

Summer 2014

Inside

 ANMED HEALTH

Taking charge of life

Weight loss surgery turns patient's eyes to future

Living in the weeds again

New procedure turns life around for adult asthma patients

Taking time to care

Patients and their records have a place to call home



It's the Giving Season for AnMed Health employees

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ON THE COVER: Nicole Cubbedge has lost more than 100 pounds and continues to shed the weight that made her old life dangerous. Asthma and high blood pressure have been replaced with mobility and a new zest for living.

AS I WRITE THIS, employees at AnMed Health are giving. Not just giving their best professional effort during their shift, but they're also giving time and money. They're showing us this summer, as they do every year, that AnMed Health employees aren't just leaders in health care, but they're also leaders in this community.

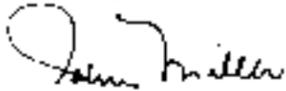
As a non-profit health system, we rely on giving more than many hospitals that have government support. We rely on the community for much of that support. And we count on our own employees to also invest in our healing mission. At any given point on any given day, either of those things can take its turn as our most urgent need.

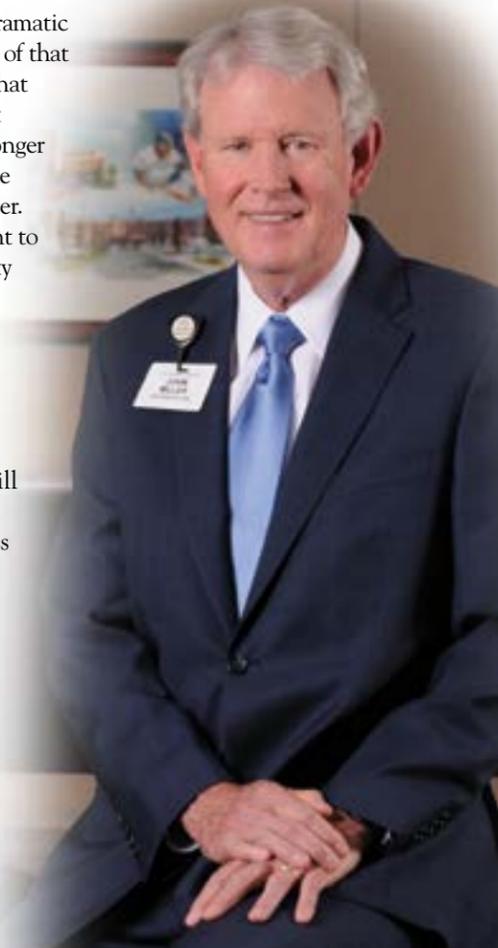
We recently completed our employee giving campaign. I had every confidence that we would reach our goal of raising \$220,000, and we shattered it. Every time we ask, they reach deep and give, even during the economically difficult years we have faced for almost a decade now. Every time our blood banks run low, we put out a call and it's our employees who are first to respond. And almost anytime people gather for a community event, you will find AnMed Health employees there, either representing our health system or volunteering of their own accord to work for a better community. And when we announced our intentions to raise \$1.2 million for a mobile diagnostic unit to take life-saving screenings to people who aren't getting them, contributions from our employees were among the first to come in.

I have every reason to believe that our goals and objectives will be met because of the kind of people we employ. These are goal-oriented citizens who wish to make this community better. I think this philanthropic attitude is part of who they are because they are a part of this community, and this community has a giving spirit, whether it's time or money.

The past several years in healthcare have seen dramatic changes, and there is no reason to believe the pace of that change is going to slow down. One clear trend is that more than ever people have lots of choices when it comes to where they go to receive their care. No longer can a hospital or hospital system assume that people will use them just because they are the local provider. So as we talk about giving and a giving spirit, I want to thank you for giving AnMed Health an opportunity to serve this community and provide care for you and your loved ones. We will continue to invest in bringing the best people and the best technology here, so that we can continue to be your choice for receiving excellent care, right here at home.

As you read the pages that follow, you will see some of the lives we have affected. I hope you will gain a sense of pride knowing that you've played a role as we have grown. AnMed Health's success has been community-driven for more than a century. If you would like to know more about a program or service – if you would like to help – please contact the AnMed Health Foundation (864.512.3477) or visit our website, www.anmedhealth.org/ourfoundation.

Sincerely,

 John A. Miller Jr., FACHE



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BROKEN ANKLE

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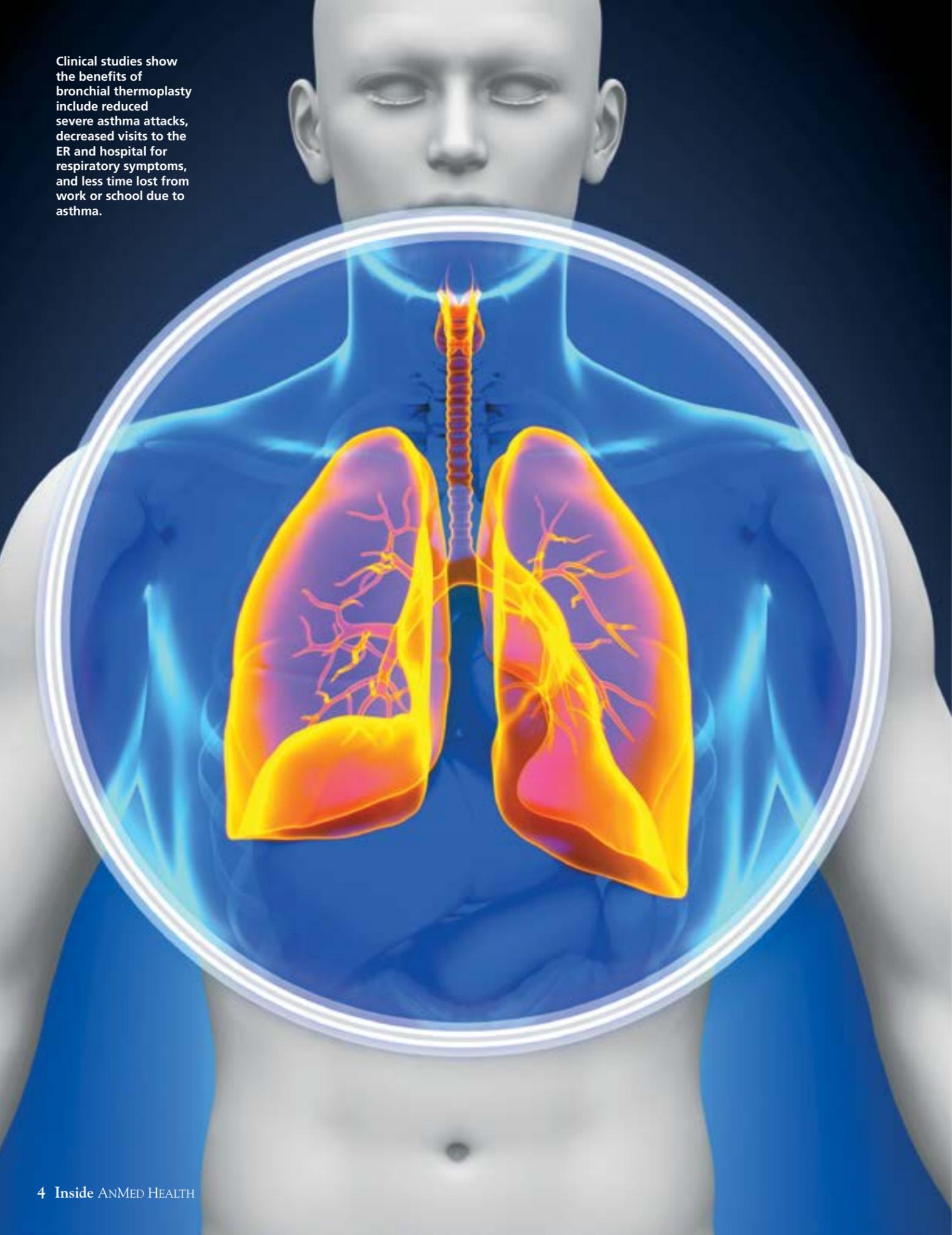
MISSION
 To passionately blend the art of caring with the science of medicine to optimize the health of our patients, staff and community.

VISION
 To be recognized and celebrated as the gold standard for healthcare quality and community health improvement.

ANMED HEALTH
 We're in this together.

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Clinical studies show the benefits of bronchial thermoplasty include reduced severe asthma attacks, decreased visits to the ER and hospital for respiratory symptoms, and less time lost from work or school due to asthma.



Living in the weeds

New procedure sometimes helps adult asthma patients when medication fails

IT MAY BE HARD TO BELIEVE that anyone would crave the monotony of pulling weeds from a garden.

For Anderson County resident Denise Horton, however, pulling weeds is part of a life she thought she would never see again. That's because her severe asthma kept her from gardening and participating in many of the activities she once enjoyed.

"Who gets excited about weeds?" Horton said with a laugh during a break from tending her garden and its weeds.

She can laugh about it now. In February 2013 she received bronchial thermoplasty treatment at AnMed Health. Now her asthma flare-ups aren't nearly as severe as they once were. And she can participate

in many of the activities she missed in the past.

Bronchial thermoplasty is an outpatient procedure that treats severe, persistent asthma in adults who are not well controlled on current medications. It has been available at AnMed Health for about a year, according to Dr. Abhijit Raval, a physician at AnMed Health Pulmonary and Sleep Medicine.

"Bronchial thermoplasty does not replace the standard asthma treatments available," said Dr. Raval. "Each patient needs to be evaluated for what treatment works and what treatment doesn't work. The procedure is an option for patients who are not coming under control with the usual asthma therapies."

Dr. Raval said the lungs consist of multiple airway passages that are surrounded by smooth muscle. For people with asthma, this smooth muscle is abnormally enlarged which can cause it to constrict and reduce the amount of air that flows through the lungs. Bronchial thermoplasty uses a small

catheter to deliver controlled energy to the airways to reduce excessive smooth muscle. This reduction decreases the muscle's ability to constrict the airways, resulting in fewer asthma attacks and better symptom control.

To treat the entire lung, the complete procedure is performed in three separate outpatient treatment sessions, each treating a different area of the lung and scheduled approximately three weeks apart. Clinical studies show the benefits of bronchial thermoplasty include reduced severe asthma attacks, decreased visits to the ER and hospital for respiratory symptoms, and less time lost from work or school due to asthma.

For Horton, the procedure was life-changing.

"Starting in about 2008, I was in the hospital just about every month for asthma complications," she said. "I tried a nebulizer and every other treatment imaginable, but none of it worked."

Horton said she was always short of breath, had episodes of respiratory distress and on a few occasions turned blue from lack of oxygen. A former registered nurse, she gave up her career because of frequent absences and hospitalizations.

Treatment for asthma sufferers is as varied as each patient's medical history, and finding the proper treatment sometimes means striking out with others. Following disappointing results from the various asthma treatments, Horton tried an injection treatment that backfired.

"I had a real bad reaction to it," Horton said. "I became short of breath, had chest pain and had to go to the ER. I felt like something was sitting on my chest."

It was after other therapies had failed that Dr. Raval talked to Horton about bronchial thermoplasty. "I highly recommend Dr. Raval and this procedure for anyone with severe asthma," Horton said. "It's not going to cure asthma, but it sure lessens the severity of the flare-ups."

A mother of three and grandmother of eight, Horton had to miss many family

gatherings and birthday celebrations prior to the bronchial thermoplasty. Now that her asthma flare-ups have been significantly reduced, she is taking full advantage of her new capabilities, from grandchildren to gardening.

Contact your insurance carrier to find out if bronchial thermoplasty is covered by your plan.

Your lungs are always on the job

The average adult takes more than 20,000 breaths a day. With each inhale, air enters the lungs where oxygen is transferred to the bloodstream and sent to all of your body's cells. The body parts responsible for this constant breathing in and out make up the respiratory system, which includes the nose, throat, windpipe (trachea) and lungs.

Asthma is one of the most common respiratory diseases in the world. Although there's no cure, developing technology makes it possible to treat asthma more effectively when routine treatment fails.

AnMed Health was the first in the Upstate to offer bronchial thermoplasty, which uses a small catheter to deliver controlled energy to the airways to reduce excessive smooth muscle, resulting in fewer asthma attacks.

Asthma is one of the most common respiratory diseases in the world.

To learn more about the bronchial thermoplasty, visit www.anmedhealth.org/breathe-easy

“I think the time we spend with patients is not just longer, but better quality,”

Dr. Melody Franks enjoys spending a little extra time with her patients because it gives her a chance to consider more than just acute illness.



Focused on wellness

Patient Centered Medical Home structures health care delivery around patient needs

IT TOOK MORE THAN RADIATION to beat Ann Alexander's cancer.

She wouldn't have had treatment when she did if a radiologist hadn't seen a lump, and that lump wouldn't have been seen without a mammogram, and the mammogram wouldn't have happened if not for a sinus infection. A sinus infection may have saved Ann Alexander's life.

But the sinus infection wouldn't necessarily have led to the mammogram if Dr. Melody Franks hadn't changed her approach to doctoring.

Under the traditional structure still in place in most American physician offices, Alexander would have been treated for the sinus infection and returned home until the next ailment came along.

At AnMed Health Lakeside Family Medicine, Dr. Franks, her partners and the practice staff earned designation as a Patient Centered Medical Home, or PCMH – a way of delivering primary care that structures a physician practice around the needs of the patient.

“We were reactive under the old system,” Dr. Franks said. “Patients came to us when something was wrong and we addressed it. Now, while they're in here, we're going to talk to them about staying well. We're going to discuss whether it's time for a colonoscopy or a mammogram or whatever is appropriate for each patient.”

That's how it happened for Alexander.

While she sought treatment for sinus pressure, a medical assistant looked at her records and decided it was time for a mammogram. Her life may have been saved by an alert member of the clinical team and her proactive role in keeping people well in a Patient Centered Medical Home.

To qualify for the designation, a practice must meet standards established by the National Committee for Quality Assurance. The core of NCQA's standards emphasize the physician-patient relationship and help organize and streamline practice improvements that lead to higher patient satisfaction and better health outcomes. It means everyone in the practice has a role to play in promoting patient wellness, and that when patients go to specialists for care, the results of those visits are reported back to the primary care physician. Ideally, that office will have complete records – and therefore a complete picture – of all of a patient's medical needs and treatments.

“For me, it's given me a chance to operate the way I always thought we should do it, but it's now much more team-based,” Dr. Franks said. “Everyone is working at the top of their license. Everyone is doing it and doing a better job.”

Under the old way, a patient enters the office and the doctor then discovers a cold. Under PCMH, before the patient even shows up, the staff has done its homework. They know what tests are complete and which are due. They know what specialists he's seeing, if any, what specialty diagnosis he has, and what the treatment is. The idea is that someone, somewhere, should have all medical information available about a person in order to get an overall picture of health and develop a strategy for

wellness. And that person, that place, is the primary physician and practice.

The result is a more accommodating office – they leave space on the calendar for patients to make same-day appointments – where physicians take a little more time to find out what's going on beyond the sinus infection. They're also much more likely now to call patients who weren't even planning a doctor visit. The staff reviews patient files and looks for patients who may be overdue for a colonoscopy, for example. In another case of the PCMH approach being effective, Dr. Franks has a patient who now is free of a colon cancer that never presented symptoms. He was screened only because of the staff's pro-active approach and was successfully treated for the cancer it found.

“I think the time we spend with patients is not just longer, but better quality,” Dr. Franks said. “I get to focus on doctor things instead of all of it. I think patients appreciate it. The patients would say we are spending more time with them. And I think we are keeping them out of the Emergency Department more.”

At AnMed Health Children's Health Center, they're sure of it. Since they implemented PCMH practices, which includes extended hours, the number of their patients who report to the Emergency Department for care has decreased 80 percent after hours and 69 percent during all hours. Operations Manager Darcey Ipock believes part of the reason is the staff's more proactive approach to preventive care and their patients' understanding that access is now more flexible.

“I think they know they don't have to go to the ER because chances are good that they can call the next day and get in,” she said. “We work to make access something that happens now, not something that happens later.”

Now, not later, is a way of delivering primary care around the needs of the patient.

Four AnMed Health practices are currently Level 3 Patient Centered Medical Homes. Level 3 is the highest level and the only level AnMed Health practices seek.

- AnMed Health Lakeside Family Medicine
- AnMed Health Anderson Family Medicine
- AnMed Health Children's Health Center
- AnMed Health Family Medicine Center / Residency Program

Three more practices have already implemented changes to earn PCMH status, but the application process is not yet complete:

- AnMed Health Centerville Family Medicine
- AnMed Health Wren Family Medicine
- AnMed Health Williamston Family Medicine

Only about 10 percent of the nation's primary care practices are recognized by NCQA as a PCMH.

Taking charge of life

Weight loss surgery turns health around for Nicole Cubbedge

NICOLE CUBBEDGE IS WORKING on an ever-evolving list. Roller coaster rides? Check. Throwing away the diabetes medicine? Check. Able to stand all day at work? Check. More than 125 pounds of weight lost? CHECK!

Nicole always battled weight. Diets and years came and went, and the weight was winning. By her early 20s, mobility was a challenge and she had diabetes and high blood pressure. Nicole knew her life was in danger.

After an aunt turned her own health around with bariatric surgery, Nicole investigated surgical options for herself. Her first successful weight loss journey began in August 2013, under the supervision of Dr. Adam Beall



Dr. Adam Beall

and his staff at Piedmont Surgical Associates. From the initial meeting, Nicole sensed she was in good hands. Dr. Beall is fellowship trained in bariatric surgery and is the medical director of AnMed Health Weight Loss Surgery. He has extensive training and experience in helping medically obese patients successfully undergo surgery and accomplish their weight loss objectives.

Dr. Beall believes that “obesity can be a crippling illness, a dagger to self-image, a source of depression, and a precursor to diabetes, cancers, arthritis and heart disease. It robs of the ability to do physical activity for work and leisure, and it steals years and experiences from life.”

Once a patient makes the decision to use surgery as a tool to get the extra weight off, the journey begins. It is both a physical and emotional process. Just a short time ago Nicole struggled just to fit into the desks at school. Now at age 24 and just a few months following surgery, she is the smallest she has been since 10th grade.

“It’s coming off. It’s coming off,” she says proudly. “When I look in the mirror, I definitely feel more beautiful and definitely happier about myself all the way around.”

Her blood pressure is under control, her

diabetes disappeared and she is slender enough to fit again in the roller coaster cars that she spent her childhood years riding in Orlando, Fla.

Heather Caldwell, a nurse and patient navigator, is there every step of the way for patients like Nicole.

“It’s incredible to me to hear them tell me at their initial appointment about their dreams to play with their grandchildren or go on rides at amusement parks and then see them achieve those goals when they reach a healthy weight,” she says.

Sleeve gastrectomy is done laparoscopically by making several small incisions in the abdominal area. The surgeon then removes most of the patient’s stomach and creates a smaller, banana shaped stomach. After the surgery, bariatric surgery patients must completely change their diet to accommodate the smaller stomach. Portion control, healthy foods and exercise are all incredibly important to successful surgery. Patients of the AnMed Health weight loss surgery program are informed about all of these changes before they make the decision to have the surgery. Dr. Beall even requires a psychological evaluation first. He wants to make sure that the patient understands everything about the surgery and is

prepared to adopt a new life style.

Insurance helps cover the cost in many cases. Medicare and Medicaid will pay for candidates who qualify and many other insurance companies that will pay for a part or all of the weight loss surgery

For Nicole, checking off things she is able to do now that her body is shrinking is one of the most wonderful feelings ever.

“It was very hard for me to get upstairs or just to go walking around the grocery store,” she says. “I had high blood pressure and diabetes. That really held me back from doing a lot of normal things that a young person would be able to do.”

Nicole is excited about what the future holds for her as a young woman of average weight. She visualizes herself running in her first 5K and crossing that finish line. She looks forward to being a mother one day -- the one running and playing with energetic children, not sitting on a park bench too tired and out of shape to participate.

As the weight drops off, the higher her self-confidence soars. She has no plans to pass up opportunities that life has in store for her.

Sleeve gastrectomy changed Nicole’s life and she encourages others not to be afraid to investigate surgical options, especially when life and health are on the line.

“Follow your heart,” she says. “If your heart is telling you to do it, then do it!”

More than one way to lose weight through surgery

A sleeve gastrectomy, also called a gastric sleeve, reduces the size of the stomach by about 90 percent. The surgeon removes a portion of the stomach and then staples the open edges together to form a banana-shaped sleeve or tube. This procedure is performed laparoscopically and cannot be reversed.

Sleeve gastrectomy is considered a good option for patients with a body mass index of 40 or more, where a gastric bypass might be too risky.

In addition to meeting weight requirements, candidates must have at least one co-morbid condition such as high blood pressure or diabetes.

Other types of weight loss surgery include:

Gastric bypass -- In this procedure, stapling creates a small stomach pouch. The remainder of the stomach is not removed, but is stapled shut and divided from the stomach pouch.

Adjustable gastric banding -- a band is placed around the upper part of the stomach to create a small stomach pouch. The larger part of the stomach is below the band, and the two parts are connected by a small outlet created by the band.

To learn more about AnMed Health weight-loss surgery options, visit www.anmedhealth.org/getready

“When I look in the mirror, I definitely feel more beautiful and definitely happier about myself all the way around.”



Once intimidated by the thought of fitting in her school desks, Nicole Cubbedge retook control of her life through bariatric surgery.

A conversation with Dr. Jesus A. Castillo

Dr. Castillo recently joined Dr. Darius Divina at AnMed Health Community Orthopaedics. A board certified orthopaedic surgeon, he is a graduate of the Nova Southeastern College of Osteopathic Medicine in Fort Lauderdale, Fla. He served as chief of orthopaedics at Naval Hospital Camp Lejeune.

Q: When did you decide to become a doctor?

A. Funny, I am not one of those people that says, "I always wanted to be a doctor since I was a kid." I was actually mulling around in community college when I just realized that I really liked sports medicine. I made the decision at that point to attend the University of South Florida to complete my bachelor's with plans of going on to medical school.

Q: Why did you choose osteopathy?

A. I am probably in the minority in that I knew going into medicine what it was that I wanted to do. I knew that I wanted to be an orthopaedic surgeon. With that in mind I was intrigued by the osteopathic approach to the whole body of the patient rather than just the symptom. There seemed to be a greater emphasis on the musculoskeletal system and the patient as a whole.

Q: What appealed to you about orthopaedics?

A. I think that if you ask most orthopaedic surgeons, there is some tie to athletics and sports in general as they grew up. I guess that in that aspect I am no different. In addition to being an athlete when I was younger, I was an athletic trainer while at USF and really enjoyed working with the athletes, assessing and managing their injuries and returning them to their sport. There is a great sense of accomplishment in being able to assess a patient's problem, addressing the problem and then watching them return to their preferred activities.

Q: What has been the most surprising thing you have learned as you study and practice medicine?

A. For me the most surprising aspect has been the ability of the human body to sustain injuries and heal and of people's ability to persevere through those injuries. To watch a 40-year-old Marine that lost both legs above the knee as well as part

of his hand during the war, walk into my office on his prosthetics with an upbeat go-get'em attitude, to get some forms signed off so that he can continue to work. It is really amazing what people can sustain and get through physically with the proper care and outlook.

Q: What was it like to serve the U.S. Navy in Kuwait?

A. I think that deploying is always tough regardless of the branch of service one is in. You are away from your family and although there is plenty of sand and sun, it is definitely not the Caribbean! It is HOT and it is dirty, but despite the hardships I had the opportunity to meet and work with some great people. As a medical team our goal was to support all of the personnel and smaller medical facilities in Kuwait, Iraq and the ships in the Gulf.

Q: What's one thing you have learned from sports medicine that the rest of us should know?

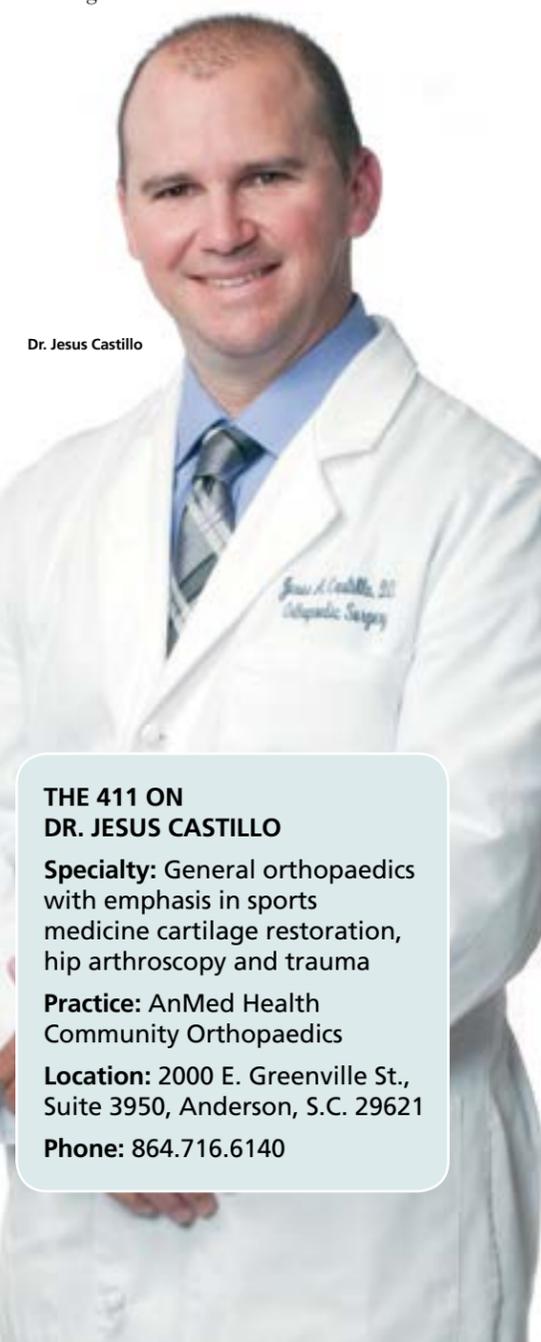
A. I think that it is important to know that a sports injury doesn't necessarily mean the end of your goals; more often it is just another obstacle that you have to get around. With the proper care and rehabilitation you can still accomplish what you set your mind to.

Q: What medical advice do you give most often?

A. Well this is actually more of a joke that I tell my patients than actual advice, but the thing that I probably say the most is—"I know that it says Jesus on my coat, but I am not actually him." Medical advice itself can vary depending on the patients and their problem. I think as an orthopaedic surgeon what I have to manage the most is expectations! Hence my little joke. Expectations are often the most difficult issues to manage. I take my time speaking with and trying to educate my patients about their respective injuries and what they are likely to expect.

Q: When you're not practicing medicine, what are we most likely to find you doing?

A. Something with my family — watching my son play lacrosse, playing racquetball with my wife and son, enjoying the outdoors or just sitting on the back deck relaxing.



Dr. Jesus Castillo

THE 411 ON DR. JESUS CASTILLO

Specialty: General orthopaedics with emphasis in sports medicine cartilage restoration, hip arthroscopy and trauma

Practice: AnMed Health Community Orthopaedics

Location: 2000 E. Greenville St., Suite 3950, Anderson, S.C. 29621

Phone: 864.716.6140



Dr. David Liebman Dr. Glen Quattlebaum Dr. Kenneth Jackson Suzanne Keogh Jocelyn Sikes

Summer move brings changes to Clemson

AnMed Health opened a new outpatient care site in July in the building formerly known as Clemson Health Center. AnMed Health-Clemson, located at 885 Tiger Boulevard/U.S. Highway 123, offers primary care, urgent care and onsite lab and radiology services.

AnMed Health Clemson Family Medicine, an established practice long associated with Dr. William Dukes and previously housed on College Avenue, moved to the new location July 1.

Dr. Kenneth Jackson joined Dr. Glen Quattlebaum and Jocelyn Sikes, FNP, at the practice. Dr. David Liebman and Suzanne Keogh, FNP, who previously practiced at Clemson Health Center, also joined AnMed Health Clemson Family Medicine. Meanwhile, Dr. Charles Edsall relocated from Clemson to AnMed Health Pendleton Family Medicine.

The CareConnect Advantage

In August AnMed Health opened two new urgent care practices known as CareConnect in Anderson and Clemson.

With extended hours, walk-in appointments, short waits, and onsite lab and X-ray, CareConnect offers convenience while also serving as a gateway to AnMed Health's full range of specialized services. Conditions appropriate for CareConnect include sprains, strains, broken bones, colds, flu and respiratory illness.

Patients of AnMed Health physician practices who go to CareConnect for urgent care or after hours have the added benefit of a shared health record. In order to provide seamless, high-quality care, all primary care, specialty care and urgent care physicians in the AnMed Health network have access to patients' electronic health records.

Dr. Mark Baker is medical director for CareConnect at 600 N. Fant Street in Anderson. Dr. Baker is certified by the American Board of Family Practice and experienced in family and emergency medicine.

Dr. Ed Jordan will care for urgent care patients at the Clemson location, located at 885 Tiger Boulevard. Dr. Jordan is a board-certified urgent care physician with more than 30 years experience.

CareConnect hours in Anderson are 8 a.m. to 8 p.m. weekdays and 8 a.m. to 5 p.m. on Saturdays and Sundays. The Clemson CareConnect is open 8 a.m. to 8 p.m. on weekdays; 10 a.m. to 6 p.m. on Saturdays; and 1 p.m. to 6 p.m. on Sundays. Both locations have onsite lab and radiology services. Most major insurance is accepted and special pricing is available for those without insurance.



Dr. Ed Jordan



Dr. Mark Baker

Sleep Center expands service to Elberton and Pickens

The AnMed Health Sleep Centers at Elbert Memorial Hospital and Cannon Memorial Hospital in Pickens are now accepting patients by physician referral.

The Sleep Center includes sleeping quarters outfitted for comfort – more like a hotel room than a hospital room. Patients who take part in a sleep study learn important information about how much they sleep at night and the quality of their breathing during sleep. The sleep study is conducted by technicians and the results are interpreted by AnMed Health board certified sleep specialists.

"A poor night's sleep is not just an inconvenience that causes sleepiness and fatigue the next day," says Jeff Cotton,

sleep clinic manager at AnMed Health Lung and Sleep Center. "Severe sleep problems can mean serious medical problems. People with moderate to severe sleep apnea face

Severe sleep problems can mean serious medical problems.

an increased risk of stroke, for example. There are also links to heart disease, obesity, diabetes, depression and cognitive decline. If anyone has said your breathing isn't normal while you sleep, it could be time to talk to your physician."

If you have not yet talked to a doctor about potential sleep problems, take an online assessment at www.anmedhealth.org/sleepquiz. Print the results to take to your physician visit.

Lifeline now called Freedom Link

AnMed Health Lifeline is now called Freedom Link. The 24-hour personal response service allows for safe, independent living. Freedom Link provides an added layer of protection, automatically placing a call for help when a fall is detected. The device also detects when users can't get up by themselves. Freedom Link offers two services: a medical alert system for 24-hour access to help, and a medication management system that helps patients take the right pill at the right time. For more information, call 855-798-9950.

Four AnMed Health nurses named among the state's best

Four AnMed Health nurses were recently recognized among the state's best. Cynthia Swaney, Brenda Randolph, Martha Stratton and Lynne McCarragher are among the recipients of the 2014 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. Palmetto Gold selects the top 100 nurses from those who have been nominated to honor during a formal awards ceremony.



Palmetto Gold nurses are (l-r) Cynthia Swaney, Brenda Randolph, Martha Stratton and Lynne McCarragher.

Surgeons serving Pickens patients

Surgeons from Piedmont Surgical Associates in May began serving patients in Pickens.

Within its population, Pickens is seeing a growing need for specialty services.

Piedmont Surgical Associates will provide

new technology, along with minimally invasive and advanced laparoscopic procedures.

The primary surgeon serving the Pickens community is Dr. Peter J. Bechtel, a graduate of Florida State University College of Medicine. He completed his residency at



Dr. Peter J. Bechtel

Lehigh Valley Hospital in Allentown, Pa. Dr. Bechtel and the seven other surgeons of Piedmont Surgical Associates (Drs. William S. Buice, James G. Foster III, Paul M. Frassinelli, T. Steve McElveen, David W. Strathern, James Porter Stokes III and Adam H. Beall) provide endoscopy, breast, laparoscopic, endocrine, thoracic and bariatric surgeries.



Candace G. Whitfield Dr. Jesus Castillo Dr. Suresh Khandekar

New providers

Candace G. Whitfield, DNP-APRN, BC, AG-ACNP, has joined AnMed Health Honea Path Family Medicine. She previously worked as an RN in the Medical Center Emergency Department and was a patient care technician prior to earning her BSN in 2009. She also has a doctorate of nursing practice, earned in 2013 from the University of South Carolina.

Dr. Castillo recently joined Dr. Darius Divina at AnMed Health Community Orthopaedics. A board certified orthopaedic surgeon, he is a graduate of the Nova Southeastern College of Osteopathic Medicine in Fort Lauderdale, Fla. He previously served as chief of orthopaedics at Naval Hospital Camp Lejeune in North Carolina.

Dr. Suresh Khandekar recently joined Dr. Shahzad Sheikh at AnMed Health Gastroenterology Specialists. Certified by the American boards of Gastroenterology and Internal Medicine, he completed a fellowship in internal medicine and residency in gastroenterology, both at the University of Utah in Salt Lake City, Utah.

Heart program 'Gets With The Guidelines'

AnMed Health has received the Get With The Guidelines®-Heart Failure Gold Quality Achievement Award for implementing specific quality improvement measures outlined by the American Heart Association/American College of Cardiology Foundation secondary prevention guidelines for heart failure patients.

Get With The Guidelines-Heart Failure is a quality improvement program that helps hospital teams provide the most up-to-date, research-based guidelines with the goal of speeding recovery and reducing hospital readmissions for heart failure patients.

AnMed Health earned the award by meeting specific quality achievement measures for the diagnosis and treatment of heart failure patients at a set level for a designated period.

These measures include proper use of medications and aggressive risk-reduction therapies such as cholesterol-lowering drugs, beta-blockers, ACE inhibitors, aspirin, diuretics and anticoagulants while patients are in the hospital. Before patients are discharged, they also receive education on managing their heart failure and overall health, as well as referrals for cardiac rehabilitation.



Teddy Bear Clinic

AnMed Health's annual Teddy Bear Clinic on May 17 attracted a record crowd when more than 400 children registered to take their stuffed companions through a series of booths designed to help the children overcome their medical fears.



Laura Tate learned what it means for a medical emergency to test financial limits.

Robert B. Claytor Chaplain's Fund

Fund provides financial relief for preschool teacher

HAVING DOUBLE PNEUMONIA certainly isn't any fun. And being hospitalized and unable to pay for it can add stress to an already stressful situation.

Preschool teacher Laura Tate, 30, experienced it first hand. Earlier this year she wasn't feeling well and went to her doctor. She was given some medication and told to go home and take it easy for a while.

"I'm a preschool teacher, so there's no such thing as taking it easy. I kept thinking I would just push through being sick."

Tate just kept getting worse. A few days after her doctor visit, her husband took her to the AnMed Health Emergency Department. She was hospitalized with double pneumonia.

"I couldn't even get enough air to move and I felt awful," she recalls. Once she was admitted to the hospital, she said everything was a blur.

"I slept most of the time."

One thing Tate was aware of through the entire process was how she would pay for everything. At the time, Tate didn't have any insurance.

She remembers telling nurses she wouldn't be able to pay for everything. Then she remembers being told a resource group would pay for her hospital stay through AMAP, the AnMed Medical Assistance Program. When she got well enough to be released, she faced even more costs for medications she would take at home.

"That's when I was told about the Chaplain's Fund and that everything had been taken care of."

The Robert B. Claytor Chaplain's Fund is a financial assistance fund offered by The AnMed Health Foundation. The fund purchases prescriptions or medical supplies for patients discharged from AnMed Health who cannot afford to pay for the items essential for their healing and recovery.

Service recovery coordinator Leigh Freeman manages the Chaplain's Fund, through the direction of AnMed Health General Counsel Tim Arellano. The Chaplain's Fund has been in existence for more than 25 years and began through generous donations from community members.

"Each year we assist approximately 600 patients with potentially life-saving medications and medical equipment," Freeman said. "This clearly is part of AnMed Health's mission to our community and exemplifies our 'we're-in-this-together' spirit."

When Tate was released from the hospital, she was sent home with antibiotics, steroids, nebulizer treatments and two kinds of inhalers.

"Just one of those inhalers would've cost me \$250 without insurance. I would've had to pay for everything out of pocket," she said.

The only thing Tate had to pay for was the oxygen she was on for about three weeks, a cost of less than \$200.

Tate said the Chaplain's Fund was a lifesaver that helped her get out of the hospital and heal.

"I wouldn't have been able to come home if the fund hadn't paid for the medicine I needed," she said. "I cannot thank the folks at AnMed Health enough for the great care I received."

Support the Robert B. Claytor Chaplain's Fund by donations through The AnMed Health Foundation. Learn more about how to support this program and others at www.anmedhealth.org/our-foundation or call the office at 864.512.3477.

"I wouldn't have been able to come home if the fund hadn't paid for the medicine I needed."



A new father gets a lesson from Jackie McCall on how to use a car seat safely.

Safe Kids strives to reduce dangers for area children

SUMMER MEANS FAMILY VACATIONS, picnics, pools and road trips. AnMed Health wants families to make sure that all proper precautions have been taken to ensure child safety.

Safe Kids Anderson County, an injury prevention effort led by AnMed Health, was launched in 1999 to create awareness and educate parents and caregivers on how to prevent the injuries that maim and kill children. Unintentional injury is the leading health risk facing Anderson County children.

Minnie Galloway is taking care of her three youngest grandchildren. She doesn't

hesitate to sing the praises of Jackie McCall, Safe Kids coordinator, and her direction of the Safe Kids Anderson County program.

"We educate families, provide safety devices to families in need and advocate for better laws to help keep children safe, healthy and out of the emergency room," McCall said.

"I was very impressed with the program," Galloway said. "There wasn't anything like this back when I was a young mother."

A retired fourth-grade teacher, Galloway first became familiar with the program when she was teaching. AnMed Health representatives would provide Safe Kids

programs at local schools. Then, in 2008, when Galloway's daughter Melissa was pregnant with her first child, she called AnMed Health to see if the program was still in operation.

"I was very pleased to find out they still had the program," Galloway said.

Galloway and her daughter attended a car seat safety seminar that included a lecture, an information video and hands-on training.

"I would forget how to hook up a car seat between grandchildren," Galloway said.

As Galloway's family expanded – she has five kids, nine grandchildren and one great-grandchild – she continued to see the value in the Safe Kids program.

"The folks at Safe Kids were so friendly and patient whenever I would call," Galloway said. "I recommend anyone with kids to get in touch with them to learn about safety."

"My mom always said 'If you're going to be riding in something, make sure you're strapped in,'" Galloway continued. "I shared that with my children and want them to share it with their children."

In addition to car seat safety, Safe Kids Anderson County provides injury prevention education and outreach programs in fire and burn prevention, bicycle safety, pedestrian safety, falls prevention, poisoning prevention and sports and water safety.

Support Safe Kids Anderson County by donations through The AnMed Health Foundation. Learn more about how to support this program and others at www.anmedhealth.org/our-foundation or call the office at 864.512.3477.



Kelly Smith of the Radiology Department shares a moment with Dr. Kyle Bryans at the Foundation's annual community luncheon.

Why I support the drive for a mobile diagnostic unit

Every day, cancer affects someone in the Anderson community. This means not only patients, but their families and friends as well. One of the reasons that we have come so far in cancer diagnosis, treatment, and therapy success is that we have many ways to screen for certain cancers, and to diagnose them earlier.

For example, in South Carolina, for every 100,000 women, 24 will die of breast cancer in one year. Only 5 states have higher breast mortality rates. In Anderson County alone, 274 women were diagnosed in 2012, and eight died from the disease. Even though we are making great strides, we could still decrease that number even further.

How is this possible? We need to get information, and screening mammograms out to more women in the community. Because this type of cancer can often be silent, it should be screened yearly for every woman over 40. This way we can find cancers earlier, and have a better chance for survival, and for a better quality of life. But often times, this is inconvenient or difficult for many in the Anderson community. For so many, the mindset is, "If they don't feel sick, why take the trouble to go to a doctor?"

So, The AnMed Health Foundation has come up with an idea, already used successfully in other cities across the country. A mobile diagnostic unit, including screening mammography, which can travel directly to factories, neighborhoods, churches and work places, where some reluctant individuals would be more likely to take part.

But we need community help and support for this project. Please support The AnMed Health Foundation drive to purchase a quality mobile diagnostic unit so that this will be possible. Show the women in your life that you want better health for them!

Dr. Kyle Bryans, diagnostic radiologist

Zumbathon puts more than \$2K toward purchase of Mobile Diagnostic Unit

AnMed Health found a way to raise money for a good cause and provide a fun, calorie-burning event at the same time.

About 50 people turned out for the AnMed Health Zumbathon, an extended version of a high-energy dance workout, and for about two hours participants danced the Zumba as well as a line dance called the Wobble, followed by a cool down.

Entry fees, along with prize drawings, helped AnMed Health raise \$2,125.15 for the Mobile Diagnostic Unit.

Several dozen local businesses provided goods and services for door prizes and participant gift items.

"I was super excited about the Zumbathon," said Tara Ponder, AnMed Health wellness supervisor. "I have a very strong passion for wellness and fitness and just knowing that AnMed Health will be able to purchase a Mobile Diagnostic Unit that will be able to take mammography and other screenings to people who can't or won't go to the doctor is just such a huge blessing for the community."

The AnMed Health Foundation launched a capital campaign late last year to raise \$1.2 million for a mobile diagnostic unit that will provide mammograms and other diagnostic services in the community.

BOARD PROFILE

Meet Tom McDonald

Tom McDonald is a Certified Financial Planner licensed in securities and insurance. He is president of McDonald, Cox and Klugh Inc. of Anderson.



Q: Why did you get involved in supporting The AnMed Health Foundation?

A: A friend asked me to serve on the sponsorship committee for the Camellia Ball a few years ago. Shortly after that I went through the Ambassadors program. Like a lot of people I didn't fully understand the scope of what the Foundation means to AnMed Health and our community but I quickly realized what great things the Foundation was doing and was honored when I was asked to serve on the board.

Q: What does it mean to you as a family man to have a good health system right here at home?

A: It is so important and comforting to know that we have such a high level of health care here. Both my daughters were born at AnMed Health and over the years AnMed Health has played a big role in keeping my family healthy. The economic impact of AnMed Health is huge for the community and anyone in business in our area benefits by having a state-of-the-art health care system here.

Q: How does your work as a financial planner influence your civic involvement?

A: We work with a lot of non-profits and donors on financial planning issues. It has made me aware of all the good things that happen through philanthropy in the community. It's pretty exciting to help a donor and a charity develop strategies to leave a legacy, maximize a gift and save on income taxes at the same time.

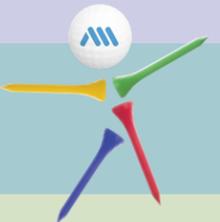
Q: Which of the Foundation's funds is closest to your heart? Why?

A: Well I've chaired the Camellia Ball sponsorship committee the last two years so Pediatric Therapy Works is very special to me but also I'm really fired up about the Mobile Mammography Unit project.

Q: Why would you recommend that your neighbors and friends support The AnMed Health Foundation?

A: There are so many good reasons but I tell people that I can't imagine what our community would look like without all the great things that AnMed Health brings to it. Things are changing a lot in health care and for a lot of the programs to continue and grow, philanthropy and the Foundation are going to have to play a larger role.

Save the Date: The annual Kids Classic golf tournament is scheduled for Oct. 13 at the Cliffs at Keowee Vineyard.



About The AnMed Health Foundation: Established as a 501(c)(3) organization in 1992, the AnMed Health Foundation develops fundraising opportunities in support of healthcare programs and services at AnMed Health. Areas of support are Camp Asthmania, Cancer Care Assistance Fund, Chaplain's Fund, Peggy G. Deane Nursing Professional Development Fund, DoLink, Employee Financial Assistance Fund, Freedom Link, Mobile Diagnostic Unit, Pediatric Therapy Works and Safe Kids.

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Women's and Children's Hospital designated Baby-Friendly

ANMED HEALTH Women's and Children's Hospital became the Upstate's first Baby-Friendly Hospital this summer, designated by Baby-Friendly USA, a national version of an initiative by the World Health Organization (WHO) and UNICEF – the United Nations Children's Fund – that recognizes hospitals and birthing centers that offer an optimal level of care for breastfeeding mothers and their babies.

The Baby-Friendly Hospital initiative was created to foster maternity care practices that promote and support breastfeeding. It endorses "Ten Steps to Successful Breastfeeding," a bundle of science-based practices established as a global criteria to improving breastfeeding rates. These criteria are endorsed by the American Academy of Pediatrics in addition to WHO and UNICEF.

Earning this Gold Standard designation is the culmination of an effort that started more than a year ago when the Women's and Children's Hospital took on the Baby-Friendly Hospital Initiative, offering a higher level of attention to infant feeding and mother/baby bonding. The goal is to give all mothers the information, confidence and skills necessary to successfully initiate and continue breastfeeding their babies or, when necessary, to use formula safely.

AnMed Health Women's and Children's Hospital went through a rigorous preparation and review process to become only the fifth South Carolina hospital to earn the Baby-Friendly designation.

"We're excited to see the hard work



of many team members pay off with this designation," said Hope Campbell, director of Women's and Children's Services for AnMed Health. "It feels like a victory for us, but the real winners are the infants who benefit from a heightened awareness by their parents and our staff. Breast-fed babies are healthier babies and we're glad to adopt practices that will encourage new mothers to breast feed."

With the Ten Step process, the hospital gives moms the support and confidence they need to commit to breastfeeding. The practices include informing pregnant women about the benefits of breastfeeding and helping them initiate and maintain breast feeding. The practices also

encourage immediate skin-to-skin contact between mother and baby and rooming-in accommodations so the infant is never separated from the mom while still in the hospital. The hospital also provides support equally to those moms who chose to bottle feed their newborns.

One of the first steps in the journey to encourage breastfeeding was to discontinue the distribution of formula samples and diaper bags provided free by formula companies. While the Women's and Children's Hospital no longer distributes formula samples, the hospital does provide formula to infants for feeding when it is requested by the parent or guardian.