Patty’s “Positive” Surgery Experience

Your Safety Is Our Priority!

Taking Care of Your Mental Health

Fighting COVID-19 with Convalescent Plasma

MISSION: YOU

Positive Milk options explained
Primary care options
Long-term acute care
Irregular heart beats

FALL 2020
CONFIDENCE

If you’re avoiding medical care because of COVID-19, you need to know that Mission Health remains safe.

We go beyond CDC guidelines. Everyone who walks in the door gets screened and gets a mask. With distancing, cleaning and separate areas for COVID-19 patients, we are keeping you and your family safe.

If you need surgery, scans or any other procedure – please don’t postpone your care.
Fall 2020

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Mission Health 509 Biltmore Ave. / Asheville, NC 28801 / 828-213-1111 / missionhealth.org

Write us
My Healthy Life magazine
Mission Health/Marketing and Communications
509 Biltmore Avenue
Asheville, NC 28801-9824

facebook.com/missionhealthnc
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@misionhealthNC
missionhealth.org/magazine
MyHealthyLifeMagazine@msj.org
missionhealth.org/podcast
Surgery at Mission Health Is Safe

We know that there are people who have put off surgery because of COVID-19 and aren’t sure when it’s safe to come in. The time is now. Mission Health's facilities are safe. If you need treatment, please call your doctor today. We are here and ready to treat you.

Putting off surgery can make conditions worse and increase the likelihood of complications. Things can become more expensive, more difficult and more dangerous.

Mission Health has been working hard to put infection prevention measures in place so we can move forward with scheduling and procedures while at the same time keeping our staff and patients safe from COVID-19.

For the most current information about COVID-19 around Mission Health, our regional hospitals and our local physician practices, and the most current visitor restrictions, visit missionhealth.org/COVID-19.

Happy “Labor” Day!

At Mission Health, “Labor” Day is more than a holiday we celebrate each September. In fact, mothers “labor” to bring their children into the world more than 4,000 times at our hospitals every year, more than any other birthing hospital in our region. It’s also why more doctors deliver babies at Mission than anywhere else in western North Carolina.

Mission Health offers two conveniently located labor and delivery hospitals, Mission Hospital in Asheville and Mission Hospital McDowell in Marion. The birthing hospitals at Mission Health offer supportive care for patients who desire minimal intervention and the safety of a hospital setting.

We also offer the most critical care when your health or the health of your baby is at stake. The Mission Hospital Neonatal Intensive Care Unit (NICU) in Asheville is western North Carolina’s only Level III NICU, admitting more than 1,000 patients annually and offering advanced care to high-need newborns with genetic and respiratory diagnoses, surgical needs and infections, as well as premature babies.

Having a baby? To learn more about the maternity services at Mission Hospital, visit missionhealth.org/baby.

Has Your Health Coverage Been Impacted?

For many, the financial impact of the pandemic may be contributing to hesitation in seeking care, especially for those who have lost their job or are experiencing reduced income. We understand that navigating the vast landscape of health insurance without guidance can be confusing and time consuming. That is why we created a free resource to help our patients navigate some of these challenges.

We now offer free, personalized guidance on health coverage options from our experienced, in-house advisors.

After calling our dedicated phone line and answering some initial screening prompts, you will be routed to one of our specialists. This experienced advisor will ask questions, listen to you, and talk through your options for health coverage. Your advisor will help work up potential coverage options specific to your personal situation, in complete confidence. We have helped connect many people who have recently lost their job or been furloughed with coverage options.

We are not representing any other company or selling insurance plans, and there is no cost for this service.

If you or someone you know could benefit from insurance coverage option assistance, call 833-541-5757, 8 am to 6 pm, Monday through Friday.
Virtual Home Health Services

For patients who are aging, ill or recovering from an illness or an injury, CarePartners Home Health Services offers the care you need in the comfort of your own home from nurses, social workers, and physical, occupational and speech-language therapists. We can also care for patients in an assisted living facility, independent living apartment or family care home. Telehealth and telewound services allow Home Health team members to check in frequently with patients and monitor them. “With COVID-19, we’re using telemonitoring or telehealth for hundreds of patients. Telehealth has been very helpful in many cases,” said Cathleen Adams, CNO and Executive Director for CarePartners. “The COVID-19 crisis has brought this technology to the forefront. This is a powerful tool for healthcare use.” Headquartered in Asheville, CarePartners Home Health is available in Buncombe, Haywood, Henderson, Jackson, Macon, Madison, McDowell, Mitchell, Transylvania and Yancey counties. CarePartners Home Health is certified by The Joint Commission.

To learn more about CarePartners Home Health, visit carepartners.org.

Halloween Safety

Whether you’re passing out candy or walking with trick-or-treaters, keep social distancing in mind, wear a mask over your nose and mouth, and wash your hands often. Follow these additional tips to have a happy Halloween:

- Adults should supervise pumpkin carving, and use a pumpkin carving kit to avoid injury. Young children should scoop out pumpkin seeds and decorate the pumpkin.
- Choose face paint and makeup, instead of masks that obstruct a child’s vision.
- Avoid prop-like swords and canes.
- Add reflective tape to costumes.
- Carry items that glow in the dark, like a glowing necklace or wristband, or a flashlight.
- Make sure your phone is charged in case you need to make an emergency call.
- Wear comfortable shoes that fit.
- Cross the street at corners, using traffic signals and crosswalks. Look left, right and left again before crossing.
- Examine all treats for choking hazards and tampering before eating them.

Mission Children’s Hospital offers inpatient, outpatient and outreach services. To learn more about the specialties we offer or to find a pediatrician near you, visit missionchildrens.org.

More Than 1,000 Units of Blood and 200 Units of Platelets

In a typical month, that is how much The Blood Connection (TBC) distributes to Mission Health hospitals. Donating blood with TBC is a way for neighbors to help neighbors in the Asheville area. As the blood provider for Mission Health, blood products collected from TBC donors are used to help save lives at local hospitals in western North Carolina. When you donate with TBC, your blood donation is used locally for treatments, traumas and other vital procedures. To maintain an adequate blood supply in the Carolinas, TBC needs 700 donations per day. “The Blood Connection is proud to serve Mission Health and the western North Carolina community,” said Heather Moulder, Director of Marketing and Public Relations for The Blood Connection. “We can’t do what we do without our hospital partners. They are the avenue into our communities, coming alongside us to support those who rely on life-saving blood products.” The Blood Connection has donation centers in Arden and Hendersonville. Donation mobiles are also in the community every day.

To find a TBC location to donate near you, visit thebloodconnection.org.

Get your health news now!

Subscribe to Mission Health Blog to keep current with health and wellness tips from your local providers. Every week, we’ll deliver our top three posts right to your email. Subscribe today at blog.missionhealth.org.
Who would have thought that a trip to the doctor’s office would require safety precautions? Mission Health primary care providers across western North Carolina now offer several options to meet your healthcare needs and support your safety during the COVID-19 pandemic.

See You on the Computer
Virtual, or telehealth, visits and in-office care are offered by most primary care providers. “Patients may use a smartphone or computer with a camera to have a virtual visit,” said Matthew Buchanan, Director of Operations for the Physician Services Group. “If the patient doesn’t have either of these devices, a phone call visit can be scheduled.”

Most insurances provide at least some coverage for telehealth visits. Patients should check with their primary care office for cost and with their insurance provider to get details for their situation.

“We plan to offer telehealth visits into the future, well past the COVID-19 pandemic,” said Buchanan. “We hope to see some of the telehealth waivers become permanent with expanded coverage, as our goal is to see patients in the way they want and need to be seen.”

Going to the Office
When office visits are appropriate, staff and care providers take extra precautions to protect patients. “We have stringent procedures to ensure patients are safe,” said Buchanan. “We appropriately limit traffic within the practice office. We clean and sanitize all patient waiting rooms, exam rooms and other care areas.”

When patients and any visitors enter the practice, staff use a questionnaire to screen for potential COVID-19 symptoms. When appropriate, they are given masks.

Staff wear masks. Appropriate hand-hygiene options are available. Both alcohol-based hand sanitizer and hand soap are provided for patients and staff.

Walk-In Care with Mission My Care Now
With five locations available in Biltmore Park, Haywood, McDowell, Franklin and Spruce Pine, Mission My Care Now offers the convenience of walk-in, non-emergency daytime, after-hours and weekend care. Conditions treated include:
- Allergies and asthma
- Anxiety and depression
- Stabilizing chronic diseases, such as diabetes and hypertension
- Colds and flu
- Flu shots
- Headaches
- Minor injuries
- Muscle and joint pain
- Sinus infections
- Stomach pain
- Urinary tract infections

To learn more, visit missionhealth.org/my-care-now.
Q. What attracted you to medicine?
A. While studying health education at the University of Delaware, a college sports injury ended my life’s dream of becoming an NFL player. One of my coaches saw an opportunity for me to work as a trainer for the Philadelphia Phillies, and over time, I decided to become a physician.

Q. What’s your education?
A. I’m a doctor of osteopathic medicine. I earned my health education degree from the University of Delaware and medical degree from the Philadelphia College of Osteopathic Medicine in Philadelphia, Pennsylvania. I’m board certified in family medicine by the American Board of Osteopathic Family Physicians and focus on family practice, sports medicine, chronic disease management, pain management and mental health.

Q. What’s the difference between a DO and an MD?
A. All doctors go to medical school, take exams to be licensed and become board certified in their specialty. The biggest difference between MDs and DOs is their training and philosophy of treatment. Osteopaths focus on the whole person, ensuring both structure and function are aligned. We learn about osteopathic treatments, including manipulations to correct the structure so blood flow and function are better. We are also trained in community settings by qualified trainers rather than in hospital systems.

Q. What’s your passion?
A. My passion is getting to know my patients to better understand their needs. My motto is, “We’re going to take care of you.” I am also interested in mental well-being, because it’s not really talked about, and yet, mental wellness is such a big part of overall health.

Q. What attracted you to the Cashiers community?
A. Cashiers is a community of people from diverse backgrounds. I want to bring evidence-based practices to improve the healthcare of this area. The team I’m working with is dedicated, and we’re all focused on improving the health of the individuals who live here.

D. Todd Detar, DO, practices at Mission Community Primary Care – Cashiers, located at 57 White Owl Lane in Cashiers. You can reach his practice at 828-743-2491.
The Scoop: Milk

"Got milk?" isn’t a simple question anymore, as plant-based milks have flooded both the food market and the supermarket. More people have become interested in reducing their intake of animal products for nutritional and ethical reasons, while others avoid dairy milk because they’re lactose-intolerant.

Cow’s milk
This milk weighs in with the most protein — 8 grams per 8-ounce cup — and is relatively high in fat, but 2 percent and skim are good alternatives if cutting calories is a priority. Eight ounces of whole milk contain about 149 calories, 7.7 grams of fat and 28 percent of the recommended amount of daily calcium.

Soy milk
Soy milk comes closest to dairy milk’s nutritional profile, but has 60 fewer calories per cup, less than half the fat and just one less gram of protein. Calcium is added to soy milk, but soy can inhibit its absorption. There is also some controversy surrounding processed soy products because studies have found the isoflavones contained in it can affect the hormonal system.

Coconut milk
The faux milk with the highest saturated fat content, coconut milk is made from the water and white flesh of coconuts. A more liquid form is sold in cartons in the dairy aisle, but a thicker canned version is often used for sauces and in baking.

The Scoop: Milk

Mediterranean Tuna Wrap

<table>
<thead>
<tr>
<th>ingredients</th>
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<tbody>
<tr>
<td>5 oz cans albacore tuna</td>
<td>lemon zest</td>
</tr>
<tr>
<td>1 tsp lemon zest</td>
<td>marinated artichoke hearts, drained and chopped</td>
</tr>
<tr>
<td>½ cup</td>
<td>roasted red peppers (from a jar) sliced into strips</td>
</tr>
<tr>
<td>2</td>
<td>Kalamata olives, sliced</td>
</tr>
<tr>
<td>¼ cup</td>
<td>prepared hummus</td>
</tr>
<tr>
<td>4</td>
<td>whole grain wraps</td>
</tr>
<tr>
<td>2 cups</td>
<td>baby spinach</td>
</tr>
<tr>
<td>1 Tbsp</td>
<td>lemon juice</td>
</tr>
<tr>
<td>½ tsp</td>
<td>Dijon mustard</td>
</tr>
<tr>
<td>4 Tbsp</td>
<td>light olive oil mayo</td>
</tr>
<tr>
<td>¼ tsp</td>
<td>oregano</td>
</tr>
<tr>
<td>¼ tsp</td>
<td>basil</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>preparation</th>
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<tbody>
<tr>
<td>Drain tuna and place in medium-size bowl, add lemon zest and set aside. Whisk together lemon juice, Dijon, mayo and basil. Pour over tuna and stir to combine. Lay out wraps and spread 1 Tbsp hummus on each piece. Top with spinach, tuna mixture, roasted peppers, artichokes, olives and red onion.</td>
<td></td>
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</tbody>
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<table>
<thead>
<tr>
<th>4 servings</th>
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<tbody>
<tr>
<td>Nutritional information (per 1 wrap): 373 calories, 16.9 g fat, 38.2 g carbohydrates, 4.8 g fiber; 3.7 g sugar, 21 g protein</td>
<td></td>
</tr>
</tbody>
</table>
New Orleans Red Beans

**ingredients**
- 1 lb dry red beans
- 2 qt water
- 1½ cups onion, chopped
- 1 cup celery, chopped
- 4 bay leaves
- 1 cup green peppers, chopped
- 3 Tbsp garlic, chopped
- 3 Tbsp parsley, chopped
- 2 tsp dried thyme, crushed
- 1 tsp salt
- 1 tsp black pepper

**preparation**
Pick through beans to remove bad ones. Rinse beans thoroughly. In a large pot, combine beans, water, onion, celery and bay leaves. Bring to boil. Reduce heat, cover and cook over low heat for about 1½ hours or until beans are tender. Stir. Mash beans against side of pan.

Add green pepper, garlic, parsley, thyme, salt and black pepper. Cook uncovered over low heat until creamy, about 30 minutes. Remove bay leaves. Serve with hot cooked brown rice, if desired.

**8 servings** (serving size 1¼ cup)

Nutritional information (per serving): 171 calories, less than 1 g total fat, less than 1 g saturated fat, 0 mg cholesterol, 285 mg sodium, 7 g total fiber, 10 g protein, 32 g carbohydrates, 665 mg potassium

*Courtesy the National Heart, Lung and Blood Institute*

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Apple Cider Glazed Brussels Sprouts

**ingredients**
- 1 bag Brussels sprouts, trimmed and halved
- ½ cup apple cider
- 1 Tbsp olive oil
- salt and pepper to taste

**preparation**
Preheat oven to 425 degrees F. Toss Brussels sprouts with olive oil (or coat with nonstick spray). Add salt and pepper to taste. Coat baking sheet with nonstick spray and add Brussels sprouts with cut side facing down. Roast for 20-25 minutes, tossing halfway through.

While Brussels sprouts are roasting, heat apple cider in a small pot over medium heat. Simmer until the liquid reduces to a more glaze-like consistency (coats the back of a spoon). Remove from heat and set aside.

When Brussels sprouts are finished cooking, add to a large bowl and toss with apple cider glaze.

**4 servings**

Nutritional information: 85 calories, 3.9 g fat, 9.8 g carbohydrates, 3 g fiber, 5.8 g sugar, 2 g protein

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Almond milk
The most popular plant-derived milk in the country, almond milk is made from almonds or almond butter and water. A cup has 60 calories and nearly half the day’s recommended amount of calcium. It’s also high in vitamin E, so it offers a boost for the skin.

Rice milk
Rice milk has three times the carbohydrates than all the other milk alternatives. Considered a high glycemic food, rice milk raises blood sugar levels quickly, so those living with diabetes should be mindful of this when consuming it.

Oat milk
Oat milk is made from soaked, blended and strained oats, and is enriched with B vitamins. It’s high in fiber as compared to both cow’s milk and other milk alternatives, and is a good choice for those who are sensitive or allergic to soy, nuts or lactose.
Suffering with COVID-19

In mid-May 2020, Lambert started feeling fatigued all of the sudden and called her primary care physician. She also had a negative COVID-19 test from a drive-through test site in Cherokee. Her fatigue increased, and she started running a fever and having gastrointestinal issues. She went to the emergency department in Cherokee, and was admitted to the hospital for pneumonia. While in the hospital she tested negative again for COVID-19. Lambert received antibiotics, but she continued to get worse.

On her birthday, she was moved to Mission Hospital in Asheville and put in the Oncology Unit, because she has also been fighting ovarian cancer for more than seven years. “That’s another factor in this whole mess,” Lambert said. “I was on medication. And, that was probably the reason my white count was so low.” She also tested positive for COVID-19.

She was moved into the Pulmonary Unit and given oxygen because she still wasn’t improving. “I was trying to understand why they were giving me this high-flow oxygen. I didn’t even know that my lungs were that bad. It was literally a nightmare,” she said. “And, at one point I thought that I was going to die. I came to the conclusion that something had to change pretty quick or I wasn’t going to make it. I was just a step away from being put on a ventilator.”

After being in the hospital for a week with no improvement, Lambert’s doctor said she could get convalescent plasma, which was considered a trial procedure. “I knew that they were seeming to have some success with plasma, and that treatment was limited and iffy,” said Lambert. “I thought it sounded like my best bet. I signed the papers when they handed them to me. I wasn’t afraid to take it.”
Donating Plasma

“If you’ve received it, and it’s been lifesaving for you, after four months, you can also donate to pay it back. It’s no different than giving blood,” said Dr. Jauch. “For every unit of plasma you donate, and you can donate more than once, you can potentially treat three people with COVID-19.” The donated plasma is available to all hospitals across western North Carolina and the region.

If you have recovered from COVID-19 and are interested in donating plasma, you must have had a previous, documented positive COVID-19 test and you must not have had any symptoms of a COVID infection for 28 days. Locally, you can donate at:

- The Blood Connection – Arden, 225 Airport Road, Arden, 828-585-8060
- The Blood Connection – Hendersonville, 825 Spartanburg Highway, Hendersonville, 828-233-5301
- The American Red Cross – Asheville, 100 Edgewood Road, Asheville, 800-733-2767

Convalescent Plasma

“The convalescent plasma concept has been around for a hundred years,” said Edward Jauch, MD, MS, Chief of System Research at Mission Health’s Research Institute. “It was discovered in the late 1800s that there is something about blood from people who have recovered from an illness that protects them and other people who may get that blood from that particular illness.”

Scientifically, your blood has many components. If you remove the red and white blood cells, and platelets from your blood, you are left with the liquid phase, which is called plasma. It’s the plasma that contains the antibodies that the body makes to fight specific infections. “It is these passively transferred antibodies provided in the convalescent plasma from a recovered patient that the body uses while it gears up its own defense system against a foreign invader,” said Dr. Jauch.

Over the years, convalescent plasma has been used to treat people who have diphtheria, Spanish flu, measles, mumps, influenza, SARS-CoV-1, H1N1, MERS and Ebola. Now, it’s being used with patients who have COVID-19.

“Convalescent plasma isn’t a cure. Since your body didn’t make it, it only buys you time until your body can produce your own antibodies to attack the first wave of the virus on your body,” said Dr. Jauch. “It’s a way to kind of blunt the original infection while your body has a chance to get caught up.”

Right now at Mission Health, convalescent plasma is only for patients who have moderate to severe COVID-19-related problems. “It is for people who are or have a high likelihood that they’re going to get really sick. So, we want to prevent that from happening,” said Dr. Jauch.

Getting Better

After completing the paperwork, the plasma was administered to Lambert two days later, once a donor match was found. And, it didn’t take long before she could feel its effect.

“Within 24 hours, I started feeling better. It was just a little bit, but I could tell the difference,” said Lambert. “My nausea started to let up. The diarrhea was calming down. Within a couple of days, the fever was gone, and it never came back.”

Forty-eight hours after the convalescent plasma, Lambert went from the high-flow oxygen to regular oxygen. “Every day that I would wake up, I felt a little stronger,” she said. “I felt like I wasn’t going to die anymore.”

Mission Health Research Institute

Mission teammates, including Mission Health Research Institute, Infectious Disease, Laboratory Medicine, Pulmonary Medicine and others, have played major roles in bringing convalescent plasma to patients in western North Carolina. Partnering with The Blood Connection, The Red Cross, the research division of HCA Healthcare’s Sarah Cannon Institute and the Mayo Clinic, has allowed for the development of processes to collect the plasma, give it to patients in need and track its effectiveness for future use.

“Our job is to organize and make sure that treating physicians know about its availability and understand the process to obtain and administer it,” said Dr. Jauch. “And we have a fairly well-oiled mechanism. Our partnering physicians know about it and when to give it. We have the process to obtain it as fast as possible from our blood center, The Blood Connection, so the patient can get it in a timely fashion once a matching donation is identified.”

Thank You

At home, Lambert continues to improve. And, she couldn’t be more thankful to those who played a part in her recovery. “I’m really grateful to the person who donated that blood. I feel like it saved my life. I really do,” she said. “I know that’s what turned me around. I wish I could thank them personally.”

“I want to also say that the care I got at Mission was wonderful. I was just so impressed with not just the doctors, but those nurses and the CNAs, everyone who took care of me. They were so compassionate, and they had to put all that garbage on, and they didn’t act like they were scared to take care of me,” said Lambert. “And, that meant a lot, because I was a nurse in a hospital for a long time too, and I know how things can be sometimes. I can’t say enough good things about how I was treated.”

missionhealth.org
A Positive Experience

Patty McBride’s surgery during COVID-19 beat all her expectations

By Deanna Thompson
After working as a healthcare consultant for years, Patty McBride said she is not an easy patient. Coming into a facility, she said, “My eyes are checking everything – the building, how staff interacts.” So, after making the decision to have surgery at Mission Hospital during the COVID-19 pandemic, she was on high alert.

Extra Caring and Concern
McBride, an Asheville resident, had been cleared to have surgery shortly before elective procedures were canceled due to the pandemic. Then, in early May, she got a call that elective surgeries were resuming and asking if she would like to schedule her procedure with general surgeon W. Alan Bradshaw, MD, a general surgeon with Mission Surgery. From her first visit to the surgeon’s office through her surgery, hospitalization and discharge, McBride said every staff member and doctor she encountered treated her in a safe, professional and compassionate manner. COVID-19 procedures included social distancing in waiting areas. Workers had been screened and were wearing masks, and patients were not permitted to have a partner with them beyond registration. “I tell patients they are more at risk going around town than going in the hospital,” said Dr. Bradshaw.

Staff not only explained the many special precautions they were taking due to the pandemic, but also provided warm reassurance. “They just couldn’t have been more caring and more concerned for my comfort and my anxiety,” said McBride.

Providing a Hand to Hold
One of the biggest changes due to COVID-19 was that McBride’s husband could not be with her before and after surgery. But in each area she visited in the hospital, “I think the staff went overboard in the most positive sense since my husband couldn’t be there,” she said.

For example, as she waited for surgery, nurses checked on her often. In the operating room, her nurse was by McBride’s side. “She made sure I saw her eyes and we connected,” said McBride. “When they were starting to put me under anesthesia, she wouldn’t let go of my hand.”

Before surgery, Dr. Bradshaw spent time with her discussing the procedure, which was reassuring. And, both during and after surgery, he and the staff gave phone updates to her husband, who was waiting at home. “That was a big comfort to him,” said McBride.

One of McBride’s greatest worries was the anesthesia, because it was critical that she not experience vomiting after her type of surgery. “This is the first surgery in my life where I have woken up and did not vomit,” said McBride. “The anesthesiologist and the nurse anesthetist listened to my concerns and made sure that did not happen. That was amazing.”

Don’t Put Off Needed Procedures
If you have delayed surgery due to COVID-19, Dr. Bradshaw suggests scheduling an appointment with your doctor to discuss your options now that elective procedures have resumed. Some problems can worsen without timely treatment, he noted.

Those who move forward with surgery can be reassured that Mission Hospital has extensive COVID-19 safety measures in place. “We have a wonderful staff at Mission that does their best to take care of every patient every day,” said Dr. Bradshaw. “They’re really going out of their way now to make sure patients are having a good experience.”

That culture of caring was obvious to McBride at every step. “I told my husband, ‘How many people did I describe to you that I interfaced with? It was an incredible number.’ And bar none, every single person was professional, efficient, knowledgeable, very compassionate and very caring,” she said. “I have never had such a positive medical experience on every level.” ✨
McDowell has been good for Annette Bryant, especially during some recent difficult times. She was born in Marion, and has lived near the city since 1970. For the more than four decades, she has interviewed community members for a 30-minute public affairs program on radio station WBRM, which she has owned for more than 30 years.

Annette is a Rotarian. She has been on the Marion Business Association Board for many years and served for a time in the North Carolina Legislature. “We’re all really proud of our community in the way we collaborate with each other. We have lots of partnerships, we get along,” she said. “The community is progressive now when it wasn’t 30 years ago. All of us enjoy where we live and working to make it better.”

Caring with Compassion
In May 2019, Annette took her husband, Jason, to the ER at Mission Hospital McDowell. “He couldn’t pronounce his words correctly. He was having weaknesses that he couldn’t control,” said Annette. “They took him straight into the ER. They went into the stroke protocol. And then it was nonstop until they established that he didn’t have a stroke. They couldn’t tell me what had happened. But, it was a precursor to what was to come.”

Even though Annette never found out the cause of her husband’s issues, she felt that the hospital did everything that could be done to help him. “What was so impressive
was when we walked in the front door to the time I told the woman at the desk that I thought my husband was having a stroke, the door into the ER was opened, he was rolled in, and they immediately started working on him. It was impressive the way the stroke protocol came to him,” she said.

Over the next several months, Jason slowly grew weaker. “This was going on so gradually that you don’t notice from one day to the next,” Annette said. “He wasn’t eating as well as he had. He asked me to cancel a doctor’s appointment. That was a big red flag.”

In November, Jason felt bad, but didn’t want to go to the hospital or let Annette call 911. He was unable to control bodily functions and could barely walk. Eventually, Annette and her son called 911.

“They took him straight into the ER and went to work immediately to establish all of the things that they needed to look at. It’s such great service,” said Annette. “The nurse was in and out of the room constantly taking care of him. He made my husband feel like he was part of the process.”

Diagnosed with a heart problem that they couldn’t handle in Marion, Jason was moved to Mission Hospital in Asheville the next day and put into the Cardiac Intensive Care Unit (CICU).

“It was everything you could hope for, although the situation didn’t turn out the way that you wanted it to. And, there was a male nurse named Roby who was just like his best friend, but with a purpose,” said Annette. “Roby took care of him. He conveyed everything to him that was going on. Everything they were going to do and what to expect.”

Roby Phipps, RN, works in the CICU at Mission Hospital in Asheville. “I assist patients and families transitioning from aggressive treatment of such cardiac ailments to palliative care comfort-focused efforts when health maintenance and care are not attainable options,” he said. “This was the Bryants’ circumstance.”

Given the situation, it was the unexpected personal touches, like making coffee, that impressed Annette. “The next morning, Roby told me to be there early because I would have a better chance at seeing the cardiologist,” said Annette. “It was just those personal touches to me that were totally unnecessary that just made the whole atmosphere better than you would expect.”

“Compassion is communicated in every patient care interaction both with verbal and non-verbal communication. Empathy is the most refined form of caring, which is why I treat every patient and visitor like they are my family,” said Roby. “I say yes when I can say yes. I try to make myself available and pleasant to those who come into our department. This helps the family during times of transition.”

After determining that Jason wasn’t a candidate for bypass surgery or a stent, he was moved out of the CICU into a private room. He passed away just before midnight.

“The nurses on duty that night were just so kind,” said Annette. “They stayed back, but were available if we needed them. For the ending that we had, it was a great experience.”

Hospitality at the Hospital

A couple of weeks after Jason’s passing, Annette got into a car accident. “Literally everybody in the county knows about my accident,” said Annette. “It was one of those times when I had too many things on my mind at one time.”

In a hurried state, Annette hadn’t turned off the ignition in her electric Volt and left it in drive. When she leaned in to turn the engine off, the car started slowly rolling down the driveway and trapped Annette behind the door.

“I couldn’t reach over to put the gear in park. It kept rolling a little faster and faster. And, there was nowhere to go, except to run with the car,” said Annette. “And, I was holding on. The street was also on a hill. Luckily, the car slanted across the street and hit a telephone pole, which threw me to the pavement. My injury came from hitting the ground, not being dragged by the car.”

Crowds quickly gathered. Someone took pictures and sent them to the newspaper. The newspaper sent out a breaking news story. “I think the whole county got that breaking news alert. I wasn’t even in the hospital 30 minutes,” said Annette.

EMS was called, and they took Annette to the hospital. Someone came to clean her wounds. The doctor determined that X-rays weren’t needed, and she was sent home.

“The community, we’re small. So many of us know each other,” said Annette. “The EMS was on top of me almost before I could stand up, and they have such a good relationship with the hospital. It’s all seamless. It just flowed from the beginning to the end.”

Professional and Personal

Just before Christmas, Annette’s nephew had a “serious heart attack,” and he was taken to Mission Hospital. Unfortunately, he died the next day. After talking with her family, Annette found out that Roby was also her nephew’s nurse.

“As far as personal motivation and enjoyment, I find strength through faith in God, schedule celebration regularly, stay humble, study as hard as I work, find something to laugh about in every situation, and treat families as the indivisible units that they should be,” said Roby.

“That’s what a small world that we live in here. Both of the guys had had the same nurse, and the same level of care,” said Annette. “I worry sometimes, since I’m known here at the radio station, that maybe I get preferential treatment. But, this guy was on the job, on second shift doing hard manual labor when he had his heart attack. He got the same kind of care that my husband got.”

Mission Hospital McDowell is a member of Mission Health and a community hospital serving Marion and the surrounding mountain communities of McDowell County, and offers comprehensive services, including primary and specialty care. To learn more, visit missionhealth.org/McDowell.
When the world is in turmoil, mental health takes a beating. Loss of control, isolation and stress are key contributors to anxiety and depression. “These cause a chink in our mental health armor,” said Tiffany Bush, a Program Coordinator for the Outpatient Behavioral Health Program who also holds licenses as a clinical mental health counselor and clinical addiction specialist.

“People who don’t normally struggle mentally have been recently,” said Bush. “Uncertainty is affecting mental health, especially with limited social outlets.”

The stigma around mental wellness means watching out for others is more important than ever. Genetics or situational events like trauma or abuse also cause mental issues. “When someone is struggling, it’s hard to say ‘I’m not okay and I need help,’” said Bush.

Red Flags

Bush encourages patients to self evaluate these three areas daily: emotions, connections and physical sensations.

Emotional changes like more crying, anger, or extreme sadness or apathy signal trouble. Changes in your people connections and losing interest in activities show distress. Finally, physical changes like difficulty concentrating, fatigue, decreased appetite, sleeping too much or too little, and significant weight loss mean trouble.

Three red flags for two weeks warrant calling a mental health professional. “Get immediate help if your loved one talks of death or harming himself,” said Bush. “My hope for anyone struggling is that they realize their potential, build on their strengths, and learn to adapt to their individual struggles so they can find their purpose,” said Bush.

New Virtual Services offered by Mission Hospital McDowell

Weekly Group Anxiety/Depression Sessions: Available for people participating in life but feeling depressed or overwhelmed. Participants learn coping skills in one-hour sessions with up to 12 people.

Weekly Individual Sessions: One-hour sessions available to individuals for confidential counseling.

Mental Health and Substance Abuse Intensive Outpatient Program: Available to those with a dual diagnosis offered three times weekly for five to eight weeks.

All virtual sessions are offered through secure and HIPAA-compliant technology.

5 ways to show support in stressful times

- Communicate. Stop by, call or stay in touch.
- Connect. Share time or an activity.
- Don’t try to fix it. The best thing you can do is listen.
- Encourage physical activity.
- Ask how you can help. And then follow up.

For a screening or to learn more about the Behavioral Health Services at Mission Hospital McDowell, call 828-655-2585.

Mission Health is committed to breaking the stigma of mental illness and providing care that focuses on your well-being. To learn more about Mental and Behavioral Health Care services, visit missionhealth.org/bh.

Tiffany Bush is a Program Coordinator for the Outpatient Behavioral Health Program at Mission Hospital McDowell.
Treating an Irregular Heart Beat

Is cardiac ablation right for you?

By Cherry Odom, BSN, RN-BC

People can have abnormal heart rhythms because of either too few or too many heart beats, according to Jason Lappe, MD, electrophysiologist with Asheville Cardiology Associates (ACA). “Patients with slow heart rhythms are often treated with pacemakers,” said Dr. Lappe. “People with fast heart rhythms like atrial fibrillation or supraventricular tachycardia [SVT] can be treated with cardiac ablation.”

What Is Cardiac Ablation?

“Ablation is a tool used to treat several different abnormal heart rhythm issues,” said Dr. Lappe. “Ablation can be performed by heating or freezing the abnormal heart tissue causing these unwanted arrhythmias.”

During the Procedure

Dr. Lappe outlined the procedure done in the specialized electrophysiology (EP) lab. Depending on each ablation, the patient is either given relaxing medication or is completely asleep under general anesthesia. A catheter is inserted through the groin up into the heart. The electrophysiologist uses numerous tools, including electrical measurements made within the heart, sophisticated three-dimensional mapping software, ultrasound and fluoroscopy, to identify where the issue is coming from in order to get rid of the abnormal heart rhythms.

Risks and Benefits

The risk of an ablation procedure are typically low, but can include bleeding at the groin insertion site or injury to the heart or blood vessels. “The benefit is the elimination of abnormal heart rhythms, such as atrial fibrillation, SVT or frequent premature ventricular contractions (PVCs) that can be harmful and bothersome,” said Dr. Lappe.

After Care

“Most patients stay overnight in the hospital to make sure they are comfortable and are well on the path to recovery before being sent home,” Dr. Lappe said. Once at home, restrictions include no exercise or heavy lifting for one week; driving may be allowed after 72 hours or longer.

High Level Care

“Our five specialists at ACA are the only electrophysiologists performing these types of procedures west of Charlotte,” said Dr. Lappe. “We are proud to offer the highest level of care and the full range of electrophysiology procedures for our community.”

Mission Hospital is recognized as a 50 Top Cardiovascular Hospital in the nation with higher inpatient survival rates, fewer complications, lower costs per case and lower readmission rates. For more information about the services at Mission Heart, visit missionhealth.org/heart.
How do you get care quickly, if you or your family member have symptoms of a stroke and distance or mountainous terrain hinders your travel to a large medical center? In western North Carolina, you call 911 to be taken to your local hospital. All hospitals in the Mission Health division have established stroke protocols and standardized care.

**Journey to Acute Stroke Ready Certification**

Blue Ridge Regional Hospital (BRRH) in Spruce Pine is taking their excellence journey a step further by working toward their application for Acute Stroke Ready Hospital certification from The Joint Commission (TJC).

“Becoming an Acute Stroke Ready Hospital will provide awareness to the community of the excellent care that our team is able to provide for stroke patients,” said Megan McKinney, MSN, RN, nurse manager for the emergency department at Blue Ridge Regional Hospital.

Protocols ensure rapid identification of symptoms, CT scans and treatment with proper medications to save lives and limit long-term disabling effects of a stroke. “This certification allows rural hospitals, like us, to demonstrate excellence in stroke care for meeting standards to improve patient outcomes for stroke care,” said McKinney.

**Telestroke**

“Telemedicine, specifically telestroke, allows us to connect patients with the on-call neurologist at Mission Hospital for virtual evaluation,” said McKinney. The neurologist views the CT images and the patient, and recommends treatment.

If indicated, an intravenous thrombolytic clot-busting medicine is started. If interventional treatment is needed for a clot or bleed, the patient is transferred to Mission Hospital’s Comprehensive Stroke Center.

**An Honor to Serve**

“It is an honor for my team to serve the community that we live in,” said McKinney. “We want our community to know we are here for them to provide excellent stroke care.”
Small but Mighty
Asheville Specialty Hospital offers individualized treatment for acutely ill patients
By Cheri Hinshelwood

Patients in western North Carolina needing intensive medical care and more time to heal beyond normal hospital stays are in luck. Asheville Specialty Hospital, the region’s only long-term acute care hospital, cares for complex patients who need more than 25 days to recover.

Care for Complex Situations
“Our patients are severely ill and need a specialized team’s help to transition to the next most appropriate level of care,” said Julie Dikos, MSN, RN, Chief Executive Officer of Asheville Specialty Hospital.

Medically complex adult patients are admitted from acute care hospitals, some as far away as Tennessee. Patients may require weaning from ventilators, intravenous medications or antibiotics, kidney dialysis, extensive rehabilitation, including physical, occupational or speech therapy, and wound-care treatments.

The Asheville Specialty Hospital team includes doctors, nurses, case managers, respiratory therapists, pharmacists and physical, occupational or speech therapists, among others dedicated to exceptional patient care. A low staff-to-patient ratio allows intensive, highly skilled treatment and therapeutic care for patients.

“Being close to family members is another key part of the healing process,” said Dikos. “We’re glad to offer our community this expertise close to home.”

Remarkable Results
The smaller, collaborative setting at Asheville Specialty Hospital creates a patient-centered focus that nets big results. The hospital consistently receives top scores in the nation from accrediting bodies and patients for ventilator weaning, doctor and nurse communications, and overall patient satisfaction.

“It’s our goal to help restore patients’ health to levels they experienced before being admitted to a hospital,” said Dikos. “It’s especially rewarding when patients and their families express their gratitude for the care they received from us.”

Caring for seriously ill patients is meaningful work, especially when they reach their best outcome.

Asheville Specialty Hospital
- Serves more than 300 patients per year
- 34 beds: 25 progressive care and 9 high-observation beds
- Average length of stay: 26 days
- Accredited by The Joint Commission
- Certified by the Centers for Medicare & Medicaid Services
- Specialized team led by board-certified physicians

To learn more about the services available at Asheville Specialty Hospital, call 828-213-5400 or visit missionhealth.org/ASH.

Julie Dikos, MSN, RN, is the Chief Executive Officer of Asheville Specialty Hospital.
Fall is the perfect time for relaxing outside and a welcome relief after sheltering indoors for many months. Whether you’re planning a camping trip or gathering around a backyard firepit, here’s how to do it safely.

Respect the Flame
A majority of trauma injuries in summer months are attributed to recreational fires. “We see burn injuries throughout the year; every season brings different types,” said Katherine Mastriani, MD, Director of Surgical/Critical Care and Associate Trauma Director of Mission Hospital — the region’s only Level II Trauma Center. “In the fall, they’re related to burning leaves, in the winter it’s indoor heaters and in the summer, they’re most often associated with campfires and fire pits.”

Fully Extinguish
While safely enjoying a fire seems easy enough, simple precautions are essential to preventing accidents. A frequent cause of burns comes from fires that aren’t completely extinguished, said Dr. Mastriani. “We see injuries that have occurred when people believed a fire was completely out and it wasn’t.” Whether it’s a child walking over coals that appear to be cool and aren’t, or a beach fire that’s been covered with sand and is still hot beneath — fires that aren’t completely extinguished put others at risk.

To Ice or Not?
If you or a family member sustains a burn, is ice the best first treatment? Not according to Katherine Mastriani, MD, Director of Surgical/Critical Care and Associate Trauma Director of Mission Hospital. To relieve the heat, redness and swelling caused by a burn, the best treatment is cool, not ice-cold, water. Using a cool compress or running a stream of cool water over the burn can provide temporary pain relief — just be sure not to use very cold water, which can cause an extreme temperature change, reduce blood flow and possibly worsen the injury.

Be Patient
Using accelerants such as lighter fluid to start or fuel a fire can also contribute to burn-related injuries. “We’ve seen patients who underestimated an accelerant and unintentionally singed themselves,” said Dr. Mastriani. Accelerants can also increase the risk of someone accidentally burning their airway, she added.

When to Get Help
One of the most important factors to managing a burn is knowing when to see a doctor. “If a burn looks like more than a sunburn, the patient should be seen in the emergency room,” said Dr. Mastriani. “There they will determine if the patient needs to be referred to a burn center.” Burns on the hands, feet, face, genitals and joints also pose special risks and should be assessed by a healthcare provider.
**BEHAVIORAL HEALTH**

**Intensive Outpatient for Women (Trauma Focus)**
*Virtual access available.*
3 groups daily for 3 days a week, 4-8 weeks, 9 am-12 pm
Asheville
For more information, call 828-213-4696

**Intensive Outpatient Program (Co-Ed)**
*Virtual access available.*
3 groups daily for 3 days a week, 4-8 weeks, 9 am-12 pm
Asheville
For more information, call 828-213-4696

**Partial Hospital Program**
*Virtual access available.*
Our most intensive level of care on an outpatient basis. Lunch is provided.
4 groups daily for 5 days a week, 1-3 weeks, 9 am-2 pm
Asheville
For more information, call 828-213-4696

**BLOOD DRIVES**

**Angel Medical Center**
Sep 4, Nov 6, 8 am-2 pm
120 Riverview St., Franklin

**Blue Ridge Regional Hospital**
Sep 28, Nov 30, 11 am-1:30 pm
125 Hospital Dr., Spruce Pine

**CarePartners**
Oct 7, noon-5 pm
68 Sweeten Creek Rd., Asheville

**Highlands-Cashiers Hospital**
Oct 30, 9 am-1 pm
190 Hospital Drive, Highlands

**Mission Health Business Office**
Oct 6, 11 am-3 pm
50 Schenck Pkwy., Asheville

**Mission Hospital**
Oct 15, Dec 17, 7 am-noon and 1-6 pm
501 Biltmore Ave., Asheville

**Mission Hospital McDowell**
Oct 29, Dec 30, noon-5 pm
430 Rankin Dr., Marion

**Transylvania Regional Hospital**
Oct 22, Dec 17, 9 am-2 pm
260 Hospital Dr., Brevard

**SUPPORT**

**Brain Injury Support Network**
1st and 3rd Wednesday of each month, 4-5 pm
CarePartners Rehabilitation Hospital, 68 Sweeten Creek Rd., Seymour Auditorium, Asheville
Contact Karen Keating at 828-337-0208 or karen.keating@bianc.net

**Limb Loss Peer Support or Clinical Consultation**
Coordinated by request. Multiple locations.
Contact CarePartners certified prosthetist as 828-254-3392

**WEIGHT MANAGEMENT**

Mission Weight Management offers free surgical and medical weight-loss classes.
To find out times and days, call 828-213-4100 or visit missionweight.org.

**WOMEN’S HEALTH**

**Childbirth and Pregnancy Classes**
Education opportunities for women and families, including a free orientation for women who plan to give birth at Mission Hospital.
Asheville
For details, visit missionhealth.org/womens
The Healing Power of Poetry

Art as a means to help people recover

By Jerene Broadway

Around tables in the Copestone Behavioral Health Unit at Mission Hospital, patients gather to begin Spirituality Group. I, the chaplain leading the group, tell them that the topic is resilience and that they will be writing poetry. Amidst groans and protests, I encourage them to relax and play with the words and phrases I have provided for them. I suggest they choose some phrases that speak to them and put them in an order that seems right to them.

Soon the group is quiet as they paste bits of paper together into poems they never thought they would be able to create. They read the poems to the group, often quite moved as they share the feelings that have arisen during the exercise — grief, anxiety, despair, but also resilience, gratitude and hope. They express amazement that, with a few scraps of paper that started as other people’s words, they were able to craft meaningful poems of their own.

“Poetry can tell us what human beings are. It can tell us why we stumble and fall and how, miraculously, we can stand up.” — Maya Angelou

Much research is available to demonstrate the power of poetry in helping people recover from trauma and emotional upheaval. A dramatic example of poetry in trauma recovery is depicted in the documentary “The Poetry of Resilience.” It’s about seven poets who survived extreme traumas in such situations as the Holocaust, the bombing of Hiroshima and the genocide in Rwanda. These poets explain that poetry not only helped them survive but provided them an avenue toward resilience. “Artistic creativity,” one said, “is the only thing left to you as a survivor.” Their poetry embodies their loss but also their healing.

Poetry has been demonstrated to help individuals recovering from illness, addiction and bereavement. Additionally, studies show that engaging with poetry contributes to stress reduction — lowering blood pressure, heart rate and muscle tension.

Poet David Whyte reminds us that reading poetry is a way of stopping, of slowing down, of participating in contemplation. It contributes to our sense of mystery, wonder and even transformation. In fact, recent neurological studies have shown that poetry has such an emotional impact on us that it literally gives us chills and goosebumps when we read or hear it.

At the end of Spirituality Group, one patient shares his poem, excited to call himself a poet for the first time, and sends the group off with these words of hope and resilience:

We are dancing, whirling from room to room, Embracing and healing the pain, the sorrow, the fear, Holding on to the truth in the darkest hour, Learning again how to love, Helping each other to make it through, Rising with gratitude to an ever larger world.

Jerene Broadway is a Staff Chaplain in Mission Health’s Department of Spiritual Care.
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You can have a real-time visit with our providers from the comfort of your own home. All you need is a smart device and a good connection. Just call one of our many offices to schedule an appointment.
GET BACK TO WHAT MOVES YOU

Your hips and knees allow you to move, perform everyday tasks, and take part in the activities you enjoy. If arthritis or chronic pain is limiting you, Mission Health Orthopedics can provide personalized nonsurgical treatments and state-of-the-art surgical care to safely return you to a healthy, active lifestyle.

Find a location or walk-in clinic: missionhealth.org/orthopedics