Women’s Choice Award recognizes AnMed Health for excellent heart care

ANMED HEALTH has earned the 2015 Women’s Choice Award as one of America’s Best Hospitals for Heart Care. The honor signifies AnMed Health’s dedication to meeting the highest standards in heart care as one of only 353 hospitals in the United States to qualify for this evidence-based designation.

“The staff of AnMed Health has always prided itself on its focus on heart care for all of our patients,” said Dr. Mike Tillirson, executive vice president and chief medical officer. “We are truly honored to be selected for such a prestigious award, especially considering how much care goes into the selection of its recipients.”

The Women’s Choice Award is based on robust criteria that consider patient satisfaction, clinical excellence, and what women really want when it comes to treatment and a quality hospital experience.

“Our mission is to reduce the risk for women and their families so they can make smart healthcare choices,” said Delta Passi, CEO and founder of the Women’s Choice Award, and former publisher of “Working Woman” and “Working Mother” magazines.

The America’s Best Hospitals for Heart Care list is determined by first identifying the top 25 percent of hospitals across the nation that offer a minimum number of cardiac and/or vascular services. The only hospitals selected must perform well clinically with regard to heart care measures reported to Medicare and also have a high Hospital Consumer Assessment of Healthcare Providers and Systems recommendation score, a measure that is important to women when choosing a hospital.

An evidenced-based analysis shows that AnMed Health scores well in some of the areas most important to women.

Lung Screenings: A new path to early detection saves lives

Looking up
LifeFlight celebrates 5 years in the sky
AnMed Health culturally equipped for changes in health care

We have been the beneficiaries of a strong executive and leadership team for many years, but my first priority as CEO was to find replacements for two key members of the AnMed Health leadership: Doug Douglas retired as Vice President of Human Resources at the first of the year, and Jerry Parrish, our Vice President of Finance, retires this summer after almost four decades. We will also need to find a new Vice President of Medical Affairs to replace Dr. David DeHoll who served capably for many years.

Announcements about who will fill their large shoes will come soon as we assemble the best possible team to move AnMed Health forward. Industry wide, significant changes are underway in the way hospitals and health systems function. When people think of change in health care, they typically think of medical or technological advances – and those are developments worth excitement. But the biggest change afoot at the moment involves how we do business, whether it is the experience patients have, reducing the cost of quality/safe care, or keeping our community healthy.

The good news for us is the key to the future has already played a key role in our past and present. We have been focused on wellness and safety for a long time, so the culture required for success is already part of the AnMed Health DNA. Our commitment to patient safety and wellness is on display in scores of areas, from how our employees interact with patients and families to a network of physicians and programs designed to keep people as healthy as possible. That’s the future of health care and health care costs: keeping people as healthy as possible and reducing the need for costlier treatments. It’s called value based care. For the patient, the value is in lower costs, which we can measure, and all the benefits of better health, which we cannot measure.

I look forward to my tenure as CEO of your health system during this new era of health care.

Bill Manson

FROM THE CEO
New screening guidelines mean early detection

NANCY GLIDDEN is a self-proclaimed worrier. It’s why she has seen Dr. Robert Person at Cannon Memorial Hospital for an annual physical for the last several years. It’s why she gets a regular mammogram. It’s why she quit smoking at the age of 50 after 25 years of indulging in the habit, and it’s why she combines service and a smile at Waffle House with the occasional tip on good health.

However, 13 years after giving up tobacco, Glidden wasn’t worried about her lungs.

When Dr. Person told Glidden that she qualified for a low-dose computed tomography (CT) screening for lung cancer due to her age and medical history, even Glidden thought the screening was excessive. After all, there was no history of lung cancer in her family, and she hadn’t smoked in more than a decade.

When Dr. Person referred Glidden to AnMed Health, she didn’t think much would come of it. “I’m a worrier, but even I wasn’t too worried. I figured I would be at the hospital anyway so why not get this scan done?” Glidden said. “After the scan results came back, I wasn’t just worried. I was telling myself that this was it and I was going to die.”

Dr. Abhijit Raval, a physician with AnMed Health Pulmonary and Sleep Medicine, identified a nodule — a spot on the lung — thanks to the CT scan, but it was located in a difficult area. An attempt to biopsy was unsuccessful, though her lymph nodes showed no signs of cancer.

Dr. Raval then ordered a positron emission tomography scan to reveal more about the nodule. And when those results came back, he recommended surgical resection and proved early-stage cancer in the right lung.

Without the initial CT scan, Glidden’s cancer could have gone undetected for months or years. According to Dr. Raval, the lung cancer five-year survival rate is less than 15 percent, which is a staggering number compared to the 99.6 percent survival rate in prostate cancer or the 92.5 percent survival rate in breast cancer. Only 15 percent of lung cancer cases are diagnosed at an early stage, and for tumors that have spread to other organs, the five-year survival rate is only 4 percent.

For a case like Nancy’s, detecting cancer in early stages is life saving. “The low-dose CT screening allowed us to fly her chances of survival,” Dr. Raval said. “Nancy is a health-conscious person, so she understood the need to pursue this screening and all the testing that came with it.”

In August 2011, the National Cancer Institute reported the results of an eight-year national lung screening trial. The trial proved that low-dose CT scans could reduce lung cancer mortality by 20 percent. Considering lung cancer is currently the leading cause of cancer for both men and women in the United States, this 20 percent can mean the difference between life and death for thousands of people every year.

Dr. Raval pushed CT screenings for lung cancer simply because of the importance of early detection. These screenings are slowly becoming a widely accepted tool in lung cancer diagnosis. However, Dr. Raval stresses that a health system must employ a “multimodal” approach in order to use this tool effectively in the way AnMed Health did for Glidden.

Dr. Raval is conducting a pilot study at AnMed Health on these screenings in an effort to hasten the time from diagnosis to procedure for every patient. The number from a screening to the necessary procedure takes less than a week at AnMed Health, but Dr. Raval wants that timeline to be even shorter and more consistent.

“It requires a team approach to comprehensive care, which is what went so well for Nancy,” Dr. Raval said. “We have to be able to make a diagnosis, back it up and then do the right thing about it.” The right thing for Glidden was surgery on March 10 to remove the lower lobe of her right lung, which meant she did not require radiation or chemotherapy. Dr. Person later told Glidden surgeons removed cancerous growth the size of a fingertip before it became the size of a golf ball, and it was all thanks to the low-dose CT.

Even with surgery and a 10-day hospital stay, Glidden said the entire experience was “a breeze.” She said she “fell in love” with Dr. Raval and appreciated how forthcoming and honest all of her doctors were with her, especially about what she was avoiding by undergoing surgery. Less than three weeks after being released from the hospital, Glidden was back to work at Waffle House, worrying a little less than she used to.

“Stress will kill you before anything else will,” Glidden said. “Doctors can do so much these days, so I try to let them do everything they can so I worry less.”

IF YOU ARE:
• 55 to 74 years old
• AND have smoked: 1 pack a day for 30 years OR 2 packs a day for 15 years
• AND quit smoking less than 15 years ago or still smoking

• 55 to 74 years old
• AND have smoked: 1 pack a day for 20 years OR 2 packs a day for 10 years
• AND quit smoking less than 15 years ago or still smoking

• 55 to 74 years old
• AND have smoked: 0.5 pack a day for 40 years OR 1 pack a day for 20 years
• AND quit smoking less than 15 years ago or still smoking

Taking the helm
Bill Manson takes over top leadership role at AnMed Health

IF BILL MANSON SEEMS BUSY, HE IS.
Taking over this year as CEO of AnMed Health, Manson is at once new and experienced. He has been part of the organization’s leadership since the 1980s and continues some of the duties he held previously as chief operating officer. But like anyone new on the job, this CEO is working to solve fresh challenges every day.

It's a big challenge.
“Most of people aren’t convinced that the government is pushing the healthcare industry in the right direction, but either they’re forgetting, or never understood, what was going on before,” Manson says.
“What we have had for the last 40-50 years is expensive and unsustainable. It is a broken system that has lumped along on momentum rather than success. Healthcare is undergoing a major overhaul because our nation can’t afford a system that is based on ignoring what is healthy for most of our life, and then expecting the government or someone else to pay to fix all of our chronic diseases in our retirement years.”

Making the transition to a new paradigm based more on health and less on health care is a challenge for all providers and health systems. The AnMed Health Board of Trustees believed the person for the job was already on the executive team, and already elbow-deep in operations, when they chose William T. Manson III as CEO after John Miller announced in 2014 that he would step down from the post.

The man they ushered into the CEO’s chair is an economics graduate of Davidson College with an MBA from UNC-Charlotte. Before coming to AnMed Health in 1991, Manson got his first exposure to hospitals and healthcare while working for The Duke Endowment in Charlotte, N.C., a private foundation that supports hospitals in North and South Carolina. He decided then to use his business background in a setting that focused on people’s needs and was built on the concept of service.

Born in South Carolina, Manson grew up in Virginia. A self-proclaimed “music geek,” as a young man he was a multi-instrumentalist who played in a jazz band in high school and collected a wide variety of music. He rarely plays music now but does sing in the choir at First Presbyterian Church of Anderson and sang with GACMAC’s chorale for a number of years. Like the organization he now heads, Manson is deeply embedded in the community. He has served the United Way of Anderson County, the Anderson Area Chamber of Commerce, Success by Six, the Anderson Free Clinic and as an elder in his church.

His professional activities include his current position as chairman of the South Carolina Hospital Association. He is a fellow of the American College of Healthcare Executives and has served as both South Carolina chapter president and regent for that organization.

He and other healthcare leaders are guiding the industry through an uncertain political climate to focus on a new way of delivering healthcare by delivering better value for those paying the costs. The focus is on an idea called the Triple Aim: improving the experience of care, improving the health of populations, and reducing per capita costs of health care.

“Essentially what we want to do is keep people healthier. People will always need the Emergency Department and there will always be a need to hospitalized people, but what we want to do is minimize those more costly measures by working better and smarter to manage health,” Manson says. “Throughout our system, we are implementing measures and programs to better care for those with health issues in an outpatient setting and reduce hospitalizations.”

The Congestive Heart Failure Clinic is one example. Congestive heart failure is the most common reason to hospitalize Medicare patients and 34 percent are readmitted within 90 days at AnMed Health. Readmission means testing and treatment that are much more expensive than regular visits to the Congestive Heart Clinic at the North Campus, where patients get the monitoring, care coordination and home support critical
SEVERAL MEMBERS of the AnMed Health LifeFlight crew were demonstrating equipment for a television news reporter when a man approached the fence around the landing pad. “I just wanted to see it up close,” he said. “They saved my life.”

He had been on the helicopter once, the man explained, but he doesn’t remember any of it because he was dying at the time. He needed specialized care in Charleston and he needed it far faster than an automobile could get him there — even one with red lights and sirens. “My brain was bleeding,” he said. “I don’t really know what they did. But the doctor in Charleston said I never would have made it in time on an ambulance.”

A few weeks later, Tori Benecchi and her family stood around the LifeFlight helicopter. They laughed and made jokes. It was laughter shared after a five-year journey that started on the day Benecchi should have died.

When the crew of a new service called LifeFlight arrived that day, Benecchi had a massive head injury and much of the rest of her body was as mangled as the car she had been riding in. She was still in the car, but it was torn and shredded and at rest in a tree.

LifeFlight team members saved two lives on those two days, and touched many more as a result. In the first case, the LifeFlight crew worked as a team, but the star of the show that day was the speed of the helicopter. On the second day, the star was flight nurse Jennifer Clark, who performed a technically difficult face-to-face intubation to keep Benecchi alive, then held on to her patient’s cold body as the patient held on to life.

LifeFlight is a team, says Paul Hubbard, director of the program. Sometimes one part of the team has a heavier load to carry than others, depending on the circumstances. Every call is different, and more than 1500 patients have flown in the five years since the service answered its first call.

Former CEO “John Miller saw the need for a service that could quickly respond, treat and transport critically ill and injured patients, not only in Anderson County but for the entire area,” Hubbard said. “We established it with a vision to be recognized and celebrated as the gold standard for air-medical transportation within the communities that we serve.”

A LifeFlight crew consists of a pilot, a flight nurse and a paramedic. Registered nurses must have a minimum of five years of experience in an emergency room; paramedics are required to have five years of experience at a busy 911 center. The least experienced flight nurse in the program has eight years in an ER and the least experienced paramedic has been at it for 15 years.

Combined, the entire LifeFlight team of 18 has about 370 years of experience, and they have put it to use by building a service to meet those original goals. LifeFlight was named the South Carolina EMS Small System of the Year in 2013 and also earned accreditation that same year from the Commission on Accreditation of Medical Transport Systems (CAMTS). It is the only flight service in the state with a Lucas CPR device on board and the first to carry frozen plasma on every call.

“Our mission was to make a difference in the lives of the patients we care for, become an accepted and integral part of the health systems in the communities we serve, and ensure that integrity is infused within every aspect of our program,” Hubbard said. “I think we’ve accomplished that.”
A conversation with Dr. Kerry Williams-Wuch

Dr. Kerry Williams-Wuch is a board certified physician in internal medicine, medical oncology and hematology. She is partners with Dr. David Griffin at AnMed Health Oncology and Hematology Specialists, which treats cancer with chemotherapy and other medications.

Q: Why did you decide to become a doctor?
A: My older sister had numerous medical problems growing up and we spent many a day in doctors' offices and hospitals. I was always intrigued by the human body and in awe of its beauty and frailty.

Q: What drew you to oncology/hematology?
A: I always enjoyed hematology (study of blood) and its disorders during medical school but it was really when I moved to St. Louis, Missouri, that I truly became serious about becoming an oncologist. I had just moved to St. Louis and was in the process of doing my medical board exams. During this time, I volunteered at Barnes Jewish Hospital. They had just opened up their new cancer center, Siteman Cancer Center. This was my first exposure to the world of oncology in reality and I loved the patients. They are the most inspiring people I have ever met and I have learned so much about life from patients and their families.

Q: Is there anything in particular about the near future of oncology that excites you?
A: Personalized medicine is the wave of the future. Up until now, we have treated cancer in a shotgun fashion: one treatment fits all. However, we know that cancers behave differently in individuals. We are moving forward with taking tumor biopsies and banking them in large repositories. These specimens will then be tested for mutations and variations. Ultimately, we will develop new drugs targeted against these specific mutations and variations. The hope is that we will be able to treat cancers as a chronic disease with a pill a day for many years. We, however, always hope for a cure.

Q: What is the best lesson you have learned about being a doctor?
A: Don't sweat the small stuff. Life is very fragile and is so short. Hold those you love close to you and don't waste your energy on people who are not true, honest and caring. I used to be such a control freak – the house had to be spotless, my day had to be scheduled to perfection. Being a mother, wife and busy oncologist, I am now not worried if the house is not perfect or my day is chaotic. Sometimes you just have to let go and breathe.

Q: What advice do you find yourself giving most often to patients?
A: Enjoy each day to the fullest. We never know how much time we have on this Earth. Doctors like to make predictions but honestly, none of us has a crystal ball. Each minute is precious. Tell those you love everyday how special they are and how much you love them.

One of the biggest problems with cancer treatments for patients is the complete loss of control. We tell them where to be, what tests to have, when to do them and they have no control over the side effects that come with treatments. I strongly encourage my patients to get involved in their care, become proactive, exercise, eat well and take charge. Together we can be victorious.

Q: What is the best advice you have received?
A: One of my mentors at my first job out of fellowship once told me: Ask for help. I have always had difficulty asking for help but she advised me that we have a limited number of hours in a day and those hours are precious. Ask people to help with cleaning, cooking so that you can spend time with family and focusing in on patient care.

Q: What do you think makes a good doctor?
A: Empathy and compassion. I also believe that we need to be good listeners. We are essentially problem solvers and need to listen to our patients, as they provide us with so many clues.

Q: If you had not chosen medicine, what would you be doing?
A: Special effects for movies. I am a huge fan of the TV show “Mythbusters.”

Q: Where is your favorite whitewater spot?
A: Arkansas River, Cotopaxi, Colorado.

Spine and Neurosurgery joins network


Dr. MacDonald has served the Anderson area for over 18 years. Dr. Davidson has practiced in the Southeast for more than two decades and in Anderson for nearly four years.

AnMed Health Spine and Neurosurgery will offer care for disorders and complications that can occur in the brain, spine and peripheral nervous system. Davidson and MacDonald specialize in a wide variety of procedures, including intracranial brain surgery, neurosurgery and spinal surgery.

Piedmont Surgical Associates join the AnMed Health team

The surgeons of AnMed Health Piedmont Surgical Associates recently joined the AnMed Health Physician Network.

The surgeons offer decades of experience and progressive training in state-of-the-art technologies. The practice offers multiple surgical procedures including laparoscopic, bariatric, endoscopic, thoracic and breast surgeries as well as general surgery.

The physicians include Drs. William S. Buice, James G. Foster, Paul M. Frassinelli, David W. Strathern, T. Steve McIvellion, James P. Stokes, Peter J. Bechtel and Adam H. Beal.

Three nurses honored among state’s best

The South Carolina Nurses Foundation recognized three AnMed Health nurses among the state’s best. David Cothran, Darlene Hoyle and Doris Street previously practiced with Piedmont Spine and Neurosurgical Group.


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The South Carolina Nurses Foundation recognized three AnMed Health nurses among the state’s best. David Cothran, Darlene Hoyle and Doris Street are among the recipients of the 2015 Palmetto Gold Award. The Palmetto Gold Nurse Recognition and Scholarship Program is South Carolina’s only statewide recognition program for nurses from all practice settings. The South Carolina Nurses Foundation honors each year’s recipients during its annual Palmetto Gold Gala.

To prevent readmission. The patient stays healthier, the insurance company – Medicare in this example – saves money and AnMed Health avoids financial penalties for effectively managing both health and cost.

“Right now, the incentives for changing the system are mostly ‘sticks,’” but providers are learning how to accept risk for value based care, and hopefully become financially successful at the new model. The two models are so different it’s like standing with one foot in each of two canoes,” Manson said. “As they start to move apart, and they are, you have to know when to get both legs into the same canoe without falling in the water.”

“I don’t think we can find a perfect answer to all of the challenges in health care, but I feel very good about where we’re headed,” Manson says. “This shift from volume to value means healthcare providers accept a larger portion of the risk. But it also means a larger reward for us to keep you healthy than to cure you after you’re sick. Also, as prevention and coordinated care management become the norm, primary care is getting more attention in the new model.”

One implication of the change is the absolute necessity for physicians to help lead the process change. We can’t make this transition without physician’s leading every step of the way, and we are going to have to find new ways of engaging physicians, not just in providing healthcare, but in designing a system which keeps people as healthy as possible and reduces the cost of care nationally.”

Although he has made some adjustments, Manson acknowledged that the CEO’s office didn’t come with a shake-up of leadership. He believes the team already in place – including medical and non-medical staff – is part of a culture that puts the right emphasis in the right place for the right cause.

“We’re here to deliver the very best we can for the patients in this community – and over time, that means for everyone in this community,” he said.
AnMed Health welcomes new physicians

The following physicians have joined the AnMed Health medical staff over the last several months:

Dr. Rashmi Chandra joined the network to start a new practice, AnMed Health Internal Medicine, at 105 Buford Avenue in Anderson. She is an internist with experience and training from Johns Hopkins University/Sinai Hospital in Baltimore, Md., where she completed her residency.

Dr. Michael E. Guyton joined the AnMed Health medical staff, serving pediatric patients at AnMed Health Kids’ Care. He earned his medical degree at the University of South Carolina School of Medicine and completed residency with Greenville Health System.

Dr. Rick Alan Henderson joined AnMed Health Arrhythmia Specialists. He is a graduate of the Brody School of Medicine at East Carolina University. Dr. Henderson completed his internship and residency at the Wake Forest University School of Medicine, followed by a cardiology fellowship at Penn State University’s M.S. Hershey Medical Center and a cardiology electrophysiology fellowship at the Wake Forest University School of Medicine.

Dr. Ravi Kant joined AnMed Health Endocrinology. Dr. Kant was a fellow with the Division of Endocrinology, Diabetes and Nutrition at the University of Maryland Medical Center. He also fulfilled a fellowship in geriatric medicine at the University of Maryland and completed residency at Johns Hopkins University/Sinai Hospital in Baltimore, Md.

Dr. Lisa Lichota joined Piedmont Comprehensive Pain Management Group. She is a board-certified physician with more than 20 years of experience in pain management. She holds certifications in interventional pain management, addiction medicine and emergency medicine.

Dr. Joseph B. Mulvihill joined AnMed Health Wren Family Medicine. A board-certified family physician, he is a graduate of Clemson University, and the St. George’s University School of Medicine, where he earned his medical degree. He completed his residency through the AnMed Health Family Medicine Residency Program.

Dr. Jonelle M. Oronzio, a pediatric hospitalist, joined the medical staff at AnMed Health Women’s and Children’s Hospital. She completed her residency through Greenville Hospital System and earned her medical degree from the Medical College of Georgia.

Dr. Michelle L. Tucker joined AnMed Health OB-GYN Associates at the North Campus. She is a graduate of the University of North Carolina School of Medicine. She completed her residency in obstetrics and gynecology at Greenville Health System and served as chief resident. She most recently worked at Baptist Easley Hospital and as a clinical associate professor for the University of South Carolina School of Medicine. She is board certified.

Dr. William F. Wagner, board certified in anesthesiology and pain management, joined Comprehensive Pain Specialists. He earned his medical degree from the University of Texas Medical Branch and completed a residency in anesthesiology at the University of Texas Health Science Center and a fellowship in pain management at Stanford University.

Dr. Karen Y. Weise joined the team at CareConnect in Anderson. She is a graduate of the University of Miami School of Medicine and completed her residency at Greenville Health System. She is also an assistant professor for the University of South Carolina School of Medicine.

Dr. Jerry Williams-Wuch joined Dr. David Griffin in a new practice, AnMed Health Oncology and Hematology Specialists. She is a board-certified medical oncologist and hematologist. Dr. Williams-Wuch completed a fellowship in hematology/oncology at Siteman Cancer Center and an internal medicine residency at St. Mary’s Health Center in St. Louis, Mo. She earned her medical degree from the University of Witwatersrand in Johannesburg, South Africa.

AnMed Health named a Top Performer

The Joint Commission recognized AnMed Health as a 2013 Top Performer on Key Quality Measures. AnMed Health was recognized as part of The Joint Commission’s 2014 annual report, “America’s Hospitals: Improving Quality and Safety.”

The program recognizes hospitals for improving performance on evidence-based interventions that increase the chances of healthy outcomes for patients with certain conditions, including heart attack, heart failure, pneumonia and others.

Help comes when insurance fails

DAVID RAMSEY’S WHEELCHAIR is his constant companion. It has kept him moving for 27 years since a gunshot left him paralyzed from the waist down. It is his lifeline to mobility.

The chair also can be dangerous for him. People who spend most of every day in a wheel chair rely on often unseen technology to remain healthy. Without the proper cushioning, sores can become life-threatening ulcers, and that’s what happened to Ramsey when his cushion wore out before his insurance was prepared to buy another one.

He developed a sacral ulcer and was hospitalized with an infection and other wound care issues in January. Without a way to replace the cushion, Ramsey spent much of his healing time worried about what he would do when he returned home. Valerie Hailey, RN, CWCN from Wound and Ostomy Care, was concerned that without a proper cushion, his patient was at risk of re-infection, more hospitalizations and even death.

With Shelley Stone of Care Coordination, she contacted Service Recovery Manager Leigh Freeman, who also manages the Robert B. Claytor Patient Assistance Fund, which then purchased the cushion for Ramsey with the help of the AnMed Health Home Care showroom staff.

“I don’t know what I was going to do without this,” Ramsey said. “I have been trying for months to get the insurance company to replace my ROHex cushion.” The Claytor Patient Assistance Fund helps more than 600 patients each year purchase lifesaving medications or medical equipment, Freeman said. “Mr. Ramsey is the perfect example of why we need the Patient Assistance Fund. Many patients are unable to afford medications and medical equipment because of insurance limitations and also because people are struggling financially to meet their basic needs. We want to thank Reverend Bob Claytor who started this fund over 25 years ago and all the people who have helped it remain in place over the years.”

The Robert B. Claytor Patient Assistance Fund is supported through The AnMed Health Foundation. Find out more about the Foundation, its causes and how to give at www.anmedhealthfoundation.org. Or call 864.512.3477.
The AnMed Health Foundation distributes funds

Ann Herbert, chairman of The AnMed Health Foundation, presents a check to Leigh Freeman, service recovery coordinator, who accepts the $12,000 gift on behalf of the Robert B. Claytor Patient Assistance Fund.

Denise Hamby, nurse manager for 4-Center, accepts a check from the Foundation board’s Ann Herbert on behalf of the Synergy Project team. The multidisciplinary team makes pill boxes available throughout the system to any patient with multiple prescriptions who needs one. Also pictured are (l-r) Rebecca Finley, Bryan Kennedy, Dianne Spoon and Nancy MacDougal.

Pat Eberhardt, nurse navigator at the AnMed Health Cancer Center, accepts a $21,000 Foundation check from The AnMed Health Foundation. Ann Herbert, representing the AnMed Health Cancer Center, Pat Eberhardt, nurse navigator at 4-Center, accepts a check from the Foundation board’s Ann Herbert on behalf of the Synergy Project team. The multidisciplinary team makes pill boxes available throughout the system to any patient with multiple prescriptions who needs one. Also pictured are (l-r) Rebecca Finley, Bryan Kennedy, Dianne Spoon and Nancy MacDougal.

Freedom Link received a $15,000 contribution from The AnMed Health Foundation. Ann Herbert, right, presents the check to Lauren Rice and Kyerrah Hall, representing Freedom Link.

The AnMed Health Foundation supported the annual scale drive by donating $2,000 to Michael Gibson and Pam Eckstein of the Congestive Heart Failure Clinic.

Save the date
The AnMed Health Foundation annual Kids Classic will take place at Currahee Club on Oct. 12, 2015. The golf course in Toccoa, Ga., has been named the state’s best club and one of the top 100 residential clubs in the nation. Registration begins at 9:30 a.m. with a shotgun start at 10:15. Sponsorship opportunities are available. Call the Foundation office at 644.512.3477 to find out how to become a sponsor.

BOARD PROFILE
Q&A with board member Peggy G. Deane
Peggy Gardner Deane joined AnMed Health in 1968 and retired in 2006 as senior vice president. She was a registered nurse, an educator, a mentor and a leader. The Peggy G. Deane Nursing Professional Development Fund was established in her honor to support the ongoing development of the men and women who wish to advance their nursing education.

Q. Why did you get involved with The AnMed Health Foundation?
A. Because I am committed to the mission and vision of The AnMed Health Foundation. AnMed Health medical centers are a major part of my life.

Q. What kind of insight does your professional life give you as a Foundation board member?
A. Knowledge of how health care must be focused on wellness programs as well as medical programs. I have good knowledge of the important need for progressive Foundation activities.

Q. Some people retire and never look back. Some never retire. Which are you?
A. I will never retire as long as I have my good health.

Q. How do you compare today’s community’s health needs to those of your early years in nursing?
A. Very different because of new technology and enhanced education for all caregivers and leaders.

Q. What can non-medical people do to help?
A. Become active ambassadors for AnMed Health and pledge financial annual gifts. Become familiar with services provided and positive outcomes.

Q. Why would you recommend that your friends and neighbors support The AnMed Health Foundation?
A. Because it is a top-of-the-line Medical Center located in Upstate South Carolina offering quality, caring services by an excellent, competent staff. Support the AnMed Health Foundation to keep abreast of new technology, medical specialists, and a medical institution that attracts top quality employees to provide medical and health care services second-to-none.

OUR MISSION
To inspire generous charitable giving that strengthens and sustains excellent healthcare through the AnMed Health System.


Q&A with board member Peggy G. Deane
Peggy Gardner Deane joined AnMed Health in 1968 and retired in 2006 as senior vice president. She was a registered nurse, an educator, a mentor and a leader. The Peggy G. Deane Nursing Professional Development Fund was established in her honor to support the ongoing development of the men and women who wish to advance their nursing education.

Q. Why did you get involved with The AnMed Health Foundation?
A. Because I am committed to the mission and vision of The AnMed Health Foundation. AnMed Health medical centers are a major part of my life.

Q. What kind of insight does your professional life give you as a Foundation board member?
A. Knowledge of how health care must be focused on wellness programs as well as medical programs. I have good knowledge of the important need for progressive Foundation activities.

Q. Some people retire and never look back. Some never retire. Which are you?
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