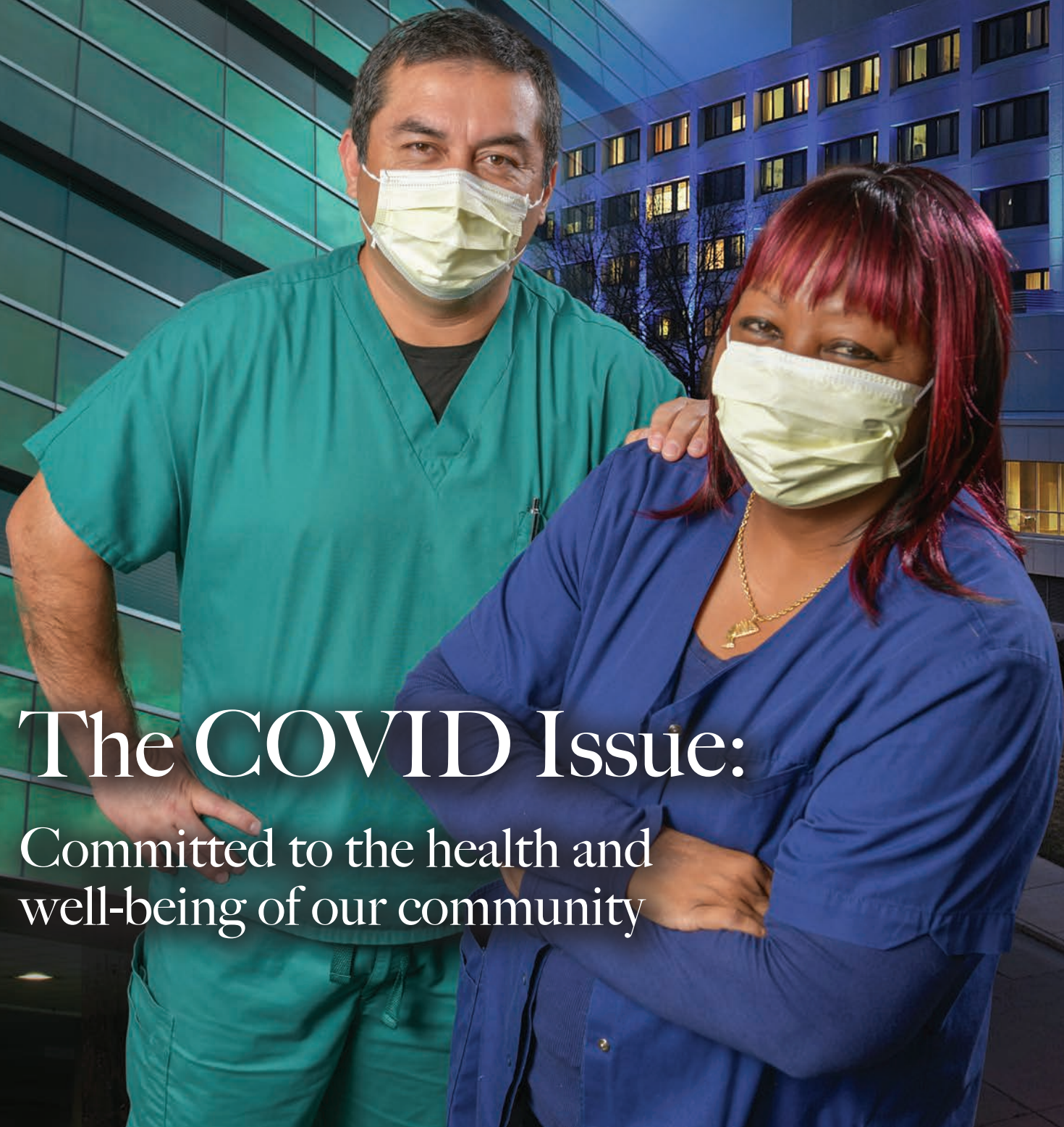


# LEADINGEDGE

SUMMER 2020

MAGAZINE



## The COVID Issue:

Committed to the health and well-being of our community



Cabell Huntington Hospital  
St. Mary's Medical Center

# THANK YOU



On behalf of the boards of Mountain Health Network, Cabell Huntington Hospital and St. Mary's Medical Center, we extend our heartfelt gratitude to our incredible healthcare team and the generous community we have the privilege to serve. The COVID-19 pandemic has been an unprecedented health event that created a number of challenges for our health system and entire community. Thanks to the teamwork and collaboration of everyone working together, we have risen to each one.

First and foremost, we must thank our frontline doctors, nurses and healthcare teams who have tirelessly dedicated themselves to the well-being of their patients and the safety of our community. We are also grateful to the many staff members who worked tirelessly behind the scenes to keep both hospitals operational. Your commitment and positive attitude have been inspiring to all of us. We applaud the leadership of Mountain Health Network in steadily and effectively guiding our system throughout this crisis. We also thank our local, state and federal elected officials for their continued assistance and support.

Last, but not least, we appreciate the support of our community. Your generosity has provided much-needed personal protective equipment and meals for our team members. Your kind-hearted notes, signs, prayers and other acts of kindness have all helped lift our spirits.



If you find yourself in need of health care, please do not delay as our hospitals are taking every precaution to provide care to everyone who needs it in the safest manner possible. Patients can expect to be screened before entering the hospital so that we can place patients suspected of COVID-19 in separate waiting and treatment areas. We are vigorously cleaning and sanitizing services, all staff members are wearing masks at all times and we are continuously enhancing patient safety and our patient flow process.

As we go forward, please continue to stay safe and follow the recommended guidelines to prevent the spread of COVID-19. Thank you for your continued trust in Mountain Health Network and our member hospitals as we provide you and your family the quality health care you deserve.

Warm regards,

*Beth Hammers*

Beth Hammers, Chair, Mountain Health Network and Cabell Huntington Hospital Boards of Directors

*David Fox*

David Fox, Chair, St. Mary's Medical Center Board of Directors

Advanced Medicine. Compassionate Care.

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## Message from the President & CEO



# COVID-19 Pandemic

These past few months have been extremely unusual for all of us as we have dealt with the unprecedented COVID-19 pandemic. Many things have changed during this time, but one thing that has not changed and will never change is our commitment to the health and well-being of our community.

In this "COVID issue" of *Leading Edge*, we'll highlight some of our success stories during the pandemic and introduce you to some of our incredible frontline staff members who are working tirelessly to help keep all of us well.

We're also pleased to share some of the wonderful acts of kindness shown to us by our community during this difficult time. Your continuing generosity and support have been overwhelming, and very much appreciated.

While COVID has been the focus in the media, it's important to remember that other illnesses and diseases do not stop during a pandemic; and so we are also sharing important health news from both Cabell Huntington Hospital and St. Mary's Medical Center.

As you read through the following pages, I hope you will be inspired. I also hope you will take great pride in knowing the high quality of care you will receive right here in our region.

I wish you and your family continued health and safety as we navigate this new normal together.

*Michael L. Mullins*

Michael L. Mullins, FACHE  
President & CEO  
Mountain Health Network

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Chief Executive Officer  
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# A Story of Surviving COVID-19

How St. Mary's Medical Center helped a local man stare down and defeat the deadly virus

The evening of March 29, 2020, Lynn Swain knew something was wrong. She and her husband, Nickie, had both experienced flu-like symptoms, but she had quickly recovered. However, Nickie had not and had become incoherent.

Coronavirus Disease 2019 (COVID-19) was just starting to make local headlines, so it was in the back of Lynn's mind when she took her husband to the emergency room at St. Mary's Medical Center (SMMC). But at age 67, Nickie was retired and didn't go many places. The couple lived in rural Gallia County, Ohio, in the small, tight-knit community of Mercerville, just north of Crown City. COVID-19 couldn't really happen to them, she thought.

But happen it did. Even before Nickie's COVID-19 test result came back positive, he began losing oxygen and was placed on a ventilator.

"He came in with mild confusion and weakness and didn't look that ill," said William R. Beam, MD, medical director of the critical care unit at SMMC and a pulmonologist at HIMG. "But then he deteriorated quickly."

Nickie spent the next 60 days in the SMMC Cardiovascular Intensive Care Unit (CVICU). The list of conditions he developed as COVID-19 ravaged his body is lengthy and includes Acute Respiratory Distress Syndrome (ARDS), bacterial pneumonia and renal failure. His diabetes became difficult to control and he developed multisystem organ failure. His chance of survival went as low as 20%.

"I just didn't know how it could get that bad," Lynn said.

Remdesivir (an anti-viral medication) and convalescent plasma were not available at the time, so Beam tried a number of the early suggested therapeutics, but nothing worked. The turning point, according to Beam, was when the decision was made to treat Nickie with anticoagulation and dexamethasone, a corticosteroid.

"It was a small decision with a big impact," Beam said. "That's what critical care medicine is. It's the sum of small decisions that address and anticipate complications and minimize additional organ injury."

Due to COVID-19 safety restrictions, Lynn was unable to visit her husband. But she said the nursing staff in the SMMC CVICU cared for Nickie as well as treated her and her loved ones like family. Beam said Nickie is alive because of that exceptional nursing care.

Jessica Merrick, RN, one of the CVICU nurses who treated Nickie, said she is incredibly proud of how she and

her fellow nurses stepped up to the challenge of caring for a patient with this new, unknown disease. "We were in this battle with him," Merrick said. "Since his family couldn't be by his side in those hardest moments to hold his hand and encourage him, we were there for both him and his family."

Kelli Yahr, RN, took care of Nickie many nights. She remembers the worst of those nights when it looked like he wasn't going to make it. "We were certain his time was coming," she said. "I remember holding his hand that night and telling him that this wasn't how he was going out. I remember praying so many times that night."

Exactly one week later, Beam called Lynn to tell her Nickie was going to make it. "It was the biggest moment," she said. "I tried to keep my composure, but I was praising the Lord all over my kitchen."

"The next time I saw him, I walked past his room and saw that he was smiling," Yahr said. "It brought tears to my eyes. I was truly blessed to be a small part of his journey."

Beam said Nickie's case became very personal for his entire care team. "We were invested in his survival. It

was a big victory for him, his wife and the nursing staff to see him wheeled out of the CVICU."

Nickie said he remembers very little about being sick and has no idea how he contracted COVID-19, which he calls the "meanest thing he's ever dealt with." He also remembers very little about the care he received. But Lynn will always remember and has nothing but glowing reviews for the staff at St. Mary's.

"We have excellent medical facilities right here in our community, and we should be very thankful for that," she said. "The effort his medical team put into his care, I don't have enough words to express my gratitude. I can never thank them or repay them."

After his stint at St. Mary's, Nickie was moved to Cornerstone Hospital of Huntington and later Encompass Health for physical therapy after developing polyneuropathy, or damage to multiple peripheral nerves, due to the disease and his extended time in bed. Though the long-term effects of his bout with COVID-19 are still not known, Nickie's therapy has significantly improved his mobility and he is now back home in Mercerville spending time with Lynn, their four children and seven grandchildren.

"I thank God every day that I have him," Lynn said. "Something like this makes you realize just how precious people and relationships are to you." ■



# Daily Acts of Kindness

The Tri-State came together to provide meals to healthcare workers on the front lines of the COVID-19 pandemic

In the middle of clouded chaos, the fog began to clear through acts of kindness. This was how staff members at Cabell Huntington Hospital (CHH) and St. Mary's Medical Center (SMMC) felt as the community pulled together to offer support to those providing medical care at the height of the COVID-19 pandemic.

During the pandemic's peak, many frontline workers couldn't leave the hospital. So, the community stepped in and provided meals on a daily basis. CHH Patient Experience Manager Holly Mount, RN, said it was not only an act of compassion, but also a way to stay connected to those on the front lines.

"It was truly amazing to see that people understood the long hours without the ability to get away for a meal," said Mount. "We received everything from cookies to grilled chicken mac n' cheese. The staff were grateful for all of it."

Over 1,511 meals were donated to each hospital for distribution. The meals were made possible through the My Huntington Cares Fund established by the Foundation for the Tri-State Community, as well as many individual donations. Local restaurants were contacted to provide pre-packaged meals. Some community members paid for meals to be delivered, while others made meals at home to donate to the hospitals.

"The staff was humbled by the generosity of the community," said Lisa Ellis, RN, Cardiovascular ICU clinical manager at SMMC. "They were so very appreciative and talked about how wonderful it was when they were so busy to just be able to stop and eat and get right back to work."

Ellis said that at the beginning of the pandemic, things were so scary and so much was unknown that taking care of patients was often overwhelming. Many staff members would skip meals to stay by their patients' sides.

"Meals were provided for two shifts — lunch and dinner," said Mount. "We used a rotation basis to make sure everyone who was working received at least one of the meals during the duration of the donations, which lasted over two months."

In addition to meals, boxes of snacks and desserts were delivered daily. "It was overwhelming and a blessing all at the same time," Mount said.

"During the COVID-19 crisis, these small acts of kindness meant so much," Ellis said. "It meant we weren't in this alone, there are people praying for us and supporting us. It meant it was

one less thing we had to worry about — and it helped us help others." ■



# Thank You

to all of our frontline staff and our community during the COVID-19 pandemic.



# Making Every Moment Count

*Cabell Huntington Hospital among the first in the nation to use life-saving technology*

Lung cancer is the deadliest form of cancer for both men and women in the United States. According to the American Lung Association, less than half of people with lung cancer survive after being diagnosed. However, when lung cancer is detected early, especially before it has had a chance to spread beyond the lungs, the five-year survival rate rises from just 5% to 56%.

To assist with earlier and more accurate diagnosis, Cabell Huntington Hospital (CHH) uses Monarch® robotic bronchoscopy, a revolutionary tool that allows physicians to easily and precisely move through the lung and its bronchi, providing access to parts of the lung that until now were nearly impossible to reach. CHH is among the first hospitals in the nation and the only one in the Tri-State to use this

innovative technology in the detection and diagnosis of lung cancer.

“The *Monarch* system is the latest advancement in catching lung cancer in its earliest stages,” said Yousef Shweihat, MD, interventional pulmonologist at CHH’s Center for

through the patient’s mouth and secure it in one of the main branches of the lung. Using a handheld control, a catheter is passed through the scope into the airways. Tiny cameras allow Shweihat and the interventional pulmonology team complete visibility while they biopsy nodules in hard-to-reach spaces — without requiring invasive surgery.

The addition of *Monarch* robotic bronchoscopy is one of many recent advancements in lung cancer diagnosis and treatment at CHH. For patients diagnosed with lung cancer who require surgery, Mark Cooper, MD, a board-certified, fellowship-trained thoracic surgeon, performs thoracic robotic surgery, a minimally invasive approach that requires just three or four dime-sized incisions. The procedure provides a shorter recovery period with less pain, blood loss and fewer complications.

“It’s all about saving lives,” Shweihat said, “with earlier and more accurate diagnosis, safer and more effective treatment, and an approach to care that promotes faster recovery — so patients throughout the region can get back to making each day count. I am excited about the promise of this technology to offer more hope for future patients diagnosed with lung cancer.” ■

*For more information on Monarch bronchoscopy, call the Cabell Huntington Hospital Center for Lung Health at 304.399.2881.*

“

YOUSEF SHWEIHAT, MD:

**It’s all about saving lives with earlier and more accurate diagnosis.**

Lung Health, and St. Mary’s Regional Lung Center and associate professor in the Department of Internal Medicine at the Marshall University Joan C. Edwards School of Medicine. “The system’s state-of-the-art design provides the support and stability needed to biopsy very small lung nodules, as well as those in remote areas of the lung.

“Because this technology improves reach, vision and control for bronchoscopy procedures, it holds the potential to help diagnose cancer even earlier than before.” During the procedure, physicians pass a robotic bronchoscope

**What is the Zephyr Valve treatment?**

*Zephyr* allows the doctor to see the inside of the lung or check a suspicious area. The doctor will use a camera called a bronchoscope. The doctor will pass the bronchoscope through your nose or mouth. The doctor will use the *Zephyr* valve between 2 to 3 *Zephyr* valves in the airway in the part of the lung being treated. After the procedure, you will need to use the medicine that your doctor has prescribed for your condition.

You can go home after 2 to 3 days unless you have side effects such as a cough in the lung tissue, which can happen in up to 1 in 3 procedures. If this happens your doctor may put a small tube in your chest to let out the air from the lung, and you may need to be in the hospital up to a week longer for the tube to heal.

The *Zephyr* Valve closes to block air from entering the damaged part of the lung to allow the healthier lobes to expand.

Multiple *Zephyr* Valves in

# Advances in Lung Cancer

The lobectomy is at the *leading edge* of cancer care

Lung cancer treatment at the Edwards Comprehensive Cancer Center (ECCC) has advanced dramatically in the past few years, particularly for patients who require surgery.

Previously, lung surgery required an 8- to 10-inch incision. Today, with the addition of thoracic robotic surgery, a minimally invasive approach that requires just three or four dime-sized incisions, patients experience a shorter recovery period with less pain and blood loss, and fewer complications.

“Thoracic robotic surgery utilizes telemanipulation transfer technology as an advanced laparoscopic platform,” said Mark Cooper, MD, PhD, a board-certified, fellowship-trained thoracic surgeon who joined the center four years ago. “It is especially helpful in reducing patient length of stay and post-operative pain while promoting a healthier recovery. It can allow pulmonary lobectomy and accurate localization of small nodules and limited resection, thus conserving lung tissue.”

Lungs have five lobes, three on the right and two on the left, and a lobectomy removes one of them entirely. The more tissue that can be conserved during this process, or during smaller procedures, the more quickly patients can return to their lives.

Cooper and his team perform pulmonary lobectomy surgeries with the *da Vinci® S HD Surgical System*, and the advancements address a critical need. With lung cancer being the leading cause of cancer death for both men and women in the United States, and with 225,000 Americans diagnosed with lung cancer annually, the need for such improvements to treatment is great. The American Cancer Society estimated 2,010 new cases of lung/bronchus cancer in West Virginia alone for 2019, claiming 1,360 lives.

The ECCC’s recruitment of Cooper has been part of its effort to combat this trend. He has 30 years of experience practicing surgery in both the United States and England and, in 2016, joined the cancer center and the Marshall University Joan C. Edwards School of Medicine faculty,

serving as an assistant professor in the Department of Surgery. He earned a medical degree from the University of Leeds in England and completed his general surgery residency at Texas A&M University and cardiothoracic surgery residency at the University of Wisconsin. Cooper completed a fellowship in transplantation at the University of Pittsburgh with the late Dr. Thomas Starzl, who was renowned for surgical innovations involving organ transplants.

Here in Huntington, Cooper and the Marshall Surgery team are integrally involved with both the thoracic surgical aspects of lung cancer care and providing care for esophageal cancer patients.

“The Department of Surgery is also involved in the diagnosis and staging evaluation of lung cancer patients,” Cooper said. “This is through new techniques, such as navigational bronchoscopy and biopsy, and also staging of the mediastinum through endobronchial ultrasound. These procedures are outpatient and provide rapid analysis of patient disease.”

Navigational bronchoscopy involves using a bronchoscope — a thin tube with a camera — to reach through the nose or mouth and into the airways of the lungs to examine and diagnose conditions.

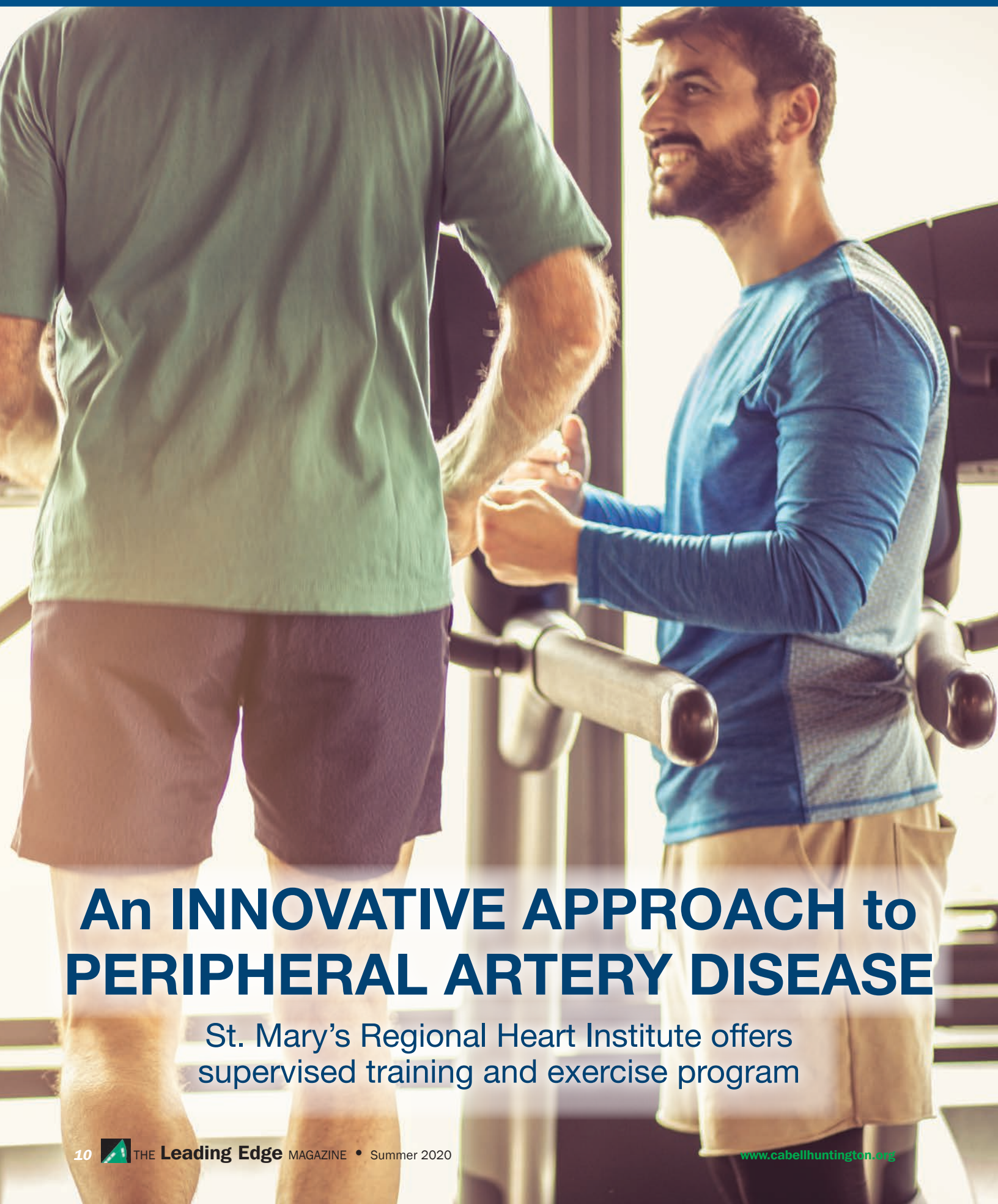
“Navigational bronchoscopy may also be used to place fiducial markers near lung cancer areas, which allows better targeting when non-operative patients have radiation therapy,” Cooper said.

The Department of Surgery screens lung cancer patients and tests lung nodules that are found on screening studies.

“We can offer a complete thoracic screening service to patients who may be heavy smokers or who have a family history of lung cancer,” Cooper said.

The new technologies allow the ECCC to offer advanced techniques for the diagnosis and minimally invasive treatment of lung cancer and other ailments. The ECCC team is saving lives and providing tools for faster recovery so patients throughout the region can get back to making each day count. ■





# An INNOVATIVE APPROACH to PERIPHERAL ARTERY DISEASE

St. Mary's Regional Heart Institute offers supervised training and exercise program

Peripheral artery disease (PAD) is a common circulatory problem in which narrowed arteries reduce blood flow to the extremities. Left unmanaged, it can cause complications like heart attack, stroke, amputation and death. However, PAD often has a cure: a healthy diet, regular exercise and tobacco cessation.

St. Mary's Regional Heart Institute, a Mountain Health Network Center of Excellence, is now offering a supervised exercise program for the treatment of PAD.

"The idea of this program is to address the disease before it reaches the point of surgical intervention," said Afton Reedy, MSN, RN, clinical manager of St. Mary's Cardiac Rehabilitation. "The earlier we can help someone, the better their outcome."

The most common symptoms of PAD include leg muscle pain that occurs with walking and is relieved with rest, foot or toe pain at rest that may disturb sleep, skin ulcers or wounds that won't heal or are slow to heal and shiny skin with loss of hair on feet and toes.

Supervised exercise training can reduce PAD symptoms and risk factors, increase functional capacity and



AFTON REEDY, MSN, RN:

**The idea of this program is to address the disease before it reaches the point of surgical intervention.**



Afton Reedy, MSN, RN, is the clinical manager of St. Mary's Cardiac Rehabilitation program.

prevent progression of the disease. Participants in the program at St. Mary's alternate between periods of exercise and rest on a treadmill with a goal to complete 30 minutes. Each patient is monitored by experienced nurses, exercise physiologists, a registered dietitian and a counselor to provide supervised exercise training and lifestyle modification education.

The program is covered by most insurance providers. To participate, patients must have a face-to-face consultation with their physician, resulting in a referral.

"It's very important for patients to meet with their physician so they can determine if this program can assist with their treatment," Reedy said.

Approximately 8 to 12 million adults in the United States are affected by PAD. While certain risk factors can't be controlled — like age and a family or personal history of PAD, cardiovascular disease or stroke — risk factors that can be controlled include smoking, diabetes, obesity, high cholesterol, high blood pressure and physical inactivity. ■

*For more information about the St. Mary's PAD exercise program, call 304.526.1253.*

# Innovations in *Electrophysiology*



If you know the feeling of your heart beating too hard or fast, fluttering or skipping a beat, you know it can be a frightening experience. At St. Mary's Electrophysiology, the latest technology and a highly trained staff provide patients with the care and treatment they need and the peace of mind they deserve.

The electrophysiologists at St. Mary's Medical Center treat a full range of heart conditions related to abnormal heart rhythms, including atrial fibrillation, or A-Fib, and congestive heart failure. They work closely with interventional cardiologists, congestive heart failure specialists and cardiac imaging specialists to provide comprehensive heart care to the Tri-State and beyond.

"We see patients throughout the region, and I think part of the reason people travel to see us is that we focus on spending time with them," said Esam Baryun, MD, medical director of electrophysiology services, St. Mary's Electrophysiology. "We explain things, talk through pros and cons, and make sure patients fully understand their options. We're accessible."

Baryun and the other members of the electrophysiology team perform ablations, implantation of pacemakers and other devices, electrical cardioversion and tilt table testing. They collaborate with other specialists, including neurologists and primary care providers, to prevent and treat life-threatening health problems like stroke. Their goal is not only to treat arrhythmias, but also to improve patients' health and lives.

"Electrophysiology is a rapidly changing field and our practice is at the forefront of both technology and treatment," said Aamir Cheema, MD, electrophysiologist, St. Mary's Electrophysiology. "What's exciting to me is that with these advancements, we're able not just to manage problems, but to cure them. We're improving patients' quality of life, helping them live longer and curing conditions that, not too long ago, they would have endured for the rest of their lives."

Education is an important part of treatment for patients with abnormal heart rhythms, Cheema said, and often includes recommendations for weight management because obesity plays a major role in heart rhythm disorders. Patients who lose weight not only reduce their atrial fibrillation

symptoms and overall cardiovascular risk, but also have better outcomes from electrophysiology procedures.

"Obesity causes sleep apnea, hypertension, diabetes and atrial fibrillation," Cheema said. "If patients lose weight, it greatly reduces all of these risk factors. So counseling patients on weight management and blood pressure management is a big part of what we do. I tell patients that losing weight is the treatment that will make the most difference. If they don't lose weight, treatment becomes more difficult and is less successful."

Sirisha Reddy, MD, electrophysiologist, St. Mary's Electrophysiology, said lifestyle modification isn't just about the food we eat. It's about what we drink as well.

"Caffeine and alcohol are prime stimulants to the heart's electrical system," Reddy said. "It's so important to monitor how much caffeine and alcohol you are consuming because, if you don't have trouble now, you likely will later on."

Of course, some risk factors can't be controlled. Women are five times more likely to have a stroke than men, and the risk for heart problems increases with age. At St. Mary's, the entire electrophysiology team, from the physicians to the nurse practitioners, nurses and support staff, is dedicated to improving all patients' health and quality of life, not only through state-of-the-art electrophysiology procedures, but also through preventive care and education.

"We do a lot of education and prevention, especially with our patients who may not be showing symptoms but still need to be monitored closely," Reddy said. "As a female electrophysiologist, I care especially about promoting women's health and making sure that, while women are caring for others, they are also caring for themselves."

It's a patient-centered approach to care, Baryun said, and it includes those with complex health problems who require advanced electrophysiology procedures.

"Our department uses the newest technology and the latest devices, and what that means for patients is offering the safest, most effective procedures available," he said. "It's rewarding to help patients feel better. When you can correct a rhythm problem, that's a monumental change in the patient's life." ■

For more information on electrophysiology at St. Mary's Medical Center, call 304.399.7548.



Aamir Cheema, MD, electrophysiologist



Sirisha Reddy, MD, electrophysiologist



Esam Baryun, MD, electrophysiologist and medical director

**St. Mary's Electrophysiology provides comprehensive care for the heart's electrical system**





Kenova

# CHH Family Medical Centers

CHH Family Medical Centers offer telehealth, same-day and walk-in visits.

The benefits of seeing a primary care provider are many. At Cabell Huntington Hospital’s (CHH) Family Medical Centers, those benefits include same-day, walk-in and telehealth visits, as well as short wait times for both established and new patients.

“Our family medical centers offer general primary care, which includes both acute and chronic disease management, as well as preventative care. And while our primary focus is not acute care, we do welcome walk-in visits,” said Matthew Curry, MD, family medicine physician at the CHH Family Medical Center at Merritt’s Creek and assistant professor in the Department of Family Medicine at the Joan C. Edwards School of Medicine.

He said the centers’ highly trained physician assistants and nurse practitioners help ensure patients are seen swiftly and thoroughly during a time of injury or illness. They provide the same level of care as physicians, from diagnosing illness to prescribing medication to coordinating care and treatment. Each family medical center has an in-house

lab for bloodwork, and patients can call for a same-day appointment or simply walk in when they are sick.

“You don’t have to be an established patient to be seen for an acute illness,” said Linda Justice, APRN, FNP-C, nurse practitioner at the CHH 20th Street Family Medical Center in Huntington. “Our nurse practitioners are trained to assess, diagnose and order proper testing and treatment. We collaborate with our patients to develop a treatment plan that will achieve their goals, and we’re often able to get patients connected with community resources that will help meet their needs.”

With locations in Huntington, Kenova, Barboursville; Cannonsburg, Kentucky; and Proctorville, Ohio; CHH Family Medical Centers provide state-of-the-art care close to home. No prep work is required for a patient to establish care, and the centers see patients of all ages, including children.

Tamara Wellman, DNP, provides care services at the newest center in Cannonsburg. She received her doctorate



Barboursville



Huntington



Cannonsburg



Proctorville

and master’s degrees in nursing with a family nurse practitioner specialty from the University of Kentucky and her bachelor’s degree in nursing from Ohio University. She is a certified family nurse practitioner and diabetes educator.

“The CHH Family Medical Center in Cannonsburg offers both acute and chronic disease management, as well as preventive care,” said Tabitha Fox, director of physician services at CHH.

“It’s having someone familiar with your health. With preventative care to help you stay healthy, regular appointments to catch problems early and ongoing care for long-term conditions,” said Alan Maynard, FNP-BC, nurse practitioner at the CHH Family Medical Center at Merritt’s Creek. “When care from a specialist becomes necessary, primary care providers get patients the advanced care and treatment they need.”

Although anyone can schedule an appointment or walk in for a sick visit, regardless of whether they’ve been seen before, establishing ongoing care with a primary care

provider is still at the heart of CHH Family Medicine. ■

For more information, call the family medical center closest to you — or just walk in.

**Barboursville** – 100 Meadow Pointe, Barboursville, West Virginia 25504 304.399.2990

**Cannonsburg** – 6572 Midland Trail, Ashland, Kentucky 41102 (near Cannonsburg) 606.928.1881

**Huntington** – (20th Street Professional Building) 1115 20th Street, Huntington, West Virginia 25703 304.697.7000

**Kenova** – 750 Oak Street, Kenova, West Virginia 25530 304.453.6136

**Proctorville** – 7718 County Rd. 107, Proctorville, Ohio 45669 740.886.1150

# Expert Care for Urgent Needs

St. Mary's Urgent Care and the Cabell Huntington Hospital Urgent Care centers provide care and treatment for non-emergent health needs

The equipment, expertise and resources of the emergency departments at Cabell Huntington Hospital (CHH) and St. Mary's Medical Center (SMMC) are equipped to handle the most severe and life-threatening conditions. However, not every acute medical problem is an emergency. For non-emergent health concerns, patients throughout the Tri-State can trust the expert care and treatment provided by SMMC Urgent Care and the CHH Urgent Care Center.

"Urgent care provides quicker access to care for medical problems that aren't necessarily serious enough to warrant an ER visit," explained Gary Cremeans, MD, medical director of the CHH Urgent Care Center. "If a child awakens with ear pain, the parents don't need to wait hours in an ER to get care for the child."

St. Mary's Urgent Care and the CHH Urgent Care Center treat allergic reactions, asthma, cuts and burns, bug and animal bites, strains and sprains, colds and flus, pink eye, ear infections, sinus infections and strep throat, among other non-emergent health problems. They handle common illnesses and injuries efficiently and effectively with the same level of care patients would receive at the hospital — at a lower cost for patients.

"We see the things that aren't emergent, aren't life-threatening, but are still things that you don't want to wait to have looked at," said Mark McDaniel, DO, medical director of St. Mary's Urgent Care.

McDaniel said patients should go to the ER when experiencing potentially life-threatening symptoms, including head injury, change in mental status, vision loss, loss of consciousness, shortness of breath and severe chest pain.

It can be difficult during a stressful medical situation to know where to go for health care or whether to simply wait for an appointment with a primary care provider. Though the urgent care staff does not provide medical advice over the phone, patients can call to find out whether their particular concern can be addressed. During a true emergency, it is always best to go immediately to the ER.



GARY CREMEANS, MD:

**Urgent care provides quicker access to care for medical problems that aren't necessarily serious enough to warrant an ER visit.**

Still, he said, some patients are surprised to find out the wide range of services urgent care centers offer.

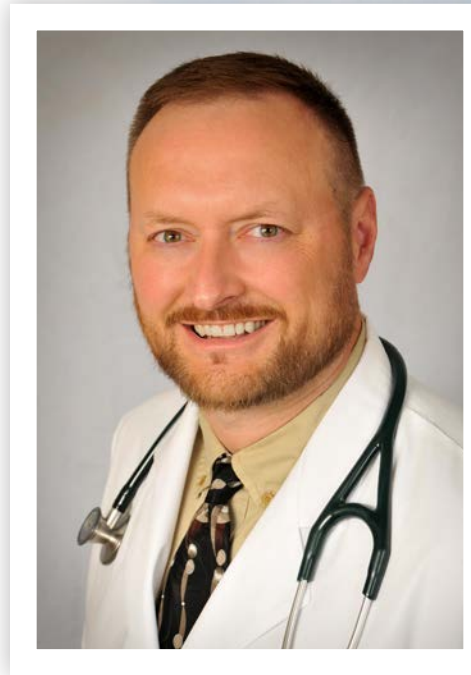
"We offer onsite X-ray services and rapid screening tests for flu, RSV, mono and strep," Cremeans said. "We have braces and can make temporary splints for orthopedic injuries. We can also draw labs and send them to the hospital via courier."

When a prescription is needed, he added, patients who are seen later in the evening can have their prescription filled that same night at Marshall Pharmacy, which is open 24 hours a day.

The CHH Urgent Care Center, located at 2 Stonecrest Drive in Huntington, is open seven days a week from 8 a.m. to 11 p.m., and St. Mary's Urgent Care at 2815 Fifth Ave. in Huntington is open seven days a week from 9 a.m. to 9 p.m. Cabell Huntington Hospital Express Care,

which is located inside Fruth Pharmacy at 3109 Teays Valley Road in Hurricane, is open 9 a.m. to 8 p.m. Monday through Saturday and 11 a.m. to 5 p.m. Sunday, offering many of the same services as the urgent care centers. ■

*For more information, call the CHH Urgent Care Center at 304.525.2273, St. Mary's Urgent Care at 304.399.7182 or CHH Express Care at 304.562.2002.*



Gary Cremeans, MD, medical director of the CHH Urgent Care Center



Mark McDaniel, DO, medical director of SMMC Urgent Care



# Quality Care at Your Fingertips

Mountain *teleHEALTH*™ offers virtual, online health care 24 hours a day, seven days a week

There are times when a trip to the doctor's office just isn't possible, such as when you're away on vacation or traveling for work; when you have children at home and don't want to take them to a physician visit; when you're too sick to drive; or, of course, when physician offices are closed.

With *Mountain teleHEALTH*™, an online platform for virtual health care visits, both pediatric (age 2 and up) and adult patients can receive treatment for non-life-threatening illnesses via their computer, tablet or smartphone. It's quality care at your fingertips, said Mountain Health Network President and CEO Michael Mullins, FACHE.

"*Mountain teleHEALTH* is an extension of the excellent care provided at all of our clinics and urgent care facilities, and is available 24 hours a day, seven days a week," Mullins said.



Stephen Wilcox, MD, director of telemedicine at CHH

Patients can use their devices to connect with a medical provider. Health care professionals evaluate, diagnose and treat patients via a video chat similar to FaceTime or Skype. Clinical services

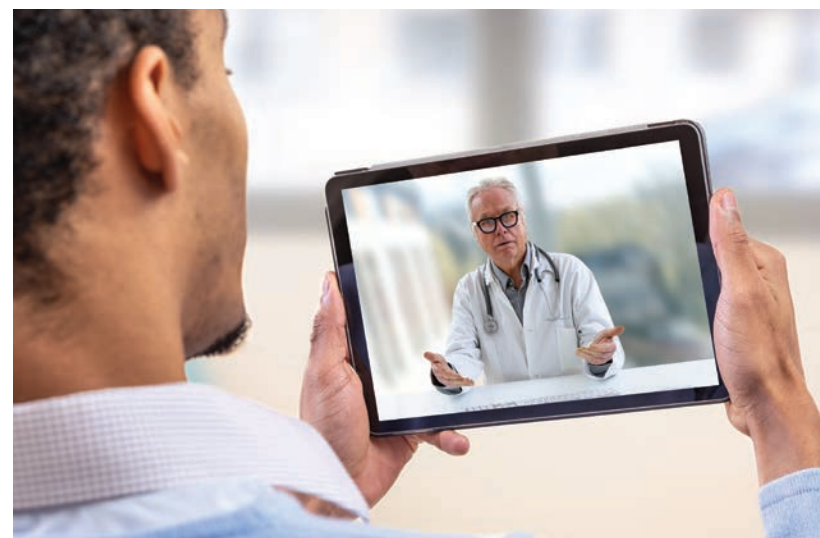
are provided by both local providers and Online Care Group — the nation's first and largest primary care group devoted to telehealth. Stephen Wilcox, MD, family medicine physician and director of telemedicine at Cabell Huntington Hospital, said *Mountain teleHEALTH* is equipped to diagnose and treat a wide range of non-urgent illnesses, including allergies, flu, ear infection, rash, abdominal pain, sinusitis, pinkeye, upper respiratory issues, migraines and minor burns and cuts.

"This convenient service offers an alternative to obtain treatment for those simple conditions with just a click of the app or a web browser," Wilcox said. "It only takes a few minutes to talk to a licensed healthcare provider and get a prescription sent to the pharmacy of your choice."

*Mountain teleHEALTH* providers are experienced, highly trained and most are board certified. Patients have the ability to view providers' ratings, reviews, education and practice experience before selecting a provider for their specific concern.

To download the free *Mountain teleHEALTH* app, visit [www.mountaintealth.com](http://www.mountaintealth.com), the Apple App Store or the Google Play Store. To visit with a provider, simply download the app, fill out the contact information form, set up a username and password and select a provider. The cost per visit depends on individual insurance. ■

For more information about *Mountain teleHEALTH*, visit [www.mountainhealthnetwork.org](http://www.mountainhealthnetwork.org).



# The *Comfort* of Home

CHH Home Care Medicine improves the lives and health of the region's most medically complex patients

Home-based primary care is an area of medicine aimed at providing management for chronic medical problems and preventing the unnecessary hospitalization of frail, elderly and medically complex patients. But at Cabell Huntington Hospital (CHH) Home Care Medicine, it goes beyond that.

"Our goal is to keep people from having to go into the hospital, which for older and frailer patients can cause a whole cascade of complications," said Cynthia Pinson, MD, CMD, medical director for CHH Home Care Medicine and assistant professor in the Department of Family Medicine at the Marshall University Joan C. Edwards School of Medicine. "But it's a very comprehensive type of care. When you're seeing patients in their home, you're seeing all aspects of their health, not just their medical problems. You're seeing how safe they are at home, their food supply issues, their family support — many social determinants of health."

Pinson leads the CHH Home Care Medicine team, which includes nurse practitioners, nurses, a social worker and a highly trained support staff committed to patient-focused care. In the comfort and safety of their own home, patients receive the same level of care that they would at a physician's office — from consistent, ongoing primary care to the diagnosis and treatment of illness, as well as palliative and end-of-life care.

"We might be at the patient's home and notice that she's having some confusion, or the patient's son or daughter might call and tell us that the patient seems short of breath," Pinson explained. "From there, we're able to ask questions and dispatch our providers to the home to pinpoint exactly what's wrong and then take action before the problem gets worse.

I can't say enough about our team. They truly care, and the relationships that



we build are precious to us."

CHH Home Care Medicine offers physical exams, disease management, medication management and care coordination, working closely with hospitals, specialists, nursing homes, assisted-living facilities and hospices to ensure patients' needs are met. When a patient requires imaging or lab work, CHH Home Care Medicine coordinates

those services to provide in-home X-rays and bloodwork.

Pinson said patients may receive both pre-acute care, diagnosing and treating problems to avoid unnecessary hospitalization, and post-acute care, ensuring patients receive the ongoing care they need after a hospital stay. And it works. In the past three years, patients' rehospitalization rate has decreased thanks to improvements in care coordination, she said.

A physician referral is not necessary to receive services. Patients who qualify must be at least 18 years of age and be considered frail or homebound. Those who reside in a nursing home and/or assisted/non-assisted living facility also qualify for services with the consent of the patient and/or relative or legal guardian. CHH Home Care Medicine accepts Medicare, Medicare with supplemental insurance, Medicare with Medicaid and private insurance. ■

For more information or to set up CHH Home Care Medicine services for yourself or a loved one, call 304.529.7004.



Cynthia Pinson, MD, CMD, medical director of CHH Home Care Medicine

# Accuracy Matters

At St. Mary's Regional Joint Replacement Center, robot-assisted procedures and custom-fit joint replacements improve accuracy and outcomes

When facing hip or knee replacement, accuracy matters. At St. Mary's Medical Center (SMMC), custom hip and knee replacements and robot-assisted surgeries are improving accuracy and outcomes for patients throughout the region.

Vivek Neginhal, MD, orthopedic surgeon and director of the St. Mary's Regional Joint Replacement Center, performs robot-assisted surgery using the NAVIO™ surgical system. This system uses computer and robotic assistance to size, position and make custom cuts for both partial and total knee implants. Advanced planning software allows Neginhal to tailor the procedure to each patient's unique knee shape, targeting damaged areas while leaving healthy bone and ligaments untouched.

"I map out the surgery on a computer so that we go into the procedure knowing exactly what we're going to do," Neginhal said. "There is no guesswork. There are no predictions. With the help of a sculpting device, we set patient-specific boundaries and can remove the damaged surfaces of the knee, balance the joint and position the implant with the highest level of precision."

For patients, that means less pain, a shorter recovery and a quicker return to life as normal. NAVIO does not require a CT scan, which allows patients to receive the benefits of robotic guidance without the cost, hassle and radiation exposure of CT scans.

For younger patients and those who lead active lives, robot-assisted anterior cruciate ligament (ACL)-preserving joint replacement surgery helps them return to the things they love most. Neginhal pioneered the robotic technique for bicruciate-retaining total knee replacement. He performs these surgeries using the NAVIO Journey™ II XR system, one of the only total knee designs that allows retention of the ACL, which offers better knee movement and stability.

"ACL-retaining knee replacement and partial knee replacement are the very reasons I got into robotic surgery," Neginhal said. "We were able to perform the first ACL-retaining knee replacement in the world using this system.

Our patients are back to playing golf, playing tennis and hiking. They're not sitting on the sidelines. They are able to do these activities much more naturally than they would with a traditional knee replacement."

Joint replacement is a field of medicine that has advanced tremendously in recent years, particularly in the area of knee replacement, where mimicking the natural knee as closely as possible has been shown to improve outcomes. At SMMC, fully customized joint replacements follow the unique shape, contour and movement of each patient's knee or hip.

"Joint replacement surgery has been around for decades, and in that time we've been improving it constantly — but nature has been at this for millions of years," Neginhal said. "Nature has produced a masterpiece hip and knee. And no two joints look identical, even though they may be the same size. So to claim that standard 'off-the-shelf' implants are going to match millions of people in both size and shape is simply incorrect."

The SMMC joint replacement team is also highly trained in *Conformis*® custom joint replacement. Rather than altering a patient's knee to fit a standard prosthesis, the *Conformis* system does the opposite, designing a custom prosthesis to fit the patient's knee. A CT scan is used to create a 3-D model of the knee, and then the implant and even the surgical tools for the procedure are designed and manufactured specifically for that patient. This eliminates sizing and positioning compromises that are common with traditional implants, as well as the wobbly, loose or restricted feeling a patient may experience after a traditional surgery.

"With a custom knee, there's a quicker recovery and greater range of motion," said Neginhal, who helped write the technique for *Conformis* custom surgery and design the modification of the custom total knee implant. "The best statement I hear is 'I forget I've had my knee replaced' after a very short duration of time. A forgotten surgery is the ultimate goal."

When preparing for joint replacement surgery, Neginhal



Vivek Neginhal, MD, is an orthopedic surgeon and director of the St. Mary's Regional Joint Replacement Center. He performs robot-assisted surgery using the NAVIO™ surgical system.

and his team review options with patients to help them choose the procedure that is best suited for them, whether that is total or partial joint replacement, robotic-assisted surgery, ACL-preserving surgery, custom knee replacement, custom hip replacement or anterior hip replacement.

"It's rewarding to see patients' lives change, sometimes overnight," Neginhal said. "Mobility is the essence of life. When mobility stagnates, other health problems begin to

develop. It's not just about eliminating pain. It's about medical comorbidities and quality of life. We are extremely proud to say we offer all of the latest technologies under one roof, and we are able to offer this right here in the Tri-State area." ■

For more information regarding joint replacement at St. Mary's, call 304.526.1311.



# What's Cooking?

Huntington's Kitchen works to improve health and wellness both now and in the future

Most people know the importance of a healthy diet. But where the rubber meets the road — or the spatula meets the skillet — is where it counts.

Enter Huntington's Kitchen, a community kitchen where hands-on nutrition education has touched thousands of lives throughout the Tri-State. Led by Manager and Chef Marty Emerson, the kitchen teaches healthy cooking using fresh, nutrient-dense, easy-to-find ingredients. Now, thanks to ongoing partnerships with Cabell Huntington Hospital (CHH) Marshall University and the Joan C. Edwards School of Medicine, the kitchen's reach is expanding even further.

In 2016, Marshall relocated its dietetics department to the Huntington's Kitchen building and, since then, faculty and students have worked with Chef Emerson to offer on-site cooking classes and demonstrations to the community. It's hands-on education that is improving lives throughout the region.

"It's a phenomenal opportunity for our students, not only to be able to learn on the kitchen's state-of-the-art equipment, but also to be able to work directly with the community," said Kelli Williams, PhD, RD, LD, chair, Marshall University Department of Dietetics. "Our students are teaching people that, number one, healthy cooking is doable, and, number two, you don't have to spend a lot of money on it. It's something a typical family can do. They're showing people that what we put into our bodies matters."

But the impact of Huntington's Kitchen is only just beginning, she said. "We're just scratching the surface of what we can do for our community in the way of nutrition education," she said. "There are a lot of different players involved who all share the same overall goal for our community."

That includes N. Andrew Vaughan, MD, MBA, cardiologist at CHH and assistant professor in the Department of Cardiology at the Marshall University Joan C. Edwards School of Medicine. A longtime supporter of Huntington's

Kitchen, Vaughan has led several of the kitchen's "Dining with a Doc" events, during which guest physicians share their knowledge on a particular health topic, followed by a hands-on cooking demonstration of a healthy meal attendees can make at home.

Vaughan has spent his career promoting the importance of healthy eating for cardiovascular health, but his focus has broadened in recent years. Today, Vaughan is working to change the way physicians are trained so that the entire medical community can begin to have more meaningful conversations with patients about food and health.

"Unfortunately, teaching the next generation of doctors about how to converse with patients about their diet hasn't always been a priority in the medical field," said Vaughan, a certified culinary medicine specialist (CCMS). "They aren't being trained in how to sit and talk with a patient about real food. That's what we're changing here."

Through a partnership with the

Marshall University Department of Dietetics and Huntington's Kitchen, medical students at the Joan C. Edwards School of Medicine will soon have the opportunity to participate in a nutrition education course, where they'll learn about the nutritional aspect of caring for patients, including how to teach patients to read ingredient labels, craft recipes using nutrient-dense foods and make the small steps necessary to reach a healthier place in their diet.

Eventually the course will be expanded to a full curriculum — a groundbreaking shift in health care.

"High-quality nutrition care goes hand-in-hand with high-quality medical care," Vaughan said. "We're not training doctors to be dietitians. We're training them to be able to effectively talk with their patients about their diet. At the end of the day, it's about getting to the root of a patient's disease."

Vaughan is working closely with Chef Emerson, Williams and other members of the dietetics department to develop the curriculum and develop new ideas for further collaboration. "Too often in education we stay in our own circles without interacting with others, but interprofessional education, particularly in nutrition, is incredibly valuable," Vaughan said. "We're going to see a new paradigm in nutrition education at Marshall University and the School of Medicine, and Huntington's Kitchen is at the epicenter of that."

Earlier this year, in recognition of its innovative efforts to improve health both now and in the future, Huntington's Kitchen was unanimously accepted into the

prestigious Teaching Kitchen Collaborative, a network of teaching kitchens that exists to shape strategy and research on best practices for lifestyle transformation.

"Being a part of this network will allow us, as a medical community, to learn and share best practices with some of the leading organizations in the world dedicated to culinary literacy," Vaughan said.

The honor places Huntington's Kitchen among prestigious teaching kitchens like the Culinary Institute of America in New York, Princeton University in New Jersey, Barilla and Barilla Center for Food & Nutrition in Italy and the Cleveland Clinic in Ohio.

"We are excited to be a part of this network," Chef Emerson said. "Our mission is to help prevent and reduce diet-related disease through education and healthy cooking. This will support our mission and give us resources and best practices to share with the community."

"It's a wonderful opportunity and privilege to be recognized for our collaborative efforts and work related to community nutrition," Williams said. "Through the Teaching Kitchen Collaborative, we have the opportunity

to strengthen the impact of community nutrition programs throughout the country."

She said the expanded mission of Huntington's Kitchen corresponds with the dietetics department's other community outreach efforts, including a grant-funded program that focuses on nutrition education in local schools and the Marshall Food Pantry, which provides those in need with nutrient-dense, healthy foods and education on ways to eat healthy on a budget. She said a truly collaborative effort is taking shape to improve health and wellness throughout the region.

"There are a lot of people who have the best interest of the community at heart, who are interested in teaching people how to eat healthier and who recognize that making better food choices can improve the health of our community and beyond," she said. "Everybody is bringing a unique set of talents and abilities to this, and at the hub of it is Huntington's Kitchen." ■

For more information about upcoming classes, events and other opportunities at Huntington's Kitchen, call 304.522.0887 or visit [huntingtons-kitchen.org](http://huntingtons-kitchen.org).

## PEPPERONI KALE

- 1 Tbsp olive oil
- 8oz pepperoni, diced
- 1 onion, diced
- 2 cloves of garlic, diced
- 8 cups chopped kale
- 1/4 cup boiling water
- salt and pepper
- 1 15oz can of white beans, drained (optional)

Add oil & pepperoni to pan on medium heat. Saute until pepperoni are crispy & oil has a nice red color. Use a slotted spoon to remove pepperoni from pan, leaving behind the grease. Increase heat to medium high & add onion. Saute 3-5 minutes, then add garlic & cook for 1 minute. Add kale & toss well to coat in grease. Add boiled water & let kale lightly wilt. Once water has evaporated, season kale generously with salt and pepper. Stir in pepperoni & beans. Enjoy.



**FOR THE KIDS**

**Hoops Family Children’s Hospital receives \$500,000 from Mylan Foundation for Neonatal Therapeutic Unit upgrades and MOMS Program Enhancements**

The Neonatal Therapeutic Unit (NTU) at the Hoops Family Children’s Hospital (HFCH) will soon get a makeover, providing a more welcoming, enlarged space for parents and families, as well as support for enhanced programs, thanks to a \$500,000 grant from the Mylan Charitable Foundation.

The NTU is the first of its kind in the state of West Virginia and one of the first in the United States to treat newborns prenatally exposed to substances causing symptoms of withdrawal, a condition called Neonatal Abstinence Syndrome (NAS). In this unit, the babies benefit most from the quiet, supportive hospital setting. Babies with severe symptoms may need treatment with medications while those with milder symptoms may only need therapeutic handling. The doctor may prescribe the infant a medication similar to the one the mother used during pregnancy and slowly decrease the dose over time, which helps wean the baby off the medication and relieve withdrawal symptoms.

Leadership from Mylan, a global pharmaceutical company committed to setting new standards in health care, recently spent time touring the HFCH, speaking to mothers and learning about the programs committed to helping newborns with NAS, and their families, through the recovery process.

“The purpose of this grant is to provide for the complete renovation



(TOP) In January, Cabell Huntington Hospital leadership, NTU staff and Mylan leaders pose for a group picture after touring the NTU. (RIGHT) Leadership from Mylan, a global pharmaceutical company committed to setting new standards in health care, toured the Neonatal Therapeutic Unit at Cabell Huntington Hospital and viewed renderings of the plans to upgrade the unit.

of the Neonatal Therapeutic Unit,” said Bradley Burke, vice president of the Cabell Huntington Hospital Foundation, “The funds will also support the Maternal Opioid Medical Support (MOMS) Program that provides comprehensive substance disorder treatment services and promotes the bonding between mother and baby.”

Plans for the grant include:

- A complete remodel of the NTU to provide a warm and welcoming environment in a low-light, low-noise area/space
- Additional space to allow mothers the ability to room-in with their infants to encourage bonding and motivate mothers and other family members to follow a path of recovery through MOMS or other suitable programs
- Increased educational opportunities, such as breastfeeding

and parenting classes

- Increased access to maternal treatment services and community support.

“To provide the babies with the best possible care and opportunity for recovery, NTU staff and physicians involve the mother, father and extended family in forming healthy habits that will continue beyond the hospital stay,” said Jessica Auffant, nurse manager of the NTU and MOMS program. “This grant will help us provide more resources and continue to improve our processes to aid our families to live healthier lives. We are so very grateful to Mylan for helping us provide this much needed care to our community.” ■

For more information about the Neonatal Therapeutic Unit or the MOMS program, visit [www.hoopschildrens.org](http://www.hoopschildrens.org).

**DONOR SPOTLIGHT: CONNIE FREEMAN**

Connie Freeman never stops recruiting. As the president of the Auxiliary to St. Mary’s Medical Center (SMMC), Freeman is always encouraging people to join her in volunteering at the hospital. In fact, she always carries cards in her pocket to give to people of retirement age to share information about hours and requirements.

“Everyone should volunteer,” Freeman said. “We have a good time.”

Freeman became a volunteer at SMMC almost 10 years ago. In addition to her work in the Volunteer Services office at St. Mary’s and serving as Auxiliary president, Freeman is also the district counselor for the Southern Region for the Auxiliary of the West Virginia Hospital Association (AWVHA) and next year will become the organization’s vice president.

“I love volunteering,” Freeman said. “It’s the most rewarding time you have.”

But volunteering is not the only way Freeman gives back

to St. Mary’s. She is also a regular donor to the SMMC Foundation and, because she is at the medical center on a regular basis, she is able to see the results of her giving. “It’s important to give back and I have always given to something that is local and something I can see,” Freeman said.

In addition to The Foundation being local, Freeman is also a supporter because she considers SMMC her hospital. “I have never been to another hospital,” she said. “My child was born here, I’ve had surgeries here. This is my hospital.”

Freeman said she isn’t able to give much, but she knows that no gift is too small since giving encourages others to get involved. “There is always someone in need, so I am honored to be able to help,” she said. ■



For more information about St. Mary’s Volunteer Services, call 304.526.1400. For more information about the SMMC Foundation, visit [www.st-marysfoundation.org](http://www.st-marysfoundation.org).



**RAISE THE ROOF AND RAISE SOME CASH**

To support St. Mary’s Medical Center during the COVID-19 pandemic, 8-year-old Austin Lucas, a second grader at Our Lady of Fatima Parish School, and 8-year-old Maddox Early, a second grader at Barbourville Elementary, staged a neighborhood concert to perform some of their original songs. The talented duo raised \$65 for the SMMC Foundation.

# MOUNTAIN teleHEALTH

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**If you have questions,  
please call 304.526.2074**

