A CIRCLE OF CARE

VALLEY HEALTH TAKES
A TEAM APPROACH TO
TREATING NEUROSURGICAL
PATIENTS LIKE SCULPTOR
SALLY MYERS

INSIDE: World-class cardiac care, close to home.
/ Advances in epilepsy treatment. / Plus:
Valley Health’s Community Benefit Report.
MEDICAL ARTISTRY
Art and science. To many they seem like opposites: Science is driven by data and experimentation followed by an objective analysis of findings, while art is emotional, expressive and creative. Medicine, of course, is science-based; however, the best physicians practice their craft with a sense of wonder, openness to new possibilities and the creativity of an artist.

This issue of HealthLINK includes articles about physicians who treat patients while conducting scientific research and clinical trials that advance the art of patient care and the science of medicine. You can also read how a local neurosurgeon used neuronavigation, a state-of-the-art medical technique, to treat artist Sally Myers, and about Myers’ post-surgical journey to recover her creative abilities that was facilitated by caring staff on the Rehabilitation and Wellness teams. At Valley Health, art and science—AND our exceptional team—work hand in hand so all in our community are Healthier, together!

Want to ensure home delivery of every issue of HealthLINK? Call 540-536-5325 or sign up at valleyhealthlink.com/News.
GRANT FUNDING HELPS THOSE WITH MENTAL AND SUBSTANCE ABUSE CHALLENGES

Valley Health has been on the front lines in the fight against substance abuse and mental health disorders and receives substantial grant support for its Screening, Brief Intervention, and Referral to Treatment (SBIRT) initiative. Offered in the Winchester Medical Center Emergency Department since 2017, this program offers help and hope for those with depression, anxiety, and alcohol and drug addiction. Working with the grant partner, George Mason University School of Nursing, our team supports the care of pregnant women with addiction and/or mental health issues and facilitates collaboration with local obstetrical and family medicine practices to ensure that moms and babies get necessary prenatal care and have housing, nutritional and other needs met. Due to the success of the program, it will be expanded to other Valley Health locations, beginning with Warren Memorial Hospital in early 2019.

NEW CHAPTER FOR WARREN MEMORIAL HOSPITAL

Leaders from Valley Health, Front Royal and Warren County, Virginia, gathered to celebrate the kickoff of ground clearing at the hospital’s new location. “The start of site preparation marks the culmination of years of research, planning and development for a thoroughly modern facility worthy of the services we offer and the patients and community we serve,” says Floyd Heater, vice president of Valley Health’s southern region and president of Warren Memorial Hospital, about the state-of-the-art facility slated to open in 2020.
MEDICAID OFFERS NEW COVERAGE OPTION FOR VIRGINIA PATIENTS

Enrollment for new, low-cost health care coverage for eligible adults is now underway! This coverage is available for men and women ages 19 to 64 who aren’t eligible for Medicare and who meet income eligibility guidelines, which vary depending on family size. For example, single adults who earn less than $16,754 in annual income and adults in a four-person household earning less than $34,638 annually may be eligible. To enroll or to find out if you qualify, visit coverva.org or call 855-242-8282 (or 888-221-1590 for the hearing impaired).

SLEEP CENTERS ACCREDITED

Valley Health Sleep Centers at Hampshire, Page, Shenandoah, War and Warren Memorial Hospitals recently received program accreditation from the American Academy of Sleep Medicine. The five-year accreditation validates that these programs meet or exceed all standards for professional health care, including staff training, quality assurance measures and a strong focus on patient-centered care. (The Sleep Center at Winchester Medical Center has been accredited since 2015.) For more information on sleep services offered through Valley Health, log on to valleyhealthlink.com/sleeplab.

SILVER AWARDS FROM WVHA

The outstanding work of staff at Hampshire Memorial and War Memorial Hospitals was recently recognized by the West Virginia Hospital Association (WVHA). Both hospitals were honored with Silver Awards in the Commitment to Excellence Honors Program for their dedication to the health and wellness of citizens through care, education and collaboration in areas such as Antibiotic Stewardship, Breastfeeding, Care Transitions, Emergency Department Information Exchange (EDIE), Influenza Vaccination, Opioid Stewardship, and Tobacco Cessation Assistance.
FAQs

BREATHING EASY

Pulmonologists diagnose and treat diseases of the lungs, such as asthma, COPD (chronic obstructive pulmonary disease), sleep apnea, and others. In the winter, they are frequently on the front lines in treating pneumonia, a common aftereffect of colds and flu. Christian LaFalce, MD, FCCP, Valley Health Pulmonary Specialists, answers frequently asked questions on how to breathe easier during flu season.

Q: WHAT CAUSES PNEUMONIA AND WHY DO WE HEAR MORE ABOUT IT DURING THE WINTER MONTHS?
A: Pneumonia is an infection in the air sacs in the lungs [called alveoli] caused by cold or flu viruses and bacteria. These germs are spread more easily in the winter season because we are inside and in close quarters. Pneumonia’s symptoms include chest pain when you breathe, cough, fatigue, fever, and shortness of breath. Most healthy people make a quick recovery with treatment from their primary care provider; however, pneumonia can be serious in those over 65 or under 2 and for smokers and those with lung disease and/or immune system disorders.

“Keep your immune system strong during the winter months by getting exercise, enough sleep and eating a healthy diet. And if you are a smoker, quit now!”
—CHRISTIAN LAFALCE, MD, FCCP

Q: HOW CAN I ENSURE GOOD LUNG HEALTH FOR MY FAMILY AND MYSELF?
A: Getting a flu shot every year can help prevent pneumonia. Pneumonia vaccinations are also recommended for those 2 years old and under and those over 65. Talk with your doctor to see if you or your child is a candidate for an age-specific vaccination. Also, keep your immune system strong during the winter months by getting exercise, enough sleep and eating a healthy diet. And if you are a smoker, quit now! [Valley Health offers free resources to assist those who wish to quit; learn more at valleyhealthlink.com/quitsmoking.] Finally, cover your cough and wash your hands frequently!

Q: WHAT STEPS CAN THOSE WITH LUNG DISEASE TAKE TO STAY HEALTHIER?
A: Those with chronic lung disease should work with a pulmonologist and their respiratory therapist colleagues to evaluate and monitor lung function with tests that measure lung size, capacity and airflow, and develop a smoking cessation plan for smokers. These patients should “know their numbers” for lung function and have a plan in place and adequate medication, inhalers and oxygen on hand to address and manage breathing problems. Being prepared is especially important if inclement weather is predicted.

Visit valleyhealthlink.com/pulmonology to learn more about respiratory care at Valley Health.
NEW GUIDELINES HAVE SHIFTED THE WAY DOCTORS UNDERSTAND HIGH BLOOD PRESSURE. GET INFORMED WITH THE FAST FACTS BELOW.

RISK FACTORS FOR HYPERTENSION INCLUDE:
- Smoking
- Eating foods high in sodium and low in potassium
- Inactivity
- Obesity
- Excessive alcohol consumption

HYPERTENSION OCCURS WHEN THE PRESSURE OF THE BLOOD IN YOUR BLOOD VESSELS IS HIGHER THAN IT SHOULD BE.

WHEN YOU SHOULD BEGIN CHECKING FOR HYPERTENSION

NUMBERS ARE USED TO MEASURE BLOOD PRESSURE:
SYSTOLIC BLOOD PRESSURE MEASURES THE PRESSURE IN YOUR BLOOD VESSELS WHEN YOUR HEART BEATS, AND DIASTOLIC BLOOD PRESSURE MEASURES THE PRESSURE IN YOUR BLOOD VESSELS WHEN YOUR HEART RESTS BETWEEN BEATS.

Less than 120 mm Hg is the target systolic blood pressure level
Less than 80 mm Hg is the target diastolic blood pressure level

54% OF THOSE WITH HYPERTENSION CONTROL IT WITH DIET, EXERCISE AND/OR MEDICATION

Sources: American Heart Association, U.S. Centers for Disease Control and Prevention
ADVANCES IN EPILEPSY TREATMENT

Winchester neurologist contributes to approval of the first marijuana-derived drug for severe epilepsy

Neurologist and neuroscientist Paul D. Lyons, MD, PhD, was intrigued several years ago when “three mothers of children with severe, drug-resistant epilepsy asked me about cannabidiol [CBD]—a medical marijuana compound—in the same week.” The questions led to Lyons’ involvement in landmark research that contributed to the U.S. Food and Drug Administration’s recent approval of Epidiolex—the first drug with an active ingredient derived from marijuana—for children and adults with rare and debilitating forms of epilepsy.

Lyons, co-founder and medical director of the Virginia Comprehensive Epilepsy Program at Winchester Medical Center, says Epidiolex may help the majority of patients with Lennox-Gastaut or Dravet syndromes, serious and debilitating forms of epilepsy. For some, the benefits are dramatic. “I’ve had patients with these syndromes who have dozens of seizures a day, breaking bones and ending up in the hospital over and over again. In our research, taking Epidiolex made seizures fewer, milder and shorter. Some children who could not walk are now able to move. Adults with limited ability to speak are producing more words. And some who cannot speak are expressing their needs in other ways, such as by reaching for things for the first time. It can be transformative.”

Epidiolex, a liquid taken by mouth, contains purified CBD. It doesn’t trigger marijuana’s euphoric “high” because it doesn’t contain tetrahydrocannabinol (THC), the plant’s main psychoactive component. “The drug’s path to approval is revolutionary,” Lyons says. “Drug discovery usually begins with researchers in a lab noticing a promising molecule. But CBD has a long history of human use.”

Fifteen of his patients joined the nationwide clinical trial that led to FDA approval. Valley Health enrolled more patients than any of the other 25 participating hospitals, clinics and physician practices. In 2018, researchers including Lyons shared findings on children and adults with treatment-resistant epilepsy who took CBD with other epilepsy medications for about two years. Fifty-two percent of these patients experienced 50 percent fewer convulsive seizures; 11 percent of patients no longer had seizures at all. The drug’s most common side effects include drowsiness, loss of appetite, diarrhea, skin rash, and sleep problems.

“Families drove for up to five hours one way to be in the study,” Lyons says. “One young man had trouble just attending school due to epilepsy in the past. Now, we talk about how he’s doing in sports and what he’ll do after high school. It’s very exciting.”

“The drug’s path to approval is revolutionary. Drug discovery usually begins with researchers in a lab noticing a promising molecule. But CBD has a long history of human use.”

—PAUL D. LYONS, MD, PhD

→ Visit valleyhealthlink.com/epilepsy for more information.
Ken Winklepleck loves the heart-thumping BOOM! of his mountain howitzer—a bronze reproduction of a famous U.S. Army cannon from the 1800s. But when his own heart recently developed three debilitating problems, he could no longer help wheel the 800-pound gun into position at shooting competitions. "I was still in charge of aiming it, but I couldn’t walk 10 feet without being totally out of breath," says Winklepleck, 68, a retired concrete-foundations worker.

Thanks to innovative, state-of-the-art care at Valley Health System’s Advanced Valve & Aortic Center, Winklepleck’s troubled ticker is back to normal—and he’s back on the firing line. "Ken’s gone from falling asleep at stop signs while driving due to his heart conditions to being the Energizer Bunny,” says his wife, Maria. “The difference is amazing.”

According to cardiothoracic surgeon Basel Ramlawi, MD, the founding director of the center, Winklepleck’s case was complex. He had dangerous off-beat heart rhythms called atrial fibrillation (AFib), plus a leaking mitral valve and a blocked coronary artery. On top of that, kidney problems forced the cancellation of planned open-heart surgery last spring. So instead, specialists at the center planned and performed two minimally invasive procedures to install an artery-opening stent and the MitraClip, a device that stopped the valve leak and also resolved his AFib.

Customized solutions like this are one of the strengths of this center located at Winchester Medical Center, Dr. Ramlawi says. “The Advanced Valve & Aortic Center offers highly advanced techniques that aren’t available at other major heart centers across the nation, or that are not offered at the same high level we achieve here,” Dr. Ramlawi notes. “The center’s expertise, experience and range of procedures—from the least invasive procedures to full, open-heart surgeries to medical management—mean that heart care is truly personalized to what’s best for each individual patient.”

An added bonus is the center’s close-to-home location. “The fact that we’re located in Winchester is an added advantage for those who live in the Shenandoah Valley or nearby in West Virginia or Maryland,” Dr. Ramlawi says. “Patients don’t face long drives to Baltimore or Washington for care and follow-up appointments. Family members don’t have to stay overnight in hotels. And because we’re in the community and part of Valley Health System, we’re in close communication with patients’ cardiologists and other physicians, so the continuity of care is excellent.”

For the Winkleplecks, the center is only a
Dr. Basel Ramlawi (right) and Dr. Omar Ali (center) lead the team at Valley Health’s Advanced Valve & Aortic Center.

VALLEY HEALTH’S STATE-OF-THE-ART CARE HELPS PATIENTS LIKE KEN WINKLEPLECK REGAIN QUALITY OF LIFE

CARDIAC CARE

20-minute ride from their Summit Point, West Virginia, home. “It’s easy to come to appointments,” Winklepleck says.

Maria Winklepleck also appreciated the convenience of the Winchester location. “When Ken was in the hospital, I slept at home every night. I was comfortable and had peace of mind knowing I could get to the hospital quickly if needed.”

INSIDE THE CENTER

More than 5 million Americans are diagnosed each year with heart valve disease—when the hardworking, dime-size valves that control blood flow within the heart and out to the lungs and the rest of the body narrow or leak. Most often, the aortic and mitral valves are affected. Symptoms like fatigue and breathlessness can come on so slowly that they’re easy to dismiss as “just aging,” but severe valve disease can be deadly. Until
recently, treatment often meant medication or getting a new valve via open-heart surgery. But that option is too risky for many older and sicker patients. And replacement valves often lasted only 10 to 15 years.

But new options are now available, and the Advanced Valve & Aortic Center, which opened in 2016, is at the forefront. The center offers patients a wide range of the newest techniques in valve repair and replacement and an unmatched level of experience. “Some surgeons in other hospitals perform five valve replacements a year, while we do 80 or more,” Dr. Ramlawi notes. That makes the center a destination for people with both simple and complex heart valve conditions; those who need a replacement for a previous valve replacement; and those interested in less invasive options, which allow for faster recovery and reduced risk of complications.

“In just the past few years, we’ve been able to offer transcatheter aortic valve replacement [TAVR], where the surgeon guides a new valve into place working through the blood vessels, to people who could not undergo open-heart surgery,” explains interventional cardiologist Omar Ali, MD, the center’s co-director. “The recovery time is faster, there is little pain during recovery, and the complication risk is lower.” In 2016, the center was among just 5 to 10 percent of U.S. hospitals to first offer TAVR.

Now, the center is one of 48 in the country participating in groundbreaking clinical trials of TAVR for low-risk heart valve patients and for the 10 to 20 percent of people with a condition called a bicuspid aortic valve. “We are [in the] less than 1 percent of hospitals able to offer this,” Dr. Ramlawi says. “We are very happy to be part of this very select group. We are able to offer almost anyone who walks through our door a TAVR, where we do a little puncture and replace their heart valve [if needed] through that puncture while they are awake. They can go home within a couple of days.”

Soon the center will also offer a similar technique that replaces the mitral valve through a small incision in the chest. In 2019, Dr. Ramlawi expects to also offer mitral valve replacement as a transcatheter procedure—when the device and tools are threaded through arteries to the heart instead of via open-heart surgery. Both new mitral valve replacement procedures will be available through a clinical trial at just a handful of U.S. hospitals, including Winchester Medical Center.

“We can offer these because we are recognized as a center of excellence,” he says. Dr. Ramlawi’s own reputation as a nationally renowned surgeon for the repair of heart valves, aortic aneurysms and atrial fibrillation using minimally invasive and catheter-based procedures is part of that.

Dr. Ramlawi says the center has also earned a reputation for valve repair. “Our repair rate is 95 percent, compared to the national average of 58 percent,” he says. “We can fix leaking flaps on a mitral valve, for example, with the MitraClip, which fits over the flaps or leaflets in a valve so they close tightly. We also offer NeoChord, performed as a minimally invasive procedure through a tiny puncture in the left side of the chest. The mitral valve is like a parachute, controlled in part by cords. If a cord is damaged or ruptured, we can attach a new one, made of Gore-Tex material, and tension it during the procedure until the valve is working perfectly again.”

The advantage? “We want people to retain their heart valves as often as possible,” Dr. Ali explains. “They will last longer than a replacement. And you won’t have to take anti-clotting medications on a long-term basis as you do with a replacement valve.”

BACK ON THE RANGE
After receiving his stent in March 2018 and the MitraClip in April, Winklepleck said he was ready to get back to his daily activities right away. “I woke up in the afternoon after getting the MitraClip, got out of bed and walked four times around the nurses’ station. I had no pain at all. I felt great immediately.”

“I woke up in the afternoon after getting the MitraClip, got out of bed and walked four times around the nurses’ station. I had no pain at all. I felt great immediately.” —KEN WINKLEPLECK
The Advanced Valve & Aortic Center is among the top heart centers in the nation participating in important valve replacement and repair clinical trials, says Basel Ramlawi, MD, founding director. Among the studies underway or starting soon:

**Transcatheter mitral valve replacement:** The APOLLO trial will evaluate a replacement mitral valve device called Intrepid that is guided through blood vessels to the heart instead of being installed in open-heart surgery. It is for people in whom open-heart surgery is high risk or not possible.

**Transcatheter aortic valve replacement in healthy people and those with a bicuspid aortic valve:** This study looks at TAVR in people who could undergo open-heart surgery and will compare the two procedures. One part will look at TAVR in people whose aortic valve has two leaflets instead of three. “Up to one in five people has a bicuspid aortic valve,” Dr. Ramlawi says. “Right now, they cannot have TAVR at most centers. We can offer it through this trial.”

**NeoChord DS1000:** This trial compares replacing cords that help control the mitral valve through a minimally invasive procedure versus a traditional open-heart procedure.

→ For more information about the services offered at the Advanced Valve & Aortic Center, visit valleyhealthlink.com/heart.
Diagnosed with a large brain tumor, artist Sally Myers has made a full recovery surrounded by expert neurosurgical and rehabilitative staff at Winchester Medical Center

In the summer of 2017, Sally Myers, an artist who lives and works on a large farm near Winchester, noticed she was growing unusually quiet. It took her a while to realize it, she says, because she often works in solitude in her studio, creating dramatic steel and clay sculptures inspired by nature. Eventually changes in her behavior also began to worry her friends.

She remembers attending a Shenandoah Arts Council meeting, for example, and never saying a word. “Other times, I’d sit down at home and could not decide what to do for hours at a time,” she recalls. “I wasn’t alarmed, but a friend was worried and suggested I might have had a stroke.”

She made an appointment with her general practitioner, who ordered an MRI. This scan revealed Myers had a large tumor—5 centimeters long—in her brain. Diagnosed as a meningioma, the tumor was putting pressure on her brain, so Myers was referred to Valley Health neurosurgeon Lee A. Selznick, MD. He scheduled her for a craniotomy—a procedure in which a section of the skull bone is removed in order to access the brain—and removed the tumor.

“Sally’s tumor was on the left side of her brain, which affects language function, and in the frontal lobe, which affects executive function,” Dr. Selznick says. “Fortunately, the symptoms she was experiencing were reversible because this part of the brain tends to be more forgiving than other areas. It’s likely that this tumor had been growing for many, many years. A tumor this size would have caused serious problems much earlier if it had been located in another area of the brain.”

The craniotomy, which Dr. Selznick performed at Winchester Medical Center (WMC) in November of 2017, was a four-hour procedure that involved a straight-line incision along Myers’ hairline; this minimized both scarring and the amount of hair that needed to be shaved. “We used delicate instruments and an advanced technique called neuronavigation to remove the tumor,” Dr. Selznick explains. This minimally invasive procedure uses a computerized model of the brain created from the MRI results. “Neuronavigation allows me to see exactly where I’m working, so I am targeting precise locations,” Dr. Selznick says. “It’s like GPS for the brain.”
Post-surgery, Myers was moved to the intensive care unit and discharged from the hospital three days later. She credits the entire care team at WMC with making her experience such a positive one. And her physical, mental and psychological recovery began almost immediately. “Meeting her following the surgery was like meeting her for the first time,” Dr. Selznick notes. “Her personality was back and she was smiling and joking, completely changed.”

Myers, however, was worried she might have lost her ability to create art, so she was happy that her work with staff from Valley Health Rehabilitation Services helped her regain cognitive and creative skill and, eventually, get back to her studio. Expert care from speech language pathologist Emily Beckley and occupational therapist Patrice Vossler was key to this recovery.

Because Myers was having difficulty summoning the right words when she tried to speak, Beckley helped her with word-finding exercises and offered other tools that improved communication. “Sally was aware of her deficits and was very motivated to recover,” Beckley says. “We kept encouraging her, and she bounced back very quickly.”
Myers was also having trouble following instructions, so Vossler gave her projects, such as making simple recipes, to help her pace herself. One of the most rewarding moments was when Vossler asked Myers to create a drawing, and, with a bit of difficulty, Myers produced a rendering of a bird. “Sally always said the most important thing was her art,” Vossler says, “and when she brought in that drawing, I knew that the art center of her brain had not been affected.”

Myers was also worried that she’d lost muscle tone—of particular concern because the work required to create her sculptures is physically demanding—so Vossler suggested she enroll in Next Steps, a Valley Health Wellness & Fitness program offered for people recovering from surgery and other debilitating physical problems. Staff there performed a client assessment, developed a training schedule, and provided guidance and encouragement for Myers.

Within a matter of weeks, Myers was back in her studio, producing the sculptures that give her so much pleasure. She recently created two dramatic works—one featuring birds, the other fish—for an exhibition at the Museum of the Shenandoah Valley. “She’s made a fantastic recovery,” says Dr. Selznick. “She has returned to her original self!”

Thanks to Valley Health’s circle of expert and compassionate caregivers, Myers has received the gift of good health. “I’m just so happy to be well, and I feel ready to carry on with a whole new series of sculptures,” Myers says. “I’m so grateful for the loving help I received. I feel like I’ve been given a great gift.”

To learn more about Valley Health’s neurological services, visit valleyhealthlink.com/neuro.
RAISE YOUR SIGHTS

REGULAR EYE EXAMS ARE THE FIRST STEP TOWARD SAVING YOUR VISION

You can take steps to protect your eyes from major vision-impairing conditions—such as glaucoma, age-related macular degeneration and diabetic retinopathy. A comprehensive eye exam helps your eye doctor find problems early, when treatments to prevent vision loss work best, says Eric Steuer, MD, PhD, an ophthalmologist who specializes in retinal surgery. Here’s what to know about these common eye conditions:

**GLAUCOMA:** Gradually increasing pressure inside the eyeball can damage the optic nerve, leading to the loss of peripheral (side) vision first and then central vision. Early-stage glaucoma has no symptoms, so eye exams are crucial. Eyedrops and surgery to lower eye pressure can prevent further vision loss.

**AGE-RELATED MACULAR DEGENERATION (AMD):** Sharp, central vision is lost with AMD, due to thinning of the center of the light-sensing retina at the back of your eyes (called “dry” AMD) or when blood vessels grow under this area, then leak and scar (“wet” AMD). If you have dry AMD, your doctor can recommend a specific nutritional supplement that can lessen the risk of progression of the condition. For wet AMD, several injectable prescription drugs can help.

**DIABETIC RETINOPATHY:** The leading cause of adult blindness in the U.S., this condition causes damage to the blood vessels of the retina. Controlling blood sugar and blood pressure, along with injections and surgery, can help.

**WHAT IS A COMPREHENSIVE EYE EXAM?**

During a comprehensive eye exam, an ophthalmologist or qualified optometrist will ask you about your vision, overall health, family medical history, and medication use. He or she will check your vision by asking you to read an eye chart. But that’s not all. Your doctor will check your peripheral vision, evaluate how well your eyes move, measure the pressure inside your eyes, and examine the front of your eyes—your eyelids, cornea, iris, and lens. Your doctor will also put drops in your eyes to dilate or widen your pupils for a closer look inside the eye, examining your retina and optic nerve to check for signs of disease.

Most people should have a baseline eye exam at age 40, Dr. Steuer says. Start sooner if you have diabetes, high blood pressure or a family history of eye conditions; if you notice changes in your vision; or if recommended by your physician. Based on the results of your exam, your doctor will discuss how frequently you should have exams in the future. After age 65, it’s important to have a comprehensive eye exam every one to two years, according to the American Academy of Ophthalmology.

Visit valleyhealthlink.com/eye for more information on ophthalmology services.
Valley Health’s mission is “Serving Our Community by Improving Health.” Our team offers a wide range of “traditional” healthcare services AND we invest in programs and services that educate, empower, encourage, inspire, and deliver care, in partnership with organizations and institutions in Virginia, West Virginia and Maryland. We offer health and wellness programs, support groups, and free screenings, and Valley Health contributes to local educational, civic and nonprofit organizations through grants, sponsorships and other in-kind support. Valley Health supports and serves the region’s neediest through the provision of charity care, discounted services and financial counseling. We are committed to workforce development, offering job training programs, scholarships, camps, and career fairs, and we work with educational partners to prepare tomorrow’s healthcare providers. Through collaboration with many community partners, we are truly “Healthier, together.”

Encouraging cancer survivors. Inspiring our youth. Educating about health and wellness. Empowering those fighting addiction. Delivering care to those in need. These are a few of the ways the Valley Health team collaborates with regional partners to serve area residents. Follow us on Facebook or visit Valley Health’s blog (valleyhealthlink.com/news) to read about our investments in your community.

$750 million+

2018 COMMUNITY BENEFIT REPORT

VALLEY HEALTH COMMUNITY SUPPORT BY CATEGORY (IN MILLIONS)
JANUARY 1–DECEMBER 31, 2017

A. CHARITY & UNREIMBURSED CARE
Charity Care at Cost $19.20
Unreimbursed Cost of Medicaid $21.30
SUBTOTAL A: Charity & Unreimbursed Care $40.50

B. PROGRAMMATIC & COMMUNITY BENEFIT
Community Health Improvement & Benefit $1.80
Health Professions Education $15.00
Subsidized Health Services / Research / Cash & In-Kind Support $4.10
SUBTOTAL B: Programmatic & Community Benefit $20.90

Total Community Benefit (Subtotals A & B) $61.40

C. OTHER FINANCIAL MEASURES
Medicare Shortfall $19.30
Bad Debt Expense $62.80
SUBTOTAL C: Other Financial Measures $82.10

Comprehensive Community Contribution (Subtotals A, B & C) $143.50

COMMUNITY BENEFIT VS. TAX LIABILITY
As a not-for-profit health system, Valley Health does not pay federal income taxes. In lieu of tax dollars, the organization makes significant financial contributions in the region in the form of Community Benefit. Had Valley Health been a taxable organization in 2017, the potential income tax liability would have been $36.7 million. The Community Benefit supplied by Valley Health was $61.4 million, over 67 percent higher than its potential tax liability.

$950,000+
DOLLARS SPENT ON FINANCIAL COUNSELING AND PATIENT ENROLLMENT IN AFFORDABLE CARE ACT (ACA) INSURANCE AND GOVERNMENT ASSISTANCE PROGRAMS. NAVIGATING THE COMPLEXITIES OF SECURING HEALTH INSURANCE THROUGH THE ACA AND THE APPLICATION PROCESSES FOR ASSISTANCE PROGRAMS LIKE MEDICAID AND CHILDREN’S HEALTH INSURANCE PROGRAM (CHIP) IS CHALLENGING. VALLEY HEALTH STAFF PROVIDES FREE FINANCIAL COUNSELING SERVICES TO THE PUBLIC.

50+ ORGANIZATIONS
RECEIVED GRANTS, SPONSORSHIPS AND/OR OTHER IN-KIND SUPPORT FROM VALLEY HEALTH. WE THANK THESE NONPROFITS FOR THEIR COLLABORATION AND PARTNERSHIP.

• Abba Care
• AIDS Response Effort
• American Cancer Society Relay for Life
• Big Brothers, Big Sisters
• Blue Ridge Hospice
• Child Safe Center - CAC
• CLEAN, Inc.
• Concern Hotline
• Council on Alcoholism
• Edgehill Recovery Center
• Faith Community Nursing Network
• Faith in Action
• Family Promise
• Girls on the Run
• Good Samaritan Free Clinic
• Healthy Families
• Hospice of the Panhandle
• The Laurel Center
• Lord Fairfax EMS Council
• March of Dimes
• National Alliance on Mental Illness - NSV
• Northern Shenandoah Valley Substance Abuse Coalition
• Our Health, Inc.
• Page Alliance for Community Action
• Page Free Medical Clinic
• Rapp U, Inc.
• Shenandoah Area Council Friends of Scouting
• Shenandoah Community Health Clinic
• Shenandoah University
• Shenandoah Valley Discovery Museum
• Sinclair Health Clinic (formerly the Free Medical Clinic, NSV)
• St. Luke Community Clinic
• United Way
• And others
You be you. 
We’ll be here.

Eight convenient Urgent Care and Quick Care locations.

We treat those everyday illnesses and injuries that require immediate attention, but not necessarily a trip to the emergency room, including colds, flu, fever, burns, cuts, earaches, strep, pinkeye, strains and sprains. And with online check-in, you can wait wherever it’s most convenient for you.

Visit vhurgentcare.com to reserve your spot.
Walk-ins welcome.
M–F 8 AM – 8 PM, Weekends 9 AM – 6 PM

Don’t need x-ray or lab services? 
Visit Valley Health Quick Care 
M–F 8 AM – 6 PM, Saturdays 9 AM – 5 PM

PATIENT NOTICE OF NONDISCRIMINATION

Valley Health complies with applicable federal and state civil rights laws and does not discriminate on the basis of race, color, national origin, age, disability, or sex. Valley Health does not exclude patients or treat them differently because of race, color, national origin, age, disability, or sex.

VALLEY HEALTH PROVIDES PATIENTS, FOR FREE AND WITHOUT CHARGE:

- Auxiliary aids and services to people with disabilities to communicate effectively with us, such as:
  - Qualified sign language interpreters
  - Written information in other formats (large print, audio, accessible electronic formats, other formats)

- Language assistance services to people whose primary language is not English, such as:
  - Qualified interpreters
  - Information written in other languages

If you need these services, tell your caregiver and they will help arrange for assistance. You may also contact Katy Pricock, language access coordinator, at 540-323-0228.

If you believe that Valley Health has failed to provide these services or discriminated in another way on the basis of race, color, national origin, age, disability, or sex, you can file a grievance through the VHS Patient Grievance Process. You can file a grievance in person or by mail, fax or email. If you need help filing a grievance, VHS will provide language assistance and auxiliary aids to help you. To file a grievance, inform your caregiver that you want to speak to a member of Risk Management.

Grievances and questions about this Notice may also be directed to the Valley Health Civil Rights Coordinator at:

VALLEY HEALTH COMPLIANCE DEPARTMENT
220 Campus Blvd., Suite 420
Winchester, VA 22601
540-536-8993 Direct
540-536-8019 Fax
wsowers@valleyhealthlink.com

You can also file a civil rights complaint with the U.S. Department of Health and Human Services, Office for Civil Rights, electronically through the Office for Civil Rights Complaint Portal, available at https://ocrportal.hhs.gov/ocr/portal/lobby.jsf, or by mail or phone at:

U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES
200 Independence Avenue, SW
Room 509F, HHH Building
Washington, D.C. 20201
1-800-368-1019, 800-537-7697 (TDD)

CONTACT FOR LANGUAGE ASSISTANCE
ATTENTION: If you require language assistance, language assistance services, free of charge, are available to you. Call 1-540-323-0228.

ATENCIÓN: si habla español, tiene a su disposición servicios gratuitos de asistencia lingüística. Llame al 1-540-323-0228.

For assistance with other languages, please visit valleyhealthlink.com/non-discrimination.
CALENDAR OF EVENTS

Valley Health Community Wellness Festival
Funded by the Winchester Medical Center Foundation, the 25th annual festival features screenings and health education for the entire family.
Saturday, February 23
10 AM–6 PM
Apple Blossom Mall
Winchester, VA
Learn more at valleyhealthlink.com/wellnessfestival.

SUPPORT GROUPS AND CLASSES

Freedom From Smoking
Valley Health offers FREE smoking cessation classes. The American Lung Association’s Freedom From Smoking course is a step-by-step plan for quitting smoking and transitioning to a smoke-free lifestyle. New classes begin every month at Valley Health locations across the region. Additional information including course dates, times and locations is available at valleyhealthlink.com/quitsmoking or by calling 833-847-3627.

Bariatric Support Group
January 9, March 13 and May 8
6–7 PM
Winchester Medical Center Conference Center
Call 540-536-0010 for more information.

Cancer Support Group
For those of all ages and all diagnoses.
Fourth Mondays
3 PM
Valley Health Cancer Center
Winchester, VA

COPD (Chronic Obstructive Pulmonary Disease) Support Group
Fourth Tuesdays
11 AM–noon
Chronic Disease Resource Center
333 West Cork St., Suite 100
Winchester, VA

Diabetes Education and Support Group
Fourth Wednesdays
1–2 PM
Romney Senior Center
Romney, WV
Call 304-813-6588 or 304-822-2198 for more information.

Epilepsy Support Group
Location and time are TBD.
Call 540-908-3400 for more information.

Lyme/Tick Disease Support Group
First Thursdays
5–6:30 PM
Warren Memorial Hospital Outpatient Center
120 N. Commerce St.
Front Royal, VA

Mended Hearts
First Tuesdays
7–8:30 PM
Valley Health Wellness & Fitness
Winchester, VA
Call 540-868-2750 for more information.

MS Support Group
First Fridays
5:30–8:30 PM
Valley Health Wellness & Fitness
Winchester, VA
Call 540-327-3967 for more information.

Stroke Support Groups
In Front Royal:
Warren Memorial Hospital Conference Room
First Mondays
4:30–6 PM
In Winchester:
Valley Health Wellness & Fitness
Fourth Tuesdays
4:30–6 PM

Wellspring Cancer Resource Center
525 Amherst St.
Winchester, VA
• More Than Beauty
Third Fridays
11 AM–1 PM
For patients with cancer and other chronic diseases.
• Ripples
Third Saturdays
10 AM–noon
For women with cancer.

HAVE YOUR VOICE HEARD. COMPLETE THE COMMUNITY HEALTH NEEDS SURVEY TODAY!

Every three years, Valley Health surveys our community to learn about the region’s most pressing health needs. Go to valleyhealthlink.com/survey to learn more and to complete the brief survey.

VALLEY HEALTH AND ITS PHYSICIAN PARTNERS OFFER A RANGE OF INFORMATIONAL EVENTS, PARENTING CLASSES, SUPPORT GROUPS, SCREENINGS, AND OTHER HEALTH AND WELLNESS ACTIVITIES EVERY MONTH. VISIT OUR ONLINE EVENTS CALENDAR AT VALLEYHEALTHLINK.COM/EVENTS FOR A COMPLETE LISTING.
A few tiny incisions.

They may seem unremarkable. Even simple. But for patients, they mean that lung and other cancers can be treated using advanced robot-assisted surgery. At Valley Health, we’re using high definition 3D video-assisted techniques to treat cancer through just a few tiny incisions — leaving minimal scarring and drastically reducing recovery time.

It’s not simple.

It’s simply amazing.

Minimally Invasive Cancer Surgery
valleymis.com/MIS | 833-VHS-DOCS