

InFlight

Spring 2017

A QUARTERLY MAGAZINE FOR FRIENDS OF HEALTHNET AEROMEDICAL SERVICES, INC.



Celebrating EMS Week
May 21- 27





On the Cover

HealthNet Aeromedical Services recognizes EMS professionals throughout our system who serve our communities each and every day. We are proud to work with them to bring life-saving care to ill and injured persons in our service area.

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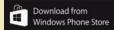


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Paintsville, Ky. Fire-Rescue



aintsville, Ky. Fire-Rescue began serving in 1926. In November 1996, emergency medical services were added using a 1987 Ford F-350 ambulance.

Today, Paintsville Fire-Rescue has three pumpers, one aerial and six ambulances, four in service on a daily basis and two spares. This fall Paintsville Fire-Rescue anticipates delivery of a new ambulance!

Paintsville Fire-Rescue maintains two stations: Station 1 located at 116 Main St., Paintsville and Station 2 at 255 McCloud Drive, also in Paintsville. The stations are necessary to help them serve the area they cover- the City of Paintsville and all of Johnson County. The agency is certified as an ALS and BLS emergency service.

Paintsville Fire-Rescue employs 23 full-time and eight part-time EMT's and paramedics plus four volunteer firefighters, and they are the only agency in the area that can provide EMS.

HealthNet Aeromedical Services and Paintsville Fire-Rescue have partnered to provide critical care transport services to Johnson County, Kentucky, since 1986. Ann Lyons, Deputy Director for Paintsville Fire-Rescue commented, "We have worked with HealthNet for over 30 years. We work primarily with Base 7 but also work with team and aircraft from Bases 3 and 4. When we transport a patient with severe trauma, stroke or cardiac issues we count on HealthNet to provide time-critical life saving skills. We pride ourselves with providing the best EMS services to our community and we know HealthNet has the same desire." In addition to keeping residents of Johnson County, KY, and Paintsville, KY, serviced with excellent care, team members at Paintsville Fire-Rescue give back to their community year-round, from working with local schools to bringing drug awareness programs to its students and raising money at Christmas for the needy children in the area. Paintsville Fire-Rescue takes pride in the work and services they provide and HealthNet Aeromedical Services is honored to be their partner.

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A Message From Our President/CEO

n May 1974, gasoline was fifty-five cents per gallon; the average family home in the United States cost \$34,900; singer Ray Stevens' song "The Streak" was number one on the Billboard charts; and if you needed a pocket calculator, thanks to Texas Instruments, you could buy one for the very first time. Also, that month President Gerald Ford authorized National Emergency Medical Services (EMS) week to celebrate EMS practitioners and the important work they were doing in our nation's communities.

Back then, EMS was an entirely new profession, and EMS practitioners had only just started to be recognized as a critical component of emergency medicine and the public health safety net. Fast forward forty-three years and all across the country we see the effect a vibrant EMS system plays in our country, and each May, we continue to celebrate this special

This year, President Donald Trump has proclaimed May 21-27, 2017, as National EMS Week. All across America, special events and educational programs are conducted to increase the visibility of those serving on the front lines of emergency care. In HealthNet Aeromedical Services' region, we'll be participating in many of them.

When one thinks of critical national infrastructure, we quickly recognize that our emergency medical services programs remain a key component. Day or night, every day of the year, paid and volunteer providers, each a true professional, are trained, equipped and prepared to provide lifesaving care to their neighbors. It's a humble calling, one which not everyone is able to answer. It takes a special person — and they deliver for life.

In this issue of InFlight, you'll learn more about some of the EMS agencies and providers with whom our teams work

on a daily basis. Beyond those we feature here, there are those at home in your local community who remain at the ready to answer your call. We celebrate each of them for their commitment to service above self and for their desire to simply be there when minutes matter.

Behind the scenes, the EMS community consists of educators, administrators, vehicle mechanics, logistics officers and more. Each of these individuals, even though they may not respond to emergency calls, plays key roles in allowing those who do to have the right equipment, training, and resources to care for their patients. This is a great opportunity to recognize them as well, and we're pleased to have the opportunity to do

For over three decades, HealthNet Aeromedical Services has served a key role in the delivery of emergency health care across central Appalachia. None of what our teams do would be possible without those in your communities being there first. It takes a team to save lives, and we're honored to be a small part of that team.

On behalf of our three-member health systems, our board of directors and the over two hundred team members across system, thank you for believing that emergency medical services is a critical component to the effective delivery of health care in your community. *

Clinton V. Burley

Clinton V. Burley

HealthNet Aeromedical Services, Inc. President/CEO

HEALTHNET AEROMEDICAL SERVICES

RECOGNIZES

EMS PARTNERS

Emergency Medical Services programs employ individuals with a wide variety of skills to provide life-saving care within their communities. While many can be observed at the scene of an accident, many other EMS professionals act behind the scenes. On this page EMS professionals from our region explain the importance of EMS Week.



Phillip Bolt
uma Program Manage

Trauma Program Manager Raleigh General Hospital Beckley, W.Va.

"EMS Week is a great time for all of us in the healthcare industry to thank this group of dedicated professionals."



Ron Skidmore

Paramedic Randolph County, W.Va., EMS

"For me, EMS Week is a time to recognize all the lives touched by great people in our profession who make a difference every day."



Edward L. Bays

EMS Education Director Mountwest Community & Technical College Huntington, W.Va.

"EMS Week is recognition of EMS professionals that provide medical care to patients in less than ideal environments at any hour of the day or night and who also spend countless hours away from family and friends."



Tim Shrout

EMT KAMP Central EMS Kingwood, W.Va.

"EMS Week is a time to thank all emergency personnel, whether it's first responders, EMTs, paramedics, HealthNet, and everyone in between. EMS is sometimes known as a 'thankless job,' and this week is a good time to take a moment and say 'thank you' to everyone."



Captain David J. "Jamie" Weller II

EMS Coordinator City of Martinsburg, W.Va. Fire Department

"EMS is a high stress, high impact profession that requires incredibly strong-willed individuals to intervene with strangers in an unknown environment at one of the weakest moments in that individual's life. I am proud of every EMS professional, career or volunteer. and I encourage each of you to grow with your profession and embrace it wholeheartedly. Our profession deserves it and the people we serve expect it."



WVU MEDICINE CHILDREN'S

Opens Pediatric Emergency Center



By Amy Johns Director of Public Affairs Planning, Marketing & Communications WVU Healthcare & Health Sciences

collaboration between WVU Medicine Children's and the WVU Medicine Department of Emergency Medicine at J.W. Ruby Memorial Hospital will enhance pediatric care for the region.

Housed in a separate location within the Emergency Department at Ruby Memorial, the Pediatric Emergency Center features four state-of-theart rooms, equipped and decorated for pediatric emergency care.

The center is one of two specialized pediatric emergency care operations in the state, according to Ian B. K. Martin, M.D., M.B.A., chair of the WVU Department of Emergency Medicine, and J. Philip Saul, M.D., executive vice president of WVU Medicine Children's. Physicians, nurses, and advanced practice providers trained in the care of children staff the new center.

A search is underway for the inaugural pediatric emergency medicine division chief and pediatric emergency center medical director. This recruit will help formalize services and coordinate pediatric emergency care throughout the WVU Medicine-West Virginia University Health System, Dr. Saul said.

"We've always had quality emergency care, but we wanted to have an area dedicated to pediatric patients so they're not mixed in with adult patients," Saul said. "It's a joint effort of WVU Medicine Children's and the WVU Department of Emergency Medicine, which we think will be a great resource for families in the region."

Saul said Dr. Martin has been "strongly supportive" and instrumental in the creation of the new facility.

"While the Pediatric Emergency Center finds its academic and clinical homes in the WVU Department of Emergency Medicine, this endeavor would have been nearly impossible without the help and leadership of our colleagues and friends in WVU Medicine Children's," Martin said.

For now, the new Pediatric Emergency Center will be open from 11 a.m. to 11 p.m. Sunday to Thursday; these hours coincide with the greatest demand.

Martin said the institution hopes to extend the hours of operation as patient volumes increase.



Front row (left to right):

Cheryl Jones, R.N., director of WVU Medicine Children's; Angela Fratz, R.N., WVU Medicine Children's Pediatric Intensive Care Unit (PICU); Ashley Tomasello, R.N., WVU Medicine Children's Acute Care Unit; and Kendra Bowman, R.N., WVU Medicine J.W. Ruby Memorial Hospital Emergency Department.

Back row (left to right):

Tiffany Miller, R.N., PICU manager; Ian B.K. Martin, M.D., M.B.A., chair of WVU Emergency Medicine; Rob Riley, R.N., Acute Care Unit nurse manager; Philip Saul, M.D., executive vice president of WVU Medicine Children's; Owen Lander, M.D., medical director, WVU Medicine J.W. Ruby Memorial Hospital Emergency Department; Valerie Boley, R.N., director of emergency services, WVU Medicine J.W. Ruby Memorial Hospital; and Michael Schwalm, R.N., PICU clinical preceptor.

We've always had quality emergency care, but we wanted to have an area dedicated to pediatric patients so they're not mixed in with adult patients. >>

- J. Philip Saul, M.D.

Executive Vice President of WVU Medicine Children's Hospital

Hidden Scar BreastCancer Surgery



By Shawn Jordan, MBA, ABC Production and Media Relations Manager Cabell Huntington Hospital

reast cancer is a malignant cancer tumor that starts in the cells of the breast. According to the American Cancer Society, breast cancer affects one in eight women every year. It is one of the most common cancers in the United States, and although it is typically associated with women, men can also acquire the disease.

Early-stage breast cancers, those that have not spread to other parts of the body, can often be removed using two forms of surgery – breast conserving surgery, commonly called a lumpectomy, which targets the cancer and some surrounding tissue; and mastectomy, when the entire breast is removed. Both procedures render prominent scarring and visible reminders of cancer.

The Edwards Comprehensive Cancer Center at Cabell Huntington Hospital is now offering a procedure that removes cancerous tissue through an incision that minimizes visible scarring.

"Hidden Scar™ Breast Cancer Surgery is an innovative surgical procedure that allows removal of cancer in the breast and hides scars without compromising clinical results," said Mary Legenza, MD, board certified breast cancer surgeon at the Edwards Comprehensive Cancer Center and the only certified Hidden Scar Breast Surgeon in the state of West Virginia.

During a Hidden Scar mastectomy, the physician uses the natural crease beneath the breast to make an incision and preserve the breast skin and nipple-areolar. Reconstructive surgery is used to fill in the void and the woman's natural skin is replaced.

According to Legenza, the procedure preserves a natural-looking breast by sparing the nipple, areola and surrounding tissue.

"Using Hidden Scar Breast Surgery eases the emotional impact that takes place after surgery. There is little to no visible reminder of the surgery," she said. "It helps women maintain confidence in their appearance as they're not as easily reminded of the disease that once invaded their bodies."

Hidden Scar breast conserving surgery or lumpectomy uses an incision hidden in one of three places:

- · the natural crease beneath the breast
- along the areola border
- the armpit

The surgeon then uses oncoplastic techniques to fill the void created where the tumor was removed, leaving the patient with a more natural shape and contour of the breast.

"In both instances, the goal is to remove the cancerous cells and provide a woman with self-confidence when she looks in the mirror," Legenza said.

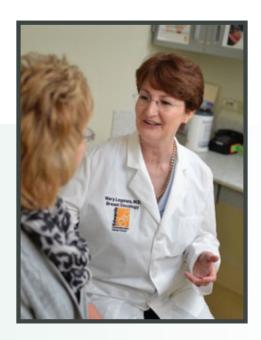
Candidates for Hidden Scar Breast Cancer Surgery depend on the tumor size and location and breast shape and size and also may be appropriate for a wide range of breast cancer patients undergoing nipple sparing mastectomy or lumpectomy (breast conserving surgery) procedures.

To learn more about Hidden Scar Breast Surgery, call the Edwards Comprehensive Cancer Center at 304.399.6556. ■

Using Hidden Scar Breast Surgery eases the emotional impact that takes place after surgery. There is little to no visible reminder of the surgery. It helps women maintain confidence in their appearance as they're not as easily reminded of the disease that once invaded their bodies.

– Mary Legenza, M.D.
 Edwards Comprehensive Care Center at

Cabell Huntington Hospital





NEW TELEMEDICINE TECHNOLOGY BRINGS

By Dale Witte Marketing & Public Affairs Charleston Area Medical Center

Faster Treatment for Stroke Patients

t the first sign of a stroke, the clock starts ticking as blood flow to the brain stops and brain cells die. "Time is brain" means the faster you are treated, the better chance you have of recovering with little or no disability.

CAMC General Hospital's emergency department is now equipped with the latest technology to help stroke patients in the race against time by providing direct, immediate access to a neurologist whenever the neurologist is off-site.

"If someone is having a stroke and I am at another hospital, normally I would need to get in the car and drive over. That can take 15 or 20 minutes, which doesn't sound like a long time, but because time is brain, the guicker we can see someone, the better," said Melanie Ward, MD, neurologist. "Telestroke technology allows us to see someone through the computer quicker than we would be able to [in person]."

By logging into a secure system from their smartphone or tablet, doctors who are off-site can connect to a camera and monitor in General Hospital's emergency department and video conference with hospital staff, which enables them to evaluate the patient, view scans and lab work, and determine the best, and fastest, course of treatment.

Based on that initial video consultation, the neurologist can give care orders to be carried out by the stroke team while the doctor is on the way to see the patient in person.

"Telemedicine gives us the opportunity to be virtually present, take action, give the appropriate medication in a timely manner and provide the excellent care that patients need," said Samip Borad, MD, neurologist.

Telestroke technology is credited with helping CAMC achieve its fastest door-to tPA time ever. "Thanks to this technology, we were able to give the tPA in 23 minutes," said Amie Lopez Smith, RN.

CAMC is the only designated primary stroke center in the region. This certification recognizes hospitals that meet certain standards that support better outcomes for stroke care, including a dedicated stroke focused program, staff of qualified medical professionals, streamlined flow of patient information and quality improvement measures. CAMC provides comprehensive stroke care, from acute stroke treatment in the emergency room to neurointerventional and cardiovascular surgery and rehabilitation following discharge.

"Telestroke has revolutionized stroke care," said neurologist and stroke specialist, Konark Malhotra, MD. "We are lucky to have this technology at CAMC as it further improves our stroke care."

Telemedicine gives us the opportunity to be virtually present, take action, give the appropriate medication in a timely manner and provide the excellent care that patients need.

> - Samip Borad, M.D., Neurologist



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DID YOU KNOW...?

All HealthNet Aeromedical Services team members will have trained over 450 hours before he/she is cleared to work as part of a team.

That is just one more way our program remains Mission.Ready.

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