

# Hoke

# Heartbeat



*The state of healthcare in Hoke County*



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Now...**

**(Continues on page 3)**

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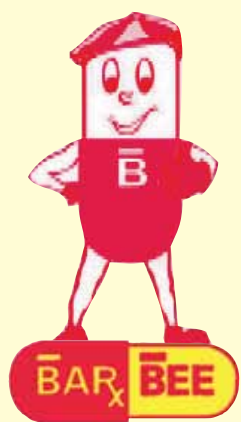


The Cape Fear Valley hospital under construction.



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## Now...

*(Continued from cover)*

... Hoke County is just a few months away from having two local hospitals open to serve patients, and the healthcare expansion shows no signs of stopping any time soon.

For most of Hoke County's 100-plus-year history, doctor choice was limited and access to life-saving and specialty healthcare services was at least a half-hour drive away. In 2014, that's no longer the case, thanks to the efforts of local doctors, elected officials, state and federal grant programs and area healthcare companies. It's also thanks to the military families that have expanded the local population to more than 50,000 people, making Hoke one of the fastest-growing counties in the country and attracting economic development.

FirstHealth of the Carolinas Moore Regional Hospital – Hoke Campus recently celebrated its first anniversary, and Cape Fear Valley Health Pavilion Hoke's inpatient facility is in the final preparation stages and will open in February 2015. Both fill in important pieces of the puzzle to complete the picture of good health.

There's more to it than the hospital facilities. Along with the safety net of local emergency care, Cape Fear Valley, FirstHealth and many other providers have stepped up to fill the growing outpatient needs of children

and adults. Every year, more primary care doctors, pediatricians and specialists come to Hoke County.

In the Hoke Heartbeat, we profile just a few of the many healthcare providers offering their services in Hoke County. Some have been here for generations, while others are newcomers now making their mark in the community. There are dozens more agencies and offices in Hoke that are providing preventative care and treatment for everyone from newborn babies to elderly patients.

While no one can say exactly what the future holds for healthcare in Hoke, one thing is certain: residents' access to care has improved and continues improving.

You can take the doctor's word for it.

*"When I came here were three family practice doctors and that was it, so the main thing is there's lots of primary care doctors here now; plenty of places to get evaluated and checked."* – Raeford Eye Clinic optometrist Dr. Tom Inman

*"The biggest need that we saw in Hoke County is, number one, there wasn't a hospital, but number two, there wasn't any place that OB patients could deliver here, so patients would drive past Hoke to get to (See NOW, page 5)*



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DELORES JOHNSON, M.D.  
OB/GYN

Dr. Delores Johnson received her medical degree from Howard University School of Medicine in Washington, D.C. She completed her residency in obstetrics and gynecology at Cook County Hospital in Chicago, Ill. Dr. Johnson is board certified by the American Board of Obstetrics and Gynecology. Her special interests include teen pregnancy and adolescent healthcare.



KIMBERLY MCGILL, M.D.  
OB/GYN

Dr. Kimberly McGill received her medical degree from Case Western Reserve University School of Medicine in Cleveland, Ohio. She completed a residency in obstetrics and gynecology at Lehigh Valley Hospital in Allentown, Penn. Dr. McGill is board certified by the American Board of Obstetrics and Gynecology. Her special interests include adolescents, contraception and pre-cancer screening.



ADA VENTURA-BRASWELL, M.D.  
OB/GYN

Dr. Ada Ventura-Braswell received her medical degree from the University of Miami School of Medicine in Miami, Fla. She completed a residency in obstetrics and gynecology at Brooke Army Medical Center in San Antonio, Texas. Dr. Ventura-Braswell is board certified by the American Board of Obstetrics and Gynecology. Her special interests include laparoscopy, urogynecology, pelvic surgery, high-risk obstetrics, pediatric and adolescent gynecology.

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# First surgery in Hoke was eye operation

The first surgery in a hospital operating room in Hoke County was performed this year by a surgeon with Carolina Eye Associates, one of the biggest ophthalmology practices in the southeastern United States.

Working in partnership with FirstHealth of the Carolinas, Carolina Eye Associates is able to do routine eye surgeries at the

local hospital so Hoke eye patients don't have far to go to get back home and start recovering.

"We've been doing surgery at the Hoke hospital for quite some months now, and we were the first surgeons to do surgery there," Carolina Eye President Dr. Gregory Mincey said.

Carolina Eye provides a wide variety of eye care services, from simple exams to surgery and maintenance for eye diseases. The unique thing about Carolina Eye Associates is that the practice has multiple specialists in many different disciplines related to eye health, Mincey said.

The office frequently handles everything from retina problems, eye complications from diabetes, glaucoma and cataracts to corneal transplants and even plastic surgery involving the eye.

"It's really a unique environment because we have all the subspecialties in ophthalmology here," he said.

If an optometrist in Hoke County catches signs of a problem with a patient's eye health that goes beyond the scope of general optometry care, they can refer the patient to Carolina Eye for a closer examination and treatment of whatever the



Dr. Gregory Mincey, president of Carolina Eye Associates, said routine eye surgery was the first operation performed in a Hoke County hospital.

## Now...

(Continued from page 3)

Laurinburg or Lumberton or Southern Pines or they had to go to Fayetteville. So we want to be able to offer patients here in the community that are close to that, this is closer to them." – Cape Fear Valley (Health Pavilion Hoke) OB/GYN Dr. Ada Ventura-Braswell

"The primary benefit is to the patient. We can do their surgery closer to home. It means less time away from family and work. It's just more convenient. (FirstHealth of the Carolinas Moore Regional Hospital – Hoke Campus) is an excellent facility, we can do just as good a job there as we can anywhere." – Carolina Eye Associates President Dr. Gregory Mincey

"It's exploded, which is good. It's great in the fact that all of our friends and families in Raeford and Hoke County can get health-

care here. They don't have to go someplace else. They can get chiropractic care, they can get medical care here, they can now get hospital and emergency care here and they don't have to wait, which is important because a lot of times, waiting causes problems. It makes things worse. Sometimes the 'worse' could be fatal." – Family Chiropractic chiropractor Dr. Tony Santangelo

"As they add more functions to either hospital, it makes it just awesome, because if we have to send someone to the emergency room, then we have somewhere we can send them here and don't have to drive 30 minutes. That's crucial when you've got somebody we need care for right away, so it has made a great difference. I'm glad to see Hoke County growing." – Davita Dialysis registered nurse Sharon Bostic

problem might be, even if it means surgery. Carolina Eye doesn't have an office in Hoke County, but many of their patients live in Hoke, Mincey said.

The surgeries that the practice is offering at the FirstHealth of the Carolinas Moore Regional Hospital – Hoke campus address the most common eye problems requiring surgery.

"We're going to offer primarily what's called anterior segment surgery, the bulk (See EYE SURGERY, page 13)

## Mark Thompson, DDS, PA

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Dr. Sarah Locklear Brewington and the other pediatrician staff at Sandhills Pediatrics have moved into their new office space in the former Jordan Clinic.

## Asthma tops list of chronic illnesses pediatric practice sees

The office where the late Dr. Riley Jordan had his family practice has been granted a new lease on life, though people who grew up in Raeford as one of Jordan's patients might not recognize the place if they take their children or grandchildren in to the newly relocated Sandhills Pediatrics for a checkup.

Dark blue paint covers the walls, and children's colorful artwork decorates the hallways. A new reception area features toys for little ones, and the exam rooms are big enough that even the largest broods of youngsters can be seen by a pediatrician all at the same time.

The former Jordan Clinic is now home to the Raeford office of Sandhills Pediatrics, a practice that moved into Hoke County in 2011 and has continued to grow ever since. Sandhills Pediatrics takes care of over 17,000 children at its locations in Raeford, Seven Lakes and Southern Pines.

As Hoke County's population continues to grow, so do the families moving into the area. With more children being born all the time, pediatric offices have stepped up their game to address common childhood health problems.

"The more common, chronic diseases would be asthma, number one," Sandhills Pediatrics pediatrician Dr. Sarah Locklear Brewington said. "ADHD is another chronic disease that we treat. Then the majority of the sick children, they're acute, so colds and infections and strep."

Childhood obesity is also high in the Hoke County community and another of the chronic issues that the clinic focuses on addressing, Brewington said.

Besides handling chronic issues and acute illnesses, the staff members at Sandhills Pediatrics also see children with

injuries – some that can be treated in the office and some that cannot – and premature babies who struggle with growth and developmental problems. Sports physicals, well-child exams and similar checkups are also services the clinic offers. The practice also has a pediatric psychiatrist on staff that can help with attention deficit disorders and behavioral problems.

One of the doctors at the Raeford practice is also a specialist in educating parents about vaccine safety. Medical professionals around the country are reporting a rise in the number of vaccine-preventable illnesses. Pediatrician offices in particular are working to encourage parents to vaccinate their children.

"Vaccinations are probably one of the most important things that we do, that we stress," pediatric nurse practitioner Elizabeth Hodgins said.

"We believe in vaccines and their safety and effectiveness," Brewington added.

The Sandhills Pediatrics staff sees children from birth to age 22, as long as the young adult is still in school. In a typical day Sandhills Pediatrics sees about 50 patients at the Raeford location, Brewington said. The practice has been in Hoke County since 2011 and moved into its current space earlier this year after completely renovating the Jordan Clinic.

Moving into Raeford made a lot of sense because the practice's other two locations were seeing a lot of patients from Hoke County. Now those families don't have to drive a long way to get their child's runny nose checked out.

"Now people have lots of choices where they can go and we always had a big patient population from Hoke County before we were here, so we felt coming here we're

coming to the patients instead of them having to come to us," Brewington said. "If that's helpful to them, then that's part of what we feel like we provide by being here."

### Lumbee children

Native American children face challenges that can be different from those of children of other races. As a member of the

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# Asthma

Lumbee Tribe who grew up in Pembroke, Brewington has a unique insight into caring for Native American kids.

"There are some diseases that are more specific to Native Americans or more common in Native Americans," she said.

Besides serving as lead doctor of the Raeford location of Sandhills Pediatrics, Brewington has a special interest in adolescent medicine and addressing the health disparities that Native American children face.

Vaccine-preventable diseases are more common in Native American children, the doctor said. Native American children often have strong family histories of diabetes, high blood pressure and high cholesterol among other health problems. Most are issues that don't start causing problems until adulthood, but "some start earlier," Brewington said.

Coming from Robeson County and being a member of the Lumbee Tribe herself gives her a unique view into the challenges and health issues that can affect a child's life, either in youth or later down the road.

"The community I'm from in Robeson County, I come from a predominantly Native American community, that's just part of my upbringing. In my community, most people who work in that community are from that community because you have more of an understanding of where people

are coming from and what needs they may have that may be different from other peoples and populations. So I feel my work in Hoke County is still getting to provide that service for those kids," Brewington said.

It's not just issues like diabetes and high blood pressure, which can also affect other populations, that can strike young Native Americans. Some health problems are specific to Native Americans, and some are even specific to members of the Lumbee Tribe.

"Some genetic diseases are more common especially in the Lumbee population," Brewington said. "One, for example, is Lumbee myopathy. It's a neuromuscular disease that's specific to our population."

## Hometown care

What's it like being a pediatrician in Hoke County? Never a dull moment, Sandhills Pediatrics staff reported.

"It's fun, we enjoy it. It's always exciting," Brewington said. "...I think we feel like we make a difference and we hope we do a good job and take good care of people."

Many of the staff members are from Hoke County, according to Hodgin, who is a Raeford local herself.

"We're all from this area so it's good to work in the community that you live in or have lived in and give back," she said.



Tom and Kim Howell and their staff provide hometown service at the oldest pharmacy in Hoke County.

## Hoke has grown since 1947, oldest pharmacy with it



Tom Howell is a second-generation pharmacist who grew up working the soda fountain at the former Howell Drug location on Main Street.

Hoke County's oldest pharmacy has undergone some changes during its nearly 70-year history, but has tried to keep its hometown feel.

Tom Howell's parents came

to Raeford in 1947 and opened their storefront on Main Street. The drug store passed down to their son, who made the tough decision to move shop in 2000. Now the pharmacy is based out of the FirstHealth center on Teal Drive.

"We hated to leave downtown, we'd been there for over 50 years, but it was a good move for us and it's worked out well," Howell said.

Howell Drug's downtown lunch counter stayed open until 2013, when the famous chicken salad sandwiches and orangeades departed for good. Howell worked at the soda fountain when he was growing up, back when a drugstore could be a busy gathering place for teenagers.

"That's where all the young kids, that's where we started, in the fountain. I did that through high school actually," Howell said. "We actually had booths all down one wall so after school that's where all the kids showed up, all the drugstore cowboys."

Howell decided early to go to pharmacy school and then it was a "natural progression" to return home to work with the family business.

Healthcare in Hoke County has changed just through the fact of the big population boom, not only during the last decade but before then too, but the phar-

macist and business owner said he and his staff have worked to keep the small-town atmosphere and service available for customers.

"When I graduated from pharmacy school in 1976, came back to work here, there were probably 15,000, 16,000 people here ... just the fact that there are more people, obviously there are more opportunities to provide services, which is what an independent retail pharmacy does," he said. "Provide a source, a place where people can have their prescriptions filled and be treated like friends, because we are a part of the community and have been for a long time. We like to pride ourselves on friendly hometown service, and I think that's what makes a difference for us."

Becoming a part of the medical complex at the FirstHealth facility in Raeford has been a good move for the company, Howell said.

"It's worked out well for us, as well as the patients, because being in the same building, they can leave their healthcare provider and not have to leave the building to get medication," he said.

Technology has increased the level of convenience for customers with digital prescriptions sent electronically and digital medical records. Howell decided to try out another convenience for customers: a drive-through window.

"I didn't know how it was going to go, but it's really busy. It's a convenience for our clients and I think it's been a big benefit for us too, being able to provide a quick service for folks so they don't have to get out of their car, especially if the weather's bad," he said.

And as the county has grown, so has Howell Drug.

"I think a lot of this has to do with the fact the county has grown so much and there's obviously a lot more people. We probably do four times the business we did when we were downtown and moved out here about 14 years ago. There's no question that that made a big difference for us," Howell said.

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# With Cape Fear Hospital comes baby deliveries

Babies have been delivered in Hoke County in homes, ambulances and the backseats of cars, but starting next year, expectant mothers will be able to give birth in a local hospital for the first time in the county's history.

Cape Fear Valley's Hoke hospital campus is on track to open around the first of February 2015, and is bringing with it a wide variety of services including 41 acute care beds, an emergency room, two operating rooms and much more.

The hospital will also have Hoke's first maternity ward with four labor and delivery suites, 16 postpartum beds and an operating room set aside for performing caesarean sections. It's not intended for high-risk pregnancies or pre-term deliveries but for typical patients without additional risk factors, Dr. Ada Ventura-Braswell said.

"The maternity services we're going to be offering there are for low-risk obstetrics," she said. "...The big thing about the difference between this maternity service and, for example, the one at Cape Fear is Cape Fear has a NICU unit, so they do very high-risk pregnancies, they can deliver pre-term babies, they do twins. The nursery can go down to 24 weeks. So at our hospital here, it's going to be for full-term, normal deliveries, so 36 weeks and above."

Braswell is one of the doctors who will work with patients once the hospital opens. Right now, she and Dr. Kimberly McGill and Dr. Delores Johnson see OB/GYN outpatients at the Cape Fear Valley Health Pavilion Hoke offices.

They've been very busy over the last year and a half, seeing upwards of 60 patients a day for everything from routine gynecological screening tests to prenatal care. When the hospital opens, they'll also be able to help newborns come into the world, and expect that those numbers are only going to go up. In fact, it could prove to be one of the most popular services the hospital will offer, Braswell said.

"It's probably going to do a large portion of the patient care in the hospital," she said.

## Midwives and birthing balls

Hoke's maternity suite is going to be a bit different than what bigger hospitals offer. By design, the labor and delivery floor will be able to offer a more relaxed experience.

"It's a smaller unit obviously. It's going to be a little bit more family-oriented over here where it's less like this big hospital maternity unit like we have at Cape Fear," Braswell said.

To help make that happen, Cape Fear Valley will offer services and care provided



OB/GYN physicians Dr. Kimberly McGill and Dr. Ada Braswell will be part of the maternity services offered at Cape Fear Valley's Hoke hospital.

by several full-time midwives. Midwives are certified and trained to handle much of the prenatal care and help pregnant women through their deliveries. They aren't doctors and can't provide the level of care doctors can offer during a pregnancy and delivery,

but for patients with the type of low-risk pregnancies that Cape Fear will accept at the Hoke hospital, seeing a midwife can provide an alternative to other types of deliveries.

"(The midwives) are going to be helping here in the clinic and helping to deliver the

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***from the NC Turkey Festival Board of Directors***



# Cape Fear

babies. So we wanted to offer patients an alternative to the very high-tech, invasive deliveries over at Cape Fear and have at least an option of being able to have less (invasive deliveries)," Braswell said.

The hospital does have full-time doctors and surgeons on staff who can handle the more involved parts of care that midwives aren't trained for, and if an expectant mother needs more care than a midwife can offer, those doctors will stand ready to step in at any time. What hospital officials are trying to do is make the Hoke maternity ward the best of both worlds: providing expert medical care while offering the more relaxed option of having a midwife handle many of the patient's needs.

It's a type of balancing act meant to offer more options, Braswell said.

"We're going to have full capability to do caesarean sections. We have four certified OB/GYNs on staff, so it's not like a birthing center where you don't have doctors and you just have midwives. So it's really a nice, I think, collaboration between the midwifery model of taking care of patients and the more doctor, medical model. We're trying to bring it together and find a middle ground so to speak," she said.

Many expectant mothers going into labor like to use birthing balls or other non-invasive techniques to deal with the pain of giving birth. Those aren't typically something used in the more "medical"

approach to a delivery, but as long as there are no problems with a low-risk pregnancy and the delivery remains routine, the local midwives will be able to offer those approaches to patients at Cape Fear's local hospital.

"We do want to offer over here more alternatives if the patient wants to, for example, labor in the bathtub, we do have bathtubs in every room over here which is different from Cape Fear," Braswell said. "We're not going to deliver in the bathtub, but at least to labor in there, that helps with some of the pain, the back pain and it's something that a lot of hospitals are offering."

The hospital looked at some other health systems' services to help decide what it could offer Hoke mothers. Mission Hospital in Asheville is one such hospital model that's working to have a more modern labor and delivery experience for families.

"We got a lot of ideas from them and from other hospitals in the state that do offer alternatives, that do have a big midwifery service," Braswell said.

## A long time coming

When Cape Fear Valley's Hoke hospital was still in the planning stages, officials considered what services were most needed in the county while planning what maternity services to offer at the new hospital.

"The biggest need that we saw in Hoke County is, number one, there wasn't a hospital, but number two, there wasn't any place that OB patients could deliver here, so patients would drive past Hoke to get to Laurinburg or Lumberton or Southern Pines or they had to go to Fayetteville. So we want to be able to offer patients here in the community that are close to that, this is closer to them," Braswell said.

Hoke's hospital is not meant to be a "mini Cape Fear" but intended to cater to patients who don't require specialty care for high-risk cases. That's what the majority of expectant mothers in Hoke need.

"Just with that, we think that's going to help the area obviously with the types of basic services that you need. We're not going to be a mini-Cape Fear, that's not what we're going to be, because if we need all the advanced things of Cape Fear, they need to go to Cape Fear, and it's only 10 miles down the road. But we want to be able to offer some of the stuff that could go to a smaller hospital, that could be done here," Braswell said.

The tradeoff of going to a smaller hospital for care of a routine pregnancy and delivery means that patients have access to a more personalized experience.

"It's definitely a more one-on-one experience, getting to know your doctor when you come here for your prenatal care, being

able to be delivered by the same doctors and midwives that they see the whole time," she said.

While the Hoke hospital is only accepting routine pregnancy patients, the main Cape Fear hospital in Fayetteville can handle the trickier pregnancies and has seen everything from a pregnant woman on dialysis to a forty-something expectant mother who was pregnant at the same time as her 18-year-old daughter.

While it's not meant for higher-risk pregnancies, the local hospital staff will have all the tools they need for stabilizing any patient who comes in with an OB emergency situation. The doctors and nurses can provide emergency care for a mother and newborn if need be, but after being stabilized, the patient would be transferred to a bigger hospital with more specialty services such as a NICU.

Besides having access to a C-section operating room on the labor and delivery floor, the maternity department will also have access to the hospital's two main operating rooms in case of emergencies that have to be dealt with immediately, in situations where there may not be time to transfer a patient to another hospital.

The outpatient Health Pavilion Hoke is also capable of providing routine gynecological care for patients and will continue providing those services after the hospital opens.



Work on the Cape Fear Valley Health Pavilion Hoke hospital is nearly complete and workers have started moving in furniture ahead of the February 2015 opening day.





FirstHealth of the Carolinas hyperbaric chamber services director and nurse Deborah Beasley helps patient Cathy Long prepare for a treatment in the hyperbaric chamber at the FirstHealth Hoke campus.

# FirstHealth brings hyperbaric treatment to its campus

## It even makes you look younger

Cathy Long thought a simple operation on her foot would bring an end to her troubles with hammer toe, but when something went wrong afterward and infection set in, instead of an easy recovery, she was faced with the possibility of losing part of her foot.

"I had surgery. It was supposed to be routine surgery for hammer toe, put a couple of pins in there, but a couple of days later I started developing gangrene," she said.

Her doctor prescribed antibiotics, but also recommended a different kind of treatment: hyperbaric medicine.

Several days a week, Long takes off her jewelry, dons a medical gown and lies back on a gurney as a technician slides her into a torpedo tube-like cylindrical chamber and seals it up. The nurse cranks up the air pressure until there's so much oxygen in the small, enclosed space, germs don't have a chance of survival. The special environment kills off the bacteria causing the problems in Long's infected foot and prevents any new infections from forming too.

After just a few treatments in the hyperbaric chamber at FirstHealth of the Carolinas Moore Regional Hospital – Hoke campus, Long said she could already tell a big difference.

"I think the antibiotics and this have speeded it up. I have real poor circulation ... and I think it's helping," she said.

When her doctor checked the wound, "she could see the new growth," Long added.

Long has become one of the scores of patients who have been treated at the FirstHealth of the Carolinas Moore Regional Hospital – Hoke campus wound center's hyperbaric chamber. The wound center works to help patients heal from a wide variety of health issues that threaten limb and even life.

The history of hyperbaric medicine goes back over 300 years, according to FirstHealth wound care/hyperbaric chamber program operator Nelson Harte. In the 1930s, the Navy SEALs began using hyperbaric treatment for decompression sickness. In the 1940s, the Air Force started using it for treating pilots with altitude sickness.

"In the 1960s they said, you know, we're starting to see some health benefits to hyperbaric medicine, and they started testing," Harte said. It wasn't long before hyperbaric medicine went mainstream in civilian hospitals.

During hyperbaric treatment, a patient is placed inside a cylindrical chamber,

which is then sealed tight and pressurized in much the same way an airplane cabin is pressurized prior to takeoff. Hyperbaric patients spend a few hours during each treatment resting under the pressure of two atmospheres instead of just one. Just walking around at sea level, people experience a pressure of about 14 pounds pressing down on them from the atmosphere, Harte explained, and in a hyperbaric chamber, the pressure goes up to about 28 or 30 pounds.

The simple change is not harmful to humans but proves deadly to germs.

"In that environment there's no bacteria that survives, there's no viruses that survive," Harte said. "Anything bad hates oxygen, everything good loves oxygen, so any virus, any bacteria – that kills it."

Hyperbaric treatment is painless and non-invasive. The patient might notice a slight popping or pressure in the ears but otherwise don't experience any discomfort, Harte said. Most courses of hyperbaric treatment require one to two months of sessions for the greatest benefit.

Besides halting infection in its tracks, the treatment can also speed up the healing process in general, Harte said.

"It actually helps grow capillaries back through the wounds," he said.

Hyperbaric chamber services director

and nurse Deborah Beasley said the service treats about 13 patients a day, on average, in addition to the entire wound center seeing many, many more who don't require hyperbaric care.

During her years working in hyperbaric medicine, Beasley said she's seen some remarkable turnarounds.

"I've seen wonderful results," she said.

Long's case is a good example, Beasley said. At first, things weren't looking too good with the wound. Now, after just five treatments – half the predicted 10 sessions it usually takes for patients to begin seeing noticeable results – Long appears to be out of danger.

"It looks like we're going to save her toe," Beasley said.

### Old technology made new

Although hyperbaric medicine has been around for a long time, the equipment used is still evolving and improving. The patients at FirstHealth's Hoke hospital campus, which opened just last year and features top-of-the-line medical equipment, have the extra benefit of having more space in the two available hyperbaric chambers. The Hoke hospital's chambers are larger than some others and can handle taller, wider patients. They're equipped with phones so patients





FirstHealth of the Carolinas - Hoke campus wound care and hyperbaric chamber program operator Nelson Harte waits while nurse Deborah Beasley assists a patient inside a hyperbaric chamber.

## FirstHealth

and nurses can communicate, and each chamber is even topped with a flat-screen television so patients don't get bored during their two-hour sojourn in the pressurized environment.

Some patients come in with fears about claustrophobia but are able to push through the fear and endure the treatment – especially when the other option is amputation.

Long said having the television up above is a good distraction, and joked with her nurse about bringing certain movies from home to watch during her treatments.

"First time was pretty scary. I'm okay now, with the TV, and I know they'll let me out if I panic," she said.

The only real risk involved in hyperbaric medicine is the possibility of sparking a fire, which is the case in any situation where oxygen is being used, Harte said. The hospital takes every possible precaution, including forbidding patients from wearing any metal – even eyeglasses – into the chamber. Jewelry, watches and cell phones are banned for patients' protection against any possibility of creating a spark. That's why patients have to change clothing before sliding into the cylinders.

Otherwise, not only is hyperbaric medicine safe, it's possibly useful for a much wider range of medical issues than the FDA currently recommends, Harte said.

### Who benefits?

Currently, hyperbaric treatment is prescribed for the enhancement of healing in hypoxic wounds, particularly for people with diabetes who have wounds on their lower legs, but also for people suffering from critical limb ischemia and arterial ulcers.

A large number of patients treated at the FirstHealth – Hoke campus are suffering from wounds on their feet due to diabetes. Diabetes patients with wounds are at an especially high risk that hyperbaric patients without diabetes don't share, Harte said.

"If a (diabetic) patient loses a limb, they are 50 percent more likely to die in four years. If they lose a second limb, or a second toe, they're 70 percent more likely to die in four years," he said.

Many of the patients at the FirstHealth – Hoke wound clinic are people with uncontrolled diabetes who have developed wounds on their feet, but there's good news for them, Harte said.

"Most of our patients that we see in the center have had wounds not for weeks but

for months and years, and we heal about 95 percent of those patients under 30 days, and a lot of that is due to hyperbarics," he said.

Besides treating diabetic wounds, other approved uses include for transcutaneous PO2 interpretation, preparation and/or preservation of compromised skin grafts or flaps of skin, crush injuries, compartment syndrome and other acute traumatic injuries, thermal burns, delayed radiation injuries, chronic refractory osteomyelitis, necrotizing soft tissue infections, clostridial myonecrosis, acute blood loss and anemia, arterial gas embolisms, decompression sickness, carbon monoxide or cyanide poisoning, central retinal artery occlusion and idiopathic sudden hearing loss.

It's quite an impressive list, but those aren't the only problems that hyperbaric treatment can help with – just the ones that hospitals are allowed by law to treat, Harte said. In some academic studies, patients suffering from everything from Alzheimer's disease to Lyme disease to PTSD have shown evidence of improvement after being treated in a hyperbaric chamber.

Harte believes hyperbaric exposure could even save patients with the Ebola virus because the highly oxygenated environment would likely kill the oxygen-sensitive virus, just as it chokes out other infections.

"We know that any virus that's put in there dies," Harte said.

That's true of even really hard-to-kill bacteria like necrotizing fasciitis, otherwise known as flesh-eating bacteria.

"It spreads so fast you can see it bubbling in your skin as it goes, but that stops it in its tracks," Harte said.

Although hyperbaric medicine is only used for treating approved medical problems right now, if the government does expand the list to include it as a treatment for other issues, the department at FirstHealth's Hoke campus might very well have to grow in size to handle the increased number of patients. Harte said he sees that as a strong possibility for the future.

"I think as time goes further down the road, there's going to be a lot more indications for hyperbaric medication," he said.

There is one notable side effect from hyperbaric chamber treatment, and it's one that many people might be happy about, Harte added.

"It takes out wrinkles. A patient that starts treatment today, if they have to go through 60 treatments, they'll look 10 years younger when they get out."

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# Eye surgery

(Continued from page 5)

of which is cataract surgery. That will also include surgery for glaucoma and some other fairly straightforward front of the eye procedures," Mincey said.

That's important because cataracts and glaucoma are among the biggest causes of vision loss, the doctor said.

Mincey said that expanding to offer eye surgeries in Hoke County has proven to be a good decision for the office and for patients. If FirstHealth's Hoke campus continues growing, Carolina Eye Associates will likely grow with it, he said.

"It's clearly been a good move for us and we're doing quite a bit of cataract surgery there," Mincey said. "There's talk of having additional surgical space in the Hoke facility, and as that space increases, we'll increase our presence there so we can offer more services."

Having more healthcare options in Hoke County and giving patients the opportunity to have their surgery closer to home is a big plus for residents who need that kind of care, he said.

"The primary benefit is to the patient. We can do their surgery closer to home. It means less time away from family and work. It's just more convenient. It's an excellent facility. We can do just as good a job there as we can anywhere," Mincey

said.

## Cutting-edge

Besides bringing surgical care to Hoke County, Carolina Eye Associates has also been working to add new services to its practice in Southern Pines. Beginning next year, a team of Carolina Eye surgeons, including Mincey, Dr. John French and Dr. Arghavan Almony, will be among the first in the world to implant in an outpatient setting a miniature telescope for patients with advanced macular degeneration.

The CentraSight treatment program, developed for people with end-stage, age-related macular degeneration (AMD), is meant to fight the central vision loss common in end-stage AMD. With the tiny telescope implant, which is smaller than a pea, patients have a chance at improving their vision by reducing the impact of the blind spots caused by AMD.

Millinder, one of the doctors performing surgeries in Hoke County, is also one of the Carolina Eye Associates professionals who are trained in performing glaucoma surgery using the iStent, a "micro-bypass" stent that can reduce eye pressure in people with mild to moderate glaucoma.

# Music can be key for retirement center residents

Hearing an old favorite song can bring back great memories, and that's what the Music and Memory program at Open Arms Retirement Center is all about.

Open Arms is joining a group of 33 other nursing facilities across the state in taking part in the Music and Memory program, which gives elder care residents – especially those with memory problems from Alzheimer's disease or dementia – an iPod Shuffle full of music from their younger years.

The idea is simple. Hearing a familiar sound can help a person connect with the past, activity coordinator Nicole Purcell said.

"The music is personal. It's what they loved when they were young. It's going to bring back memories," she said. "We create a personal playlist for each resident that's in the program. Our goal will be for everybody to have an iPod."

Listening to familiar music from a happy time in a person's life has been known to decrease anxiety and reduce pain, according to the program.

"It's a fulfilling activity for elders who

are bed bound, can't communicate well or who have other impairments that keep them from interacting much with others," representative Kelly Ray said.

There's another component to the program's benefits. When the residents feel better, they are more likely to work with professional staff for their own care. That leads to better communication. The citizens are more engaged with those around them and staff members are better able to connect with them. It can also reduce the need for antipsychotic drugs to help keep them calm.

Music and Memory executive director Dan Cohen created the program. The retirement center staff found out about it through a YouTube video that went viral. There was a man named Henry living in a nursing home who rarely communicated with others, but when staff members let him listen to familiar music, Henry perked up.

"He was very quiet and never spoke, but once they put the headphones on him, he would come to life," Purcell said.

(See MUSIC, page 14)



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# Dialysis means a huge life change, but also saves life

"DaVita" means "he or she gives life," and for people in kidney failure, going to DaVita Dialysis can mean getting a little bit of their lives back.

Longtime DaVita employee Robin Crowell loves to see it happen.

"When we see a patient come in on a stretcher that doesn't know their name, they don't know they're in the world, and they go from a stretcher to a wheelchair, from the wheelchair to the walker, to driving ... that's just overwhelming for me, because that lets me know we live up to our name," she said.

Patients who go on dialysis are in end-stage kidney failure, a condition where their kidneys are no longer able to clean the natural toxins from their blood. The dialysis

process filters the body's blood supply by mechanical means. It's time consuming, requiring several hours each visit and three visits a week, but it means the difference between life and death.

The two leading causes of kidney failure are hypertension and diabetes. Once diagnosed, patients can often manage the disease with proper diet and other care. Once a patient with kidney failure moves into end stage, however, it means they must go on dialysis or receive a kidney transplant.

Kidney failure can strike people of any age, depending on their particular health status. The oldest patients who receive dialysis at DaVita are in their late 80s, while the youngest are in their late 20s. It's become

more common for younger people to experience kidney failure and need dialysis, registered nurse Sharon Bostic said.

"We're seeing more and more young people because of juvenile diabetes, with diabetes being the number one cause," she said.

Lack of knowledge and understanding is one big reason why younger people end up suffering from kidney failure, Bostic said. They don't notice the subtle signs or get regular medical care.

"High blood pressure is the silent killer. Patients don't know. Some patients are walking around who don't know they have high blood pressure because they don't have the symptoms of it, and then when it's too late, that's when they end up in the emergency room with shortness of breath or fluid overload, and that's when they have to go on dialysis," Bostic said.

One in three people with diabetes and one in five people with hypertension have kidney disease, but sometimes they simply don't find out about it until it's too late, patient care technician (PCT) Vanessa Johnson said.

"Sometimes they just really don't have

the symptoms besides fatigue," she said.

Catching kidney failure early is key to a better quality of life, the DaVita staff said.

"If you can catch it early – there's five stages – if you can catch it in the one, two, three stage, then you can probably manage your blood pressure, manage your diabetes. You can probably prolong it from happening so fast," Bostic said.

## Hooked up

Coming in to a dialysis office for the first time is very frightening, facility administrator Sharon McManus said.

"It's a very scary situation for them. It's a life changer," she said.

The dialysis process involves having a needle placed in one artery and a needle placed in one vein. The blood flows from the artery, into the dialysis machine that cleans the blood, and then returns to the patient's body through the needle placed in a vein.

Right now, DaVita Dialysis sees just over 100 patients using two different schedules. One group attends dialysis sessions on Monday, Wednesday and Friday while the second group attends sessions on Tuesday,

(See *DIALYSIS*, page 16)



Open Arms resident Ronald Robinson enjoys some tunes from an iPod Shuffle with activities director Nicole Purcell.

## Music

(Continued from page 13)

The staff and family members compile a personalized playlist for each of the residents. Motown artists and gospel hymns are among the favorites so far, but some residents also like listening to old radio shows.

"Music is one of the last things we actually lose if we have Alzheimer's but it also triggers our younger memories when that's where we're at already. We may not know what we had for lunch, but we can sing what we were singing when we were 14," Purcell said.

The staff at Open Arms already knew that to be true based on working with their own residents. One resident with memory loss can't remember recent events very well, but he can still sing music from his childhood.

"He can't tell you what he had for

lunch, but he can sing Amazing Grace," Ray said.

iPods are expensive, so the nursing home has started out with 15 of the little iPod Shuffle models and hopes to add more over time. Funding for buying the first iPods came from a donation from friends and family of the late Grace Pierce, a resident who passed away. Open Arms welcomes donations of old or new iPod Shuffles, money to buy the devices or gift cards for downloading songs on iTunes.

The staff attended training and 17 staff members received certification in the program, and more will likely follow in their footsteps. The program will start January 1.

"We're excited about it. We can't wait," Purcell said.



Nurse Sharon Bostic and a patient care technician prepare a dialysis machine at DaVita Dialysis.



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Tony Santangelo shows a model of a spine.

# There's a history in everyone's bones

Bones can tell a story that goes back to a person's childhood, and sometimes it's a horror story.

When a 28-year-old woman complaining of back pain went in to Dr. Tony Santangelo's Family Chiropractic practice, x-rays showed what looked like a whiplash injury in her neck. She hadn't been in a car wreck recently, but then remembered an accident from childhood.

"They didn't get any care at that time, so guess what she's got? Some arthritis and degeneration already," Santangelo said. "That's why I treat kids that are in car accidents whether they have pain or not. Pain's just a symptom, it's an indicator."

At Family Chiropractic, Santangelo and his staff can read the history written into a patient's body and figure out how to help write them a less painful future.

During a car wreck or other accident, spinal bones can be forced out of alignment, causing a wide range of problems depending on what goes wrong. Headaches, muscle spasms and even digestive problems are all things Santangelo has seen in patients due to traumatic injuries. Chiropractors work to correct injuries as best they can, and teach the patient how to support their own healing with exercises and care.

"Everything gets where it needs to go. It's like unkinking a garden hose," Santangelo said. "...It's really not just popping bones and bringing the joints back into position and making them feel better, there's really a deep vitalistic component to chiropractic for healing processes because if you don't have stuff flowing, you ain't going."

The office has a variety of tools available to help reduce pain and symptoms of problems with the muscles and joints. The muscle stimulating machines "give a little massage sensation" while passing a harmless electrical current through the muscles, which helps reduce muscle spasms and increase blood flow for healing. Warm, moist heat packs are also part of treatment tools along with a more high-tech option: therapeutic ultrasound.

"It sends sound waves into the joint and the muscle, it reduces inflammation at an accelerated rate," Santangelo explained.

One of the big differences between a chiropractor and a medical doctor is that chiropractors don't prescribe medication. They also don't diagnose other conditions, but do sometimes pick up on potential health complications during exams and can refer patients to specialists when necessary.

"We have to be astute enough to tell if it's chiropractic or not," Santangelo said.

Recently a man came in to the office complaining of low back pain. After a physical exam, the chiropractor took x-rays and immediately spotted a problem that had nothing to do with sore muscles.

"I do my thing, pop the x-rays up, and guess what – 'Do you have any prostate problems?'" Santangelo said.

That's not the first time he's caught a non-chiropractic health issue during an exam. A woman was showing signs of a severe kidney infection and a man being treated for carpal tunnel may have torn a tendon in his arm, so Santangelo sent them both out to their family doctors.

Family Chiropractic sees about 30-40 patients a day and Santangelo said he believes he's treated more than 7,000 patients since coming to Hoke County in 1997. While the practice does put preference on appointments, it's also important to Santangelo that they keep the doors open for people experiencing a sudden problem.

"My yellow page says we take crawl-ins; well, if you're crawling in, we don't want to disappoint, we want to do something for you, so at least we can start working on you and if you don't have an appointment will take a walk-in," he said. "Patients are in pain and some of them have some serious problems. If we're not there when they need us, what good are we?"

Having an on-site x-ray machine is one way the office tries to cut down on wait time. Not only can the staff take the x-rays there, they can also develop them in the dark room. It can take as little as an hour to have x-rays ready, Santangelo said.

Additionally, Family Chiropractic sees a lot of business from soldiers.

"I'd like to see more because those are the guys that can really benefit from the chiropractic care, especially the work they do for us, to protect our freedoms and be away from their family," Santangelo said. Santangelo himself is an honorary member of the Army Golden Knights, inducted in 2005 by paratrooper who was also a thankful and frequent patient.

The chiropractor said that he's eagerly watched the healthcare growth in the area and even serves on the FirstHealth of the Carolinas board. As a medical professional, he's seen firsthand the benefits for patients as they have greater and greater access to care options.

"It's exploded, which is good. It's great in the fact that all of our friends and families in Raeford and Hoke County can get healthcare here. They don't have to go someplace else," Santangelo said. "They can get chiropractic care they can get medical care here they can now get hospital and emergency care here and they don't have to wait, which is important because a lot of times, waiting causes problems. It makes things worse. Sometimes the 'worse' could be fatal."

But for now, at least, Santangelo's practice remains the only chiropractic office in Hoke County.

"I can also say I'm the best," he joked.

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# Most want to die in their own homes, that's where hospice comes in

When Raeford Mayor John K. McNeill signed a resolution declaring November as National Hospice Month, he did so having known firsthand what a difference hospice care can make to a family.

"On a personal note, this hospice program is a fabulous organization. I can say that because they've dealt with my family members over the years. It was a wonderful experience and a much-needed experience," he told the team members of Liberty Home Health and Hospice.

Every year more than 1.5 million Americans receive hospice care after being diagnosed with a life-limiting illness, and Liberty is one local agency that sends its staff out to homes throughout the county and beyond to make the last weeks and days of a person's life a little easier. It's all about helping patients and their families through the "absolute most difficult times of their lives," hospice operations manager Kimmie Fox said.

"That is our mission, that is our goal, to

offer these patients and families the chance to die in a dignified manner of their choosing and that is what we strive to do every day," she said.

Doctors, nurses, social workers, spiritual supporters and volunteers are all a part of hospice and palliative care. When a patient is referred to hospice, a nurse meets with the family, takes a medical history and determines if the patient is eligible for services. If so, then the Liberty team steps in to provide support.

"We absolutely try to find out how they see the end of their life, and try to assist them in symptom management and psychosocial issues, spiritual issues, financial issues," Fox said. "We just try to assist them in any way that we can so that they can have a dignified and peaceful death."

Dr. Lowery, president of the Liberty hospice division, said that it's all about the patients and their families.

"Our staff and volunteers go out there every single day and try to meet the needs



Elected officials gathered with the nurses, counselors, social workers and administrators of Liberty Home Care and Hospice to declare November as Hospice Month.

of the patients and, in hospice's case, the families' needs," he said.

National studies have shown that most people want to die in their own homes and they want to be with their closest friends and family at the end of their lives, not in a clinical setting. On average, the Liberty hospice program cares for between 16 and 22 patients at a time, and has helped thousands of patients and families over the years.

Working with families is a unique and even awe-inspiring honor, Fox said.

"It's very personal. They bring you in and treat you as if you're part of the family, and to be able to help them at the most critical time, most vulnerable time of their lives, is just an honor. There really are no words to describe what it gives back to the hospice workers," she said.

Besides its hospice program, Liberty also provides home health services for people living at home and trying to recover or treat various problems. That can mean anything from helping a young person heal after returning home from a surgery or helping an elderly person manage a chronic illness.

Liberty has been in Hoke County for about 30 years and plans to be around for much longer, hospice services vice president Holly MacDonald said.

"During that time, we have had the opportunity to serve many families throughout our community and it has been a deep honor, and we are positioning ourselves to make sure that we can take care of our families and patients going forward in the next few years and beyond," she said.

## Dialysis

(Continued from page 14)

Thursday and Saturday. The dialysis process itself takes about three hours to run, but the entire process including check-in time and preparation time takes anywhere between five to six hours.

The staff works hard to keep them comfortable during that time, and often patients who are on the same dialysis schedule end up making friends with one another while they undergo the process.

"They have other patients around, so during that three or four hours, they mingle and they talk with other patients and also with the teammates. We get close to the patients because we see them three times a week. It's like a family here," Bostic said.

Being diagnosed with kidney failure at any stage demands big life changes, especially in terms of what patients can eat and drink. Even some healthy fruits and vegetables are off-limits to kidney patients.

"A lot of things that we eat that are good for us, they can't eat," Johnson said.

Anything with phosphorus in it or foods that are high in potassium are dangerous for people with kidney failure. Patients also have to restrict their fluid intake.

Education is the key to helping people manage their disease and make the treatment easier, Bostic said.

"Instead of giving them a whole lot of lists saying, don't have this, don't have that, we give them a list to say, okay, these are things you can have," she said.

Although end-stage kidney failure is considered a terminal illness, with proper treatment, even people in stage five can still live a long time. One of DaVita's most veteran patients has been coming to the clinic for dialysis for nearly 20 years.

And sometimes when a patient leaves, it's because they have a brand-new kidney.

A kidney transplant eradicates the need for a person to receive dialysis. Saying goodbye to those patients is always a happy occasion for the staff, Johnson said.

"That's the day we celebrate," she said.

### Changes

DaVita Dialysis has been in Hoke County for about two decades, although the dialysis service operated in Raeford under a different name before then. But things today are different than for patients 20 years ago, when there were few healthcare options in the county and any emergencies had to drive half an hour to the nearest hospital.

Having two hospitals open up in Hoke makes it much easier for DaVita Dialysis staff seeking to provide the best possible care for their patients – including when they become symptomatic during dialysis and have to go to the emergency room.

"As they add more functions to either hospital, it makes it just awesome, because if we have to send someone to the emergency room, then we have somewhere we can send them here and don't have to drive 30 minutes," Bostic said. "That's crucial when you've got somebody we need care for right away, so it has made a great difference. I'm glad to see Hoke County growing."

What hasn't changed, staff members said, is their dedication to their patients and each other.

"We don't call each other coworkers, we call each other teammates. It takes the whole team to take care of our patients," Johnson said.

Crowell even came up with a special slogan for their team T-shirts to tell the world how DaVita Dialysis employees feel about their work.

"We do more than work here. We love here," she said.

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**Tom Howell, Pharmacist**





# For eye doctor, it's often about managing disease

For more than 28 years, people in Hoke County who needed help with their vision have been able to rely on Optometrist Dr. Tom Inman to bring some clarity to the situation.

When Inman bought the Raeford Eye Clinic in 1986, the 900 square feet of office space in Dr. Bob Townsend's former office was enough to handle the practice's business. Fast-forward to 2014, and not only did the clinic have to move to a bigger space on Main Street, Inman also had to build onto it to handle the number of patients he was seeing.

The practice cares for about 40 people on any given day. Needing prescription glasses or contacts is a big reason clients come to Raeford Eye Clinic, but the optometrist's eye health services are the biggest part of the practice.

"We actually spend more time on disease," Inman said.

Glaucoma is easily the most common eye problem among people in Hoke County, he said. Fortunately, over time, the care for the disease has gotten much better. That means, in many situations, glaucoma treatment can be managed through an optometrist's office.

"The drugs have gotten better, the results are better, the surgery is better, but

because the drugs are better, they don't need as much surgery," Inman said.

Optometrists don't handle eye surgeries but can refer clients out to ophthalmologists when necessary, and are often the first line of defense in catching eye health problems and alerting patients about the need for additional treatment. They can also help manage some known eye diseases.

Glaucoma can still be a little tricky in that what it takes to keep the disease at bay varies from person to person. The pressure inside the eye can fall inside a different range depending on the patient, Inman said.

"What's good for you might not be good for the next person, so every time you see them, you have to evaluate whether they're getting any worse," he said.

Eye problems caused by complications from uncontrolled diabetes is another common issue Inman sees in the Hoke population, but today with an increased emphasis on diabetic management from primary doctors, the severity of the problem is not as big a concern.

"Ten years ago, I sent probably one or two people a day at the most for laser surgery at Carolina Eye, and now I send like one or two a year, so that has drastically changed," he said.

In his 33 years in practice in Raeford,



Optometrist Dr. Tom Inman and optician Suzanne Balfour use an advanced laser scanner that can reveal problems with a patient's retina.

Inman has caught several cases of diabetes based on an eye exam. Sometimes when a person is diabetic but does not have a lot of the usual symptoms, vision loss is one of the first ways a patient can find out they are diabetic.

"They'll come in, usually with a bottle of water, and say, man, I'm thirsty and I can't see," he said. "...the circulation's in bad shape, the retina's in bad shape, they've just got problems."

People with controlled diabetes are also frequent patients just because they need check-ups to make sure their vision hasn't changed.

"All diabetics, you've got to do a real thorough retinal exam to make sure they don't have any bleeding," Inman said.

To help accomplish that, the practice

has high-tech, sophisticated equipment that can give doctors an inside look at the eye. One machine uses a laser to painlessly scan the eye and show an image of each layer of the retina. That gives the doctor a better look at what's going on inside the eye, and can pick up on a variety of issues like bleeding or swelling that can't be easily spotted during a routine eye exam.

"Before we had that piece of equipment, I had to send them somewhere and they'd put fluorescein in the vein in their arm and then take pictures of the fluorescein leaking in the retina and they could tell how much it's leaking," Inman said. "Now we can just use a light and a laser and it dissects the tissue and you pick it up."

It's just one more way Raeford Eye Clinic works to support eye health, he said.

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# Computers, robot come to pharmacy

Sprite Barbee opened Barbee Pharmacy in 1984 in a tiny office on Campus Avenue next to the Jordan Clinic, staffed at that time by Dr. Riley Jordan and Dr. Ramnik Zota. Together, the doctors represented two-thirds of the available family physician options in Hoke County.

"At that time, Hoke County had three doctors and that was it," Barbee said.

The location was convenient for patients, who could walk next door with their prescription, but as the county started growing, the business quickly outgrew the space. In 2000, Barbee built and opened the current, much larger facility on Harris Avenue. Once they moved, the business added the full range of drugstore items for purchase and also launched the Lilley Pad, a monogramming and gift business.

"We try to maintain the old-fashioned pharmacy aspects with the soda fountains and the coolers and we'll serve a few food items and bake a few muffins here and there," he said.

Things have changed behind the counter too, since computers first came on the scene in the 1980s.

"We were the first store in Hoke County to be computerized. None of the doctors were computerized, we seemed to jump on that first," Barbee said.

Today, Barbee Pharmacy has one of the most advanced tools available for filling prescriptions. While each prescription always gets a hands-on touch from a certified pharmacy technician, a meticulous automated robot controlled by computers does about 55 percent of the pill counting and bottle filling at the drugstore. It's one high-tech change that makes it possible for Barbee and his staff to keep up with an enormous surge in demand for their services.

"I'm going to see probably 200 people today, 200 people. That's insane. But with the technology we have, I can see 200 people today," he said.

After 31 years of helping care for Hoke residents, Barbee said the sudden healthcare boom is not only needed, it should have happened decades ago.

"It's so overdue. We're going through in 2014 something that should have happened in 1994. We're 20 years behind in the hospital. It's ridiculous," he said.

The pharmacist characterized his job as not unlike being an air traffic controller. Nearly anything can and will happen.

"We've had people having babies, we've had people having heart attacks, we've had people bleeding, we've had on and on, we've had seizures. If you're going to see 200 people...you've got an emergency



It's a family affair at Barbee Pharmacy, where Sprite and Connie Barbee and their daughter Cragan Barbee work to help people be healthy.

room type situation," Barbee said.

Even though they've grown and continue growing, Barbee said he and his staff work hard to "maintain the close patient-pharmacist tech relationship" possible in a hometown independent pharmacy. He spends a lot of time giving "pro bono" advice on issues like drug interactions, and dealing with the business side of things too. When something breaks, he doesn't have a corporate office to call for backup.

"The light fixtures falling down, the

plumbing backing up, the phones not working, all those insane mixtures of problems that just happen in just the physical building, you've got all that going on," he said.

It will likely be going on for many more years under the Barbee name. Not only does Barbee's wife Connie also work in the store with the Lilley Pad business, their daughter Cragan decided to pursue her own career in pharmacy and returned home to work alongside her parents.



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Dr. Martina Monroe received her medical degree from Hahnemann University/Drexel School of Medicine in Philadelphia, Penn. She completed her residency in family medicine at Duke/Southern Regional Area Health Education Center in Fayetteville. Her special interests include preventive medicine and family-focused care.

For an appointment with Dr. Monroe, call (910) 615-5800.



ABIGAIL SAM, M.D.  
Family Medicine

Dr. Abigail Sam received her medical degree from Ross University School of Medicine in Dominica, West Indies. She completed a residency in family medicine at AnMed Health in Anderson, S.C. Dr. Sam is a new mother of twins. Her special interests include preventive medicine and women's health.

For an appointment with Dr. Sam, call (910) 615-5800.

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JOHN MANDEVILLE, D.O.  
Family Medicine

Dr. John Mandeville received his medical degree from New York College of Osteopathic Medicine in Westbury, N.Y. He completed a residency in family medicine at Womack Army Medical Center in Fort Bragg. He previously served as officer in charge at Moncrief Army Community Hospital in Ft. Jackson, S.C. Dr. Mandeville is board certified by the American Board of Family Medicine. His special interests include women's health, preventive medicine and diabetes.

For an appointment with Dr. Mandeville, call (910) 904-8025.



WARREN JOHNSON, M.D.  
Pediatrics

Dr. Warren Johnson received his medical degree from Michigan State University in East Lansing, Mich. He completed a residency in pediatrics at Hurley Medical Center in Flint, Mich. Dr. Johnson is board certified by the American Board of Pediatrics. His special interests include infectious disease, preventive care, emergency medicine, developmental screening and international health.

For an appointment with Dr. Johnson, call (910) 904-8025.

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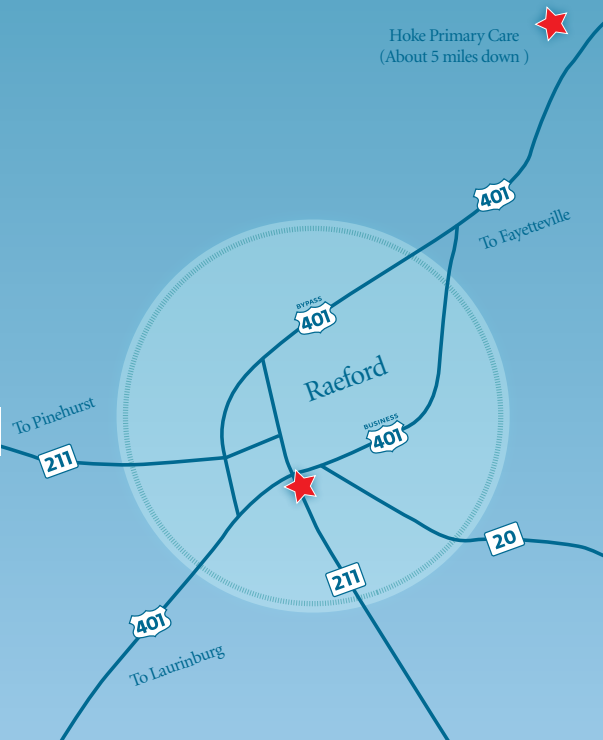
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