diagnosed with autism and they worked with me for my schedule and with my son's doctor appointments."

She received her master's degree in human resource management from Webster University in 2017 and recently completed a certified recruiting course for continued education. Between the tuition assistance and the ability to adapt her work schedule around classes, Cromartie gives credit to Cape Fear Valley Health for allowing her to advance her career.

"They even have scholarships and in-house training to help employees succeed," Cromartie said.

Another long-time employee who has moved up the ladder while going back to school is Robert Williams, who started as a staff respiratory therapist in 2007 with an associate degree in

respiratory care. While working for the health system, he earned a bachelor's degree in healthcare administration and a master's degree in business administration from Independence University.

He said because the school needed somewhere to run the clinical portion of their online program, staff were able to attend free of charge.

"Cape Fear Valley Health is full of opportunities for growth," Williams said.

Williams was appointed Corporate Director of Respiratory Care Services in 2015 after serving as the Manager of Cape Fear Valley Hoke Hospital's Cardiopulmonary Department.

And sometimes, support and opportunity does not just help you up the ladder, but through a different door, as Corporate Clinical Informatics Officer Jennifer Ray discovered. Ray was working as a nurse with patients who had knee and hip replacements, first in a rehab setting, and then in the orthopedics surgery unit. After earning her certification as an orthopedic nurse and a bachelor's degree in nursing using the tuition reimbursement program, she went into nursing leadership, but did not feel like it was a right fit. It was then she discovered healthcare informatics.

"It's a world no one talks about, but it completely sparked my interest," Ray said. "I wanted to know how that light turned on when something happened to the patient. I wanted to know what drove it, what made it happen."





"I was able to take my nursing knowledge and background to bridge the gap between patient care and the IT world," Ray said.

She credits Cape Fear Valley Health for allowing her to grow in a career she loves.

"I love nursing so much," Ray said. "What Cape Fear Valley does is help you find the right seat on the bus."

To help employees reach new heights and advance in their careers, Cape Fear Valley Health has several programs, including the following:

Scholarship opportunities for employees wanting to pursue further professions in healthcare, including CT Technologist, CRNA, Licensed Practical Nurse, Medical Laboratory Tech, Pharmacy Tech, BSN Registered Nurse, ADN Registered Nurse, Respiratory Therapy, Sterile Processing Technician and Surgical Tech.

Clinical Ladder Program for registered nurses to advance to the next level by going back to school. If you are a registered nurse with at least one year of experience providing direct clinical care to patients, you are eligible for this program, including full-time, part-time and flexible weekend staff, resource and charge nurses, clinical educators, per diem staff and supplemental staff. Completion of degrees include financial benefits.

Another program for nurses is the Nursing Assistant (NA) II Bridge Program, which is designed to help entry-level nursing assistants advance their skills and careers. The 15-week program hosts three classes of students with weekly didactic and clinical classes as they prepare for the NA II test. Cape Fear Valley also has a Pre-Nursing Tuition Payment Program to help employees of Cape Fear Valley Health complete prerequisites in preparation for a nursing degree.

If you wish to receive additional information, apply for scholarships or receive information on other career programs offered by Cape Fear Valley Health, please send an email to scholarships@capefearvalley.com or scan the QR code.





COMMUNITY giving. COMMUNITY healing.

These words reflect the work of Cape Fear Valley Health Foundation. Gifts through the Foundation strengthen our community by improving and enriching local healthcare. Thanks to a community of generous givers, we are making a positive impact and providing healing to you, your family and friends, and neighbors who receive care from Cape Fear Valley Health. For more information about the Foundation, please contact our office at (910) 615-1285, email foundation@capefearvalley.com or visit our website at cfvfoundation.org.



These gifts supported cancer patients, sick babies and children, those with heart disease, nurses continuing their education, physicians in training and so much more.

We are grateful to the donors who make this support possible.



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We extend our gratitude to all donors to Cape Fear Valley Health Foundation for their financial support of our programs. The following is a cumulative list of all donors who have given \$1,000 or more during our 2023 fiscal year (10/1/2022 – 9/30/2023). These gifts represent support of Cape Fear Valley Health Foundation, Bladen County Hospital Foundation and Harnett Health Foundation. Due to space limitations, we are not able to list all our donors, but your gifts, no matter the amount, are all greatly appreciated. Any omissions or errors in the donor listings were unintentional. If there are errors, please accept our apologies and contact us at (910) 615-1285 or foundation@ capefearvalley.com so the situation may be corrected. Thank you.

This list reflects gifts made between October 1, 2022 and September 30, 2023 of \$1,000 or more.

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STEP UP 4 HEALTH

draws fun crowds and supports patient care

by Ashley Lee

More than a thousand people from the greater Fayetteville community gathered on Methodist University's campus on Saturday, April 20, for a morning of fun and fitness at Cape Fear Valley Health Foundation's Step Up 4 Health and Wellness Expo. There was fun for the whole family with fairy hair, food trucks, a kid zone, Zumba and much more.

The event raised funding to support patient care areas at Cape Fear Valley Health, including cancer care, heart care, children's services, Community Alternatives Program, the Nursing Education Scholarship and Cumberland County Medication Access Program. Almost 800 people participated in the main walking or running events, and there were more than 50 vendors in the Wellness Expo.

Thank you to everyone who came out and supported this wonderful event, especially our top sponsors:









Stay updated on Cape Fear Valley Health Foundation events by visiting cfvfoundation.org









CAPE FEAR VALLEY HEALTH: NEWS briefs



Bryan Honda brings miles of smiles to pediatric patients

Fayetteville dealership Bryan Honda and American Honda Motor Company's Project Courage donated a Shogo to Cape Fear Valley Medical Center in April. The child-sized electric vehicle is designed to navigate hospital hallways and allows pediatric inpatients to drive themselves around the hospital for treatments, appointments and procedures, rather than being transported in a wheelchair. Cape Fear Valley Medical Center is the first facility in the Carolinas to have a Shogo.

The car has easy-to-use power controls on the steering wheel, while the speed (1 to 5 mph) is controlled by a caregiver. It's also equipped with an IV pole/portable monitoring, push bar for manual operation, and fun features including a bucket for "stuffed friends" or other take-along activities, horn sounds and a holder for personalized license plates.



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Thank you for your service, Harnett Health Board of Trustees!

The Harnett Health Board of Trustees voted to dissolve at its February meeting as part of the health system's continuing integration with Cape Fear Valley Health. Cape Fear Valley and Harnett Health

would like to thank all who have served on this board in the past, including the most recent members, Chair Walter Massey, Vice Chair Neil Emory, Treasurer Gene Lewis, Secretary Eric Truesdale, and Trustees Dr. Terrill Brown, Townsend Quinn, Teddy Byrd and Michael Nagowski, who represented Cape Fear Valley.

Dr. Brown will now represent Harnett Health with his seat on the Cape Fear Valley Board of Trustees.

Diabetes Spring Ball raises money for summer camp

Cape Fear Valley's Sweet Kids with Diabetes organization hosted their eighth annual Diabetes Spring Ball on April 13. More than 160 adults and children attended and more than \$21,000 was raised to help finance Sweet Kids with Diabetes Summer Camp. More than 1,000 children in Cumberland and surrounding counties live with Type 1 or 2 diabetes. Due to their diabetes, the majority of these children, are not allowed to participate

in summer camps due to daily use of insulin pumps, sensors and other devices that will require staff training. The overnight Diabetes Camp will be hosted at Camp Rockfish from Thursday, June 20 through Sunday, June 23. Children with diabetes from ages 6-18 are encouraged to participate. Volunteers to assist with the camp scheduled as also needed. For more information, visit sweetkidswithdiabetes.com or call (910) 615-1885.

Legacy Pediatrics joins Cape Fear Valley Health



Ana Hodges, MD

Legacy Pediatrics, which has served the Fayetteville area since 2009, has joined Cape Fear Valley Health. Their two pediatric clinics opened on May 6 under the names Cape Fear Valley Legacy Pediatrics, which is located at 556 Sandhurst Drive, Fayetteville, and Cape Fear Valley Legacy Pediatrics North, which is located at 1095 N. Bragg Blvd., Ste 104, Spring

Ana C. Hodges, MD, and her team remain with the practice, including Physician Assistants Cheyanne Parker, Alyssa Tarr and Elizabeth Wise.

Both locations are open Monday through Thursday from 8 a.m. to 4:30 p.m. and Friday from 8 a.m. to Noon. To schedule an appointment at the Fayetteville location, call (910) 483-2646. To schedule an appointment at the Spring Lake location, call (910) 339-6015.



Cape Fear Valley Ear, Nose & Throat completes first Inspire therapy procedure

Jennifer Tartaglia, MD, of Cape Fear Valley Ear, Nose & Throat has completed the first Inspire procedure for that clinic. Inspire is an FDAapproved obstructive sleep apnea (OSA) treatment option for people who cannot use continuous positive airway pressure (CPAP) therapy.

Inspire works inside the body with a patient's natural breathing process to treat sleep apnea. Mild stimulation opens the airway during sleep, allowing oxygen to flow naturally. The patient uses a small handheld remote to turn Inspire on before bed and off when they wake up.

To learn more about Inspire, please visit InspireSleep.com or capefearvalley.com/sleep.



Cape Fear Valley Health honors three at Doctor's Day event

Cape Fear Valley Health Foundation's Caduceus Society honored several providers recently, when Cape Fear Valley Health Medical Staff Services held its 2024 Doctors' Day celebration at the Center for Medical Education and Neuroscience Institute. Three awards were presented – Advanced Practice Provider (APP) of the Year, Resident of the Year and Physician of the Year. The Caduceus Society honors the legacy of physicians in the community while providing resources that strengthen the shared vision of the medical staff.

The Physician of the Year award was given to Keith Gallaher, MD, a neonatologist who has practiced in the Neonatal Intensive Care Unit at Cape Fear Valley Medical Center since 1992. Su Su Win, MD, who is a Class of 2024 Internal Medicine Resident, was named Resident of the Year. Physician Assistant Kathy Jones, who works in the Hematology and Oncology departments, was named as the 2024 APP of the Year.

Sanjay Garg, MD, publishes in Journal of Family Medicine

Rheumatologist Sanjay Garg, MD, of Carolina Rheumatology & Internal Medicine, recently co-authored a case report titled, "Herpes Zoster Reactivation in Patients on Methotrexate: An Important Consideration," in the Journal of Family Medicine. He was listed as a co-author with Neha Garg, Ryan Jones and Ezra Cohen, MD.

Heartfelt Banquet honors survivors and caretakers

Heart patients gathered at the Cape Fear Valley Center for Medical Education and Neuroscience Institute on Feb. 27 to celebrate their survivorship with a Heartfelt Banquet. The Heartfelt Banquet gives patients a chance to share their stories and connect with their care team - from EMS to hospital medical staff. It was a joyous event for all!















Health Pavilion North Cancer Center finishes renovations

Health Pavilion North Cancer Center, one of three Cape Fear Valley Cancer Center locations, has been expanded and renovated to better serve our patients.

The Medical Oncology treatment space, which used to be on two different floors, is now entirely located in a central area on the first floor. This consolidation improves efficiency and provides a better workflow for the cancer care team, which in turn improves the patient experience while also accommodating more patients. There is greater flexibility for patients' scheduling their therapy appointments.

The renovation includes six additional exam rooms and expansion of the Medical Oncology area to include eight additional infusion chairs.

Health Pavilion North Cancer Center continues to offer radiation oncology at the same location. Additionally, the renovations include aesthetic designs to promote a more relaxing and calming environment.

The forward-looking plan for this expansion is just another reason why Cape Fear Valley Health's Cancer Centers maintain their accreditation by the Commission on Cancer and earned the distinction as an American College of Surgeons Surgical Quality Partner. This designation shows we maintain the highest standards in surgical care.



Support Groups

Alzheimer's Caregiver Support Group

Meets the third Tuesday of each month from 2 – 3 p.m. Medical Arts Center 101 Robeson Street, Suite 106, Fayetteville For more information, call (910) 615-1781 or (910) 615-1633.

Alzheimer's Caregiver Support Group [second location]

Meets the first Wednesday of each month from 2 – 3 p.m. Harmony of Hope Mills, 7051 Rockfish Rd., Fayetteville For more information, call (910) 615-1781 or (910) 615-1633.

Art Therapy for Cancer Patients

Cape Fear Valley Health Cancer Patients meet every Wednesday from 3 - 4:30 p.m. in the Cape Fear Valley Cancer Treatment & CyberKnife Center on Owen Drive in Fayetteville. For more information, call (910) 615-4626.

Bariatric Support Group

Meets the third Thursday of each month from 6 – 7 p.m. Cape Fear Valley Village Surgical 1841 Quiet Cove, Fayetteville For more information, contact Debbie Wooten at dwooten@ capefearvalley.com.

Better Breathers Support Group

Meets the second Thursday of each month from 5 – 6 p.m. Cardiopulmonary Rehabilitation, 1638 Owen Drive, Fayetteville For more information, contact Diane Schultz at (910) 615-7822.

Dystonia Support Group

Meets virtually the second Tuesday of each month from 3 – 4:30 p.m. January, March, May, July, September, November For more information, contact Crystal Edmonds at cedystonia1920@gmail.com.

Implantable Cardioverter Defibrillator (ICD) Support Group

Meets every three months, on the third Thursday of the month. The next meeting is July 18 from 6 – 7:30 p.m. in the Cape Fear Valley Cancer Treatment & CyberKnife Center on Owen Drive in Fayetteville. For more information, contact Laurie Costello, (910) 615-8753.

Life After Stroke Team

Meets the third Wednesday of each month at 3 p.m. Cape Fear Valley Rehabilitation Center For more information, please call Meghan Dornan at (910) 615-7077.

Mended Hearts

Meets the second Tuesday of each month at 6 p.m. Cape Fear Valley Rehabilitation Center Auditorium For more information, call (910) 615-6580 or email williamfarr88@gmail.com.

Parkinson's Disease Support Group of Fayetteville

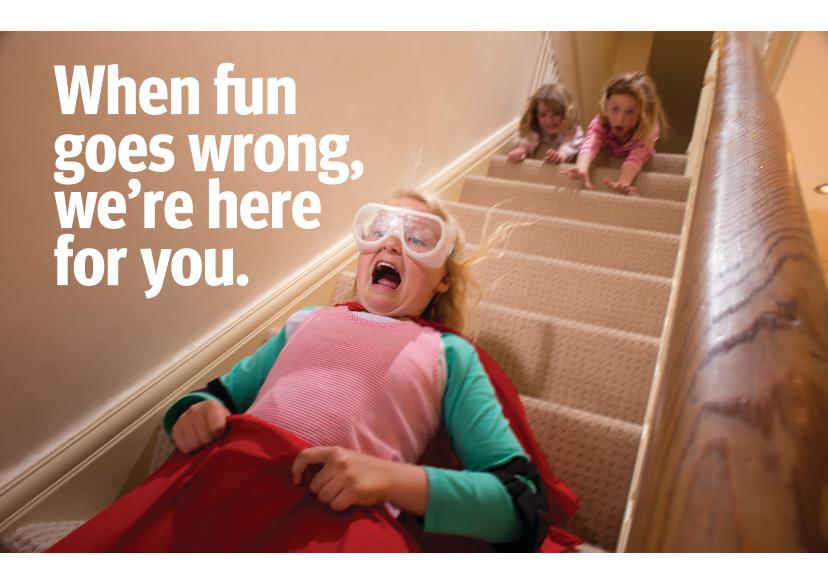
Meets the second Saturday of each month at 10 a.m. Kiwanis Recreation Center, 352 Devers St., Fayetteville For more information, contact Stephen Koetter at (910) 518-0045 or pdsgfay@gmail.com.



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