Archives



Gamma Knife® Perfexion™ at Archbold

Precision second to none



Chronic wounds

HOW THEY HAPPEN AND HOW WE TREAT THEM

p. 8

Hospice

GET THE TRUTH, NOT THE MYTHS

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HOSPICE: DON'T FALL FOR MYTHS Learn how hospice care could help you or a loved one.



WHAT'S NEW AT ARCHBOLD?

News and facts from across the hospital system

WHEN THE CHIPS ARE DOWN Poker run and car show promote suicide awareness

THE GAMMA KNIFE® PERFEXION™ Unmatched precision + high level of comfort = a medical success story

RECENT ADDITIONS TO OUR TEAM Read up on Archbold's newest doctors and nurses

ARCHBOLD FOUNDATION Events and opportunities

REASONS TO BE GRATEFUL?

"Gratitude," said the Roman philosopher Cicero, "is not only the greatest of virtues but the parent of all the others." Have you received outstanding care at Archbold, and would you like to show your appreciation? The Grateful Patient Program now allows you to do just that. See page 22.

Information in ARCHIVES MAGAZINE comes from a wide range of medical experts. If you have any concerns or questions about specific content that may affect your health, please contact your healthcare provider. Models may be used in photos and illustrations. 2015 © Coffey Communications, Inc. All rights reserved. CMM31394



Get off the path to diabetes.



We answer your FAQs about sleep disorders.

Attaining Perfexion™

TWELVE YEARS AGO, Archbold became the 68th hospital in the country to acquire a very special technology—the Gamma Knife®. At the time, acquiring the technology gave us the opportunity to treat previously untreatable tumors, malformations and functional disorders in the brain without opening the skull at all.

But the way we provide care evolves, and so does the technology.

Over 900 patients later, and with many successful outcomes from the talented multi-disciplinary Gamma Knife® team at Archbold's Lewis Hall Singletary Oncology Center, we're again at the threshold of being able to treat the previously untreatable.

This fall, Archbold patients will have access to the latest generation Gamma Knife®: Perfexion™. Gamma Knife® Perfexion™ will allow our Gamma Knife® team to go beyond the capabilities of the previous Gamma Knife®, expanding the opportunities of what we can treat. Disease and malformations that were once inaccessible in the head and neck will now be treatable.

Gamma Knife® was considered the worldwide "gold standard" for noninvasive brain surgery when we first began treating patients with it. Gamma Knife® Perfexion[™] has maintained that reputation because of many benefits that set it apart from other noninvasive systems, including accuracy, incorporation of information in 3-D from different imaging systems, sparing healthy brain tissue, and the ability to treat multiple sites in a day.

Perfexion™ is an example of our passionate commitment to providing the best care possible. But it's also an example of how unique Archbold is and how lucky we are to have it and the physicians and clinicians that use it.

We remain one of only four hospitals in Georgia to have Gamma Knife®, including the distinction of the only hospital with a Gamma Knife® south of Augusta in Georgia and in Florida's Big Bend region.

It's a great source of pride for us and a great opportunity for patients in our region to have advanced technology available close to home.



J. Perry Mustian President and CEO Archbold Medical Center



Vhy we give

JOE AND THERESA BROWN

WHEN ASKED TO BE on the Archbold Foundation board in 2004, Theresa Brown pondered a bit and then thought, "Everybody in this community has an obligation to do something for our wonderful hospital as it fills such a need for the whole area—I have to say yes."

"We like to think of Archbold especially for memorial gifts, a tradition started in 1952 when my great-grandmother died—my mother gave a room in the original hospital in her memory, and we children were so proud to see the plaque and know our family had done something for the hospital," says Theresa. "I loved being a candy striper at Archbold in high school, and Joe's mother, a graduate nurse, enjoyed her Gray Lady volunteer work there in the 1970s."

"We are proud of the grand reputation and the proud history of our hospital," says Joe. "A hospital such as Archbold is important in bringing other people and organizations of quality to town. We all must think of Archbold in our giving plans."

News and events

Brooks County Hospital adds digital mammography

ARCHBOLD'S Brooks County Hospital (BCH) recently added digital mammography to the hospital's list of services offered in Brooks County.

"Digital mammography is considered the gold standard of care in imaging for detecting breast cancer early, when it's best to treat," says Robyn Jimenez, physician assistant at Brooks Medical Associates.

The technology uses compression and

x-rays to image breast tissue, but instead of capturing it on film, it is captured on a digital image file that is saved directly onto a computer.

"Digital images reviewed on a computer allow the radiologist to lighten and enlarge the images if needed," says Brooks Medical Associates primary care physician Michael Sopt, MD. "Also, because the images are stored on a computer, they're able to send the images

to other radiologists and specialists for further review more quickly than if using conventional mammography films."

Comfort and care

In addition to the installation of the new digital mammography technology, the hospital also recently renovated the mammography suite to provide patients with a comfortable atmosphere.

"We understand how important it is to our patients to have access to high-quality technology locally," says Ken Rhudy, administrator at BCH. "We are very excited to add this breast cancer screening technology to our list of high-quality outpatient services offered locally in Brooks County."

Take care of yourself

If it's time for you to schedule a screening, consider digital mammography at BCH. A physician's order is required to get a mammogram, so talk with your doctor about your risks. For more information or to schedule a mammogram appointment



at Brooks County Hospital, call **229.263.6314**.



Archbold offers new inpatient palliative care program

THE BEST POSSIBLE quality of life. Relief from pain. Emotional support. If you're facing a serious illness, that's what you hope for. And it's Archbold Memorial Hospital's new program's goal.

Archbold's new inpatient palliative care program provides medical and emotional support for patients in the hospital who are trying to cure, slow or manage a disease.

"Unlike hospice care, which focuses on the final months of life, palliative care is available at any stage of an illness—and it can be offered along with treatments that could cure you or extend your life," says certified geriatric nurse practitioner Jane Murray, head of Archbold's new program.

Archbold's palliative care team of specially trained doctors work with nurses, a social worker and chaplain, and the patient's doctor to ensure the patient is as comfortable as possible.

"We can help families find assistance to build a wheelchair ramp at home or recommend a patient with breathing issues be sent home with a nebulizer machine," says Murray. "The services we provide are tailored to each patient's individual needs."

Sometimes it can be difficult for patients to understand their care.

"I really help 'tie all the information together' when talking with patients," says Murray.

Palliative care services are available by referral. If you or a loved one is interested in a palliative care consult, ask your doctor.

For more information on palliative



care at Archbold, please call **229.228.8252**.

Grady General Hospital names Harlow director of nursing

GRADY GENERAL HOSPITAL

recently announced Tammy Harlow, RN, MSN, MBA, as director of nursing for the hospital, a 60-bed acute-care facility in the Archbold Memorial Hospital system. Harlow has over 23 years of health care experience, the majority of which she's served in nursing leadership roles.

Harlow earned an associate of science degree in nursing from Augusta State University, a bachelor of science in nursing degree from the University of Phoenix, and a master of science in nursing degree from the University of Phoenix. She also earned



Tammy Harlow, RN, MSN, MBA **Director of Nursing Grady General Hospital**

a master of business administration degree in health care management from the University of Phoenix.

Harlow began her career as a staff nurse in critical care and emergency medicine in 1992. She has since served in many leadership roles, including her most recent position as chief nursing officer at Riverview Regional Medical Center in Gadsden, Alabama.

"Tammy is a great addition to our Archbold team at Grady General Hospital," says Crystal Ramm, administrator of Grady General. "Her experience in health care and nursing leadership will be very valuable as she leads our nursing team in her new role as director of nursing."

"I'm honored to join the Archbold health system and the great team we have at Grady General," says Harlow. "I'm really looking forward to working with our staff and physicians to continue the tradition of providing our patients the very best quality health care."

Extended hours at Medical Group of Mitchell County

HOMEWORK, ball practice and dance—in addition to a 40-hour work week. As we adjust to the everyday grind, it's easy to neglect your health.

"We hear too often patients don't have time to come to the doctor or they can't come during regular business hours," says Archbold Family Nurse Practitioner Martha Hanna, FNP-C, at Archbold's Medical Group of Mitchell County.

Medical Group of Mitchell County, a primary care practice in Camilla that's part of the Archbold health system, extended

their office hours beginning Aug. 1, 2015. They will accept appointments until 7 p.m., Monday through Thursday.

"It's intended to really help the patient that can't get off work to come in for a check-up," says Hanna.

The practice is not accepting after-hours walk-ins, but its patients can schedule a same-day appointment.

For more information on extended hours at the Medical Group of Mitchell

County or to make an appointment, call 229.336.1949.



The Gold Seal of Approval reflects Archbold's systemwide commitment to safe and effective care.

Archbold facilities gain gold

ARCHBOLD CARES for the community's health, and it shows—in a big way. Recently, several Archbold nursing homes and hospitals were surveyed by different organizations, and the results clearly show that Archbold is committed to providing the best care for people in our community.

Glenn-Mor Nursing Home, Pelham Parkway Nursing Home (PPNH) and Mitchell Convalescent Center (MCC) recently underwent rigorous state surveys. MCC and PPNH received perfect scores on their surveys with zero deficiencies, and Glenn-Mor had three deficiencies, which is well below the state average. (See also page 18.)

Brooks County Hospital, Grady General Hospital and Mitchell County Hospital earned The Joint Commission's Gold Seal of Approval for Hospital Accreditation by demonstrating continuous compliance with its performance standards. All three were recently surveyed by The Joint Commission. During the review, a team of commission surveyors evaluated compliance with hospital standards related to several areas, including emergency management, environment of care, infection prevention and control, leadership, and medication management. Surveyors also conducted on-site observations and interviews with employees and physicians.



3 facts about depression

NO ONE is a stranger to sadness. But usually that sadness is fleeting.

There is another kind of sadness, however, that can persist for weeks, months or even years if left untreated: depression. And its symptoms can be so severe that it can make it difficult to work, concentrate, sleep or even eat.

Should depression ever affect you, here are three crucial things to know:

Depression is not a sign of a character flaw or weakness. Rather, it may be brought on by an imbalance of chemicals in the brain. That imbalance may be passed on by genes—as the tendency to develop depression sometimes runs in families—emotional stress, or certain medicines or medical conditions.

"Depression is highly treatable,"

says Archbold psychiatrist Eugene Sun, MD. "And the sooner that treatment begins, the better. Early diagnosis and treatment can help keep your depression from lasting a long time, becoming more severe or recurring. Most important, treatment can lift your spirits and help you feel like yourself again."

Typically, that treatment involves talk therapy or medicines called antidepressants—or a combination of both.

You're not alone. By some estimates, more than 19 million Americans in a given year find themselves coping with depression. And while the condition is never a normal part of life, it can happen to anyone.

Know the signs. Don't let any misguided embarrassment keep you from getting the treatment you deserve.

Dr. Sun recommends that you tell your doctor right away if symptoms such as these persist for two weeks or longer:

- Feeling sad or empty.
- Feeling hopeless, irritable or anxious.
- Losing interest in things you once enjoyed.
- Not being able to sleep or eat, or sleeping or eating too much.



Eugene Sun, MD
Psychiatry
Archbold Northside Center for
Behavioral Psychiatric Care

Ride for Suicide Awareness poker run and bike show

ARCHBOLD NORTHSIDE will hold the fifth annual Ride for Awareness on Saturday, Sept. 26, 2015. The community is invited to gather for a 50/50 raffle, door prizes and a bike show starting at 9 a.m. Bike show and raffle winners will be announced at 1:15 p.m. As a way to honor and celebrate the lives of loved ones lost to suicide, the Archbold Northside Suicide Memory Wall will also be available at the event.

"Suicide's causes are complex and determined by multiple factors," says Jim Terry, Archbold Northside administrator. "But it's important to know that suicide affects all ages, cultures, socioeconomic and religious groups." What you can do as a family member or friend is to identify risk factors and recognize warning signs early.

For more information on the Ride for Awareness, or to learn more about preventing suicide, call Archbold Northside at 229.228.8131 or email pokerrun@archbold.org.



PREDIABETES

On the road to prevention

SOMETIMES, if we're lucky, we hear about an accident or some construction that is blocking our usual drive to a familiar place. With enough warning, we can often change our route and avoid the problem. Learning that you have prediabetes is a little like that.

The condition means your blood sugar levels are higher than normal, though not high enough to be considered type 2 diabetes. However, you are at much greater risk for developing full-blown diabetes—a potentially life-threatening disease.

Having prediabetes doesn't mean you'll definitely get diabetes. In fact, you can view this as an opportunity—a second chance to keep that from ever happening. How? By making some changes in your eating and exercise habits—changes that are very doable. With

any luck, you may be able to reverse the course you're on. This can start in childhood, and it's never too late.

What's up? Blood sugar. "Before people are diagnosed with type 2 diabetes, they almost always have prediabetes," says internist William Cooper, MD. "Risk factors include being older than 45 and overweight and not exercising much."

As people begin to inch closer to diabetes, their bodies might start to have trouble using insulin—a hormone that helps the body turn glucose (a sugar we get from foods) into energy to power cells.

"As diabetes develops, glucose starts to build up in the bloodstream. Over time, high glucose levels can begin to damage the body," says Dr. Cooper.

Turn it around. Again, diabetes doesn't have to be in your future.

Research shows that healthy eating and exercise habits can significantly help you prevent or at least delay the progression to type 2 diabetes. If you're overweight, losing just 5 to 10 percent of your weight can make a difference. That's as little as 10 pounds for a 200-pound person.

Losing weight comes down to using up more calories than you take in. But don't do the diet thing. Instead, remind yourself that you will be making healthy eating and exercise habits a regular part of your life from now on. You can start to make those changes in small but meaningful ways, like these:

Eat right. Try eating a little less of foods that are high in fat. Bite for bite, they pack more calories than low-fat foods—and any calories your body doesn't burn are stored as fat.

Move it to lose it. If you normally watch TV after dinner, why not enjoy a short walk with a friend or loved one instead?

Exercising regularly helps you burn calories, so it goes hand-in-hand with healthful eating. But activity also helps your body use insulin. Often, a good goal to work up to is at least 150 minutes of moderately intense exercise, such as brisk walking, each week. Start slowly, and see where your footsteps lead.

Be sure to talk with your doctor about what steps you should take to help lower your blood sugar and stay off the road to diabetes.



William Cooper, MD Internal Medicine McIntosh Clinic



CHRONIC WOUNDS

What to do when wounds won't heal?

SOMETIMES A WOUND can linger for months, causing pain and making life miserable. Treating these chronic wounds requires special care.

How they happen

"The most common chronic wounds are venous ulcers, pressure sores and diabetic ulcers," says general surgeon Greg Patterson, MD, medical director of Archbold's Wound Care and Hyperbaric Center.

Venous ulcers. These are caused when veins in the legs are unable to push blood back toward the heart.

"The blood pools, which causes swelling, inflammation and sores. It's the most common type of lower body ulcer," Dr. Patterson says.

People at highest risk include older adults, women and people who are overweight. Prevention includes wearing compression stockings to keep blood moving through veins in the legs.

Pressure sores. When someone stays in one position too long, the

ongoing pressure hampers blood flow especially at bony spots like the tailbone, hips or heels. And that can trigger sores.

"Bedridden people and people who use a wheelchair are among those most likely to get these ulcers, which used to be called bedsores," Dr. Patterson says.

Prevention includes keeping skin clean and dry and changing positions often.

Diabetic ulcers. These develop as a result of nerve damage, a common consequence of diabetes. A loss of feeling means even minor injuries go unnoticed, allowing infection to set in.

"Prevention includes tight control of blood sugar, daily foot checks, frequent visits to the doctor, and wearing proper shoes and socks," Dr. Patterson says.

Healing options

Treatment of a wound will depend on its type and severity. In general, though, wounds should be kept clean and covered: blood flow, maintained: and infections, treated with antibiotics and dressings.

HBOT helps heal wounds

The Archbold Center for Wound Management and Hyperbaric Medicine uses large, submarinelike hyperbaric oxygen treatment (HBOT) chambers like the one pictured at left to treat patients with wounds that are difficult to heal.

While enclosed in the chamber, a patient breathes 100 percent oxygen at an atmospheric pressure that is two times greater than normal. The extra oxygen goes into the bloodstream and helps speed healing, decrease swelling and inflammation, and increase the body's ability to fight infection.

"In some stubborn cases, certain people with chronic wounds may need hyperbaric oxygen therapy," says Dr. Patterson. "It involves breathing pure oxygen while in a sealed, pressurized chamber. This can help wounds heal. In other cases, surgery may be needed to get rid of dead tissue."

The chamber is pressurized but comfortable. The sensation felt by the patient has been described as similar to having one's ears pop while flying on an airplane.



Greg Patterson, MD General Surgery South Georgia Surgical Associates

Manage your weight the

healthy Way

IT MAY BE TEMPTING to try something exotic

for fast weight loss. An all-kumquat diet, or a one-weekend exercise marathon.

But it wouldn't be healthy. And any weight you lost would likely come back.

"If you want to lose weight, a long-term healthy plan for eating and exercising is still best," says Kendra Lynch, MD. "It's not new or trendy. But it works for most people."

What's on your plate?

Dr. Lynch says a healthy diet combines fewer calories with more nutrition. You can get both with a diet that:

- Has mostly fruits, vegetables, whole grains, and low-fat or nonfat dairy products.
- · Includes lean meats, fish, eggs, beans and nuts.
- Limits unhealthy fats, cholesterol, salt and added sugars.

"Aim to lose between one and two pounds per week. It's a healthy goal and one you can meet," Dr. Lynch says. "That usually means eating 500 to 1,000 fewer calories each day."

Try keeping a record of everything you eat. It may help you spot problems in your diet.

Time to get active

Exercise is good for you in so many ways. It helps you manage your weight by burning calories. It also:

- Lowers your risk for heart disease, diabetes and other long-term health problems.
 - Makes your lungs and muscles stronger.
 - Helps you sleep better.

"Aim for 150 minutes of exercise spread out over the week," says Dr. Lynch. "The more you exercise, the better, but be sure to talk with your doctor before starting a new exercise program."

Is medicine an option?

If you have tried to lose weight without success, ask your doctor about weight-loss medicine.

It won't make you lose weight on its own. But it can help when added to a diet and exercise plan.

"Many of these drugs have side effects," says Dr. Lynch. "So be sure to ask your doctor about the risks and benefits."



Kendra Lynch, MD Family Practice Cairo Medical Care

HOME DIALYSIS

Treating kidney disease at home

If your kidney diagnosis is new, you may feel overwhelmed by the treatment options available. Learn all you can, and be active in decisions about your care.

Hemodialysis, a treatment that replaces the work of your own kidneys to clear wastes and extra fluid from your blood, is done using a special filter called a dialyzer or artificial kidney. Your blood travels through plastic tubing to the dialyzer, where it is cleaned and then returned to you. At the beginning of each treatment, two needles are placed into your access. These needles are connected to the plastic tubing that carries your blood to the dialyzer. Only a small amount of blood is out of your body at any one time. The dialysis machine pumps your blood through the dialysis system and controls the treatment time, temperature, fluid removal and pressure.

The basic process is the same for peritoneal dialysis, except you and a care partner are trained to do your treatment at home. Peritoneal dialysis (home dialysis) is a way to remove waste products from your blood when your kidneys can no longer do the job adequately. It's simple, gentle and effective, and a convenient alternative to in-center hemodialysis, which is usually done three times a week for three to four hours or longer each session. By choosing home dialysis, you may be better able to fit your treatments into your schedule. The more you know about your treatment and the more you do on your own, the better you are likely to do on dialysis.

KIDNEY DISEASE

Filter this

AS WE GET OLDER, our kidneys start to work a little less efficiently. That happens to all of us.

About 1 in 10 adults in this country, however, loses kidney function because of a serious disease that grows worse over time. Doctors call it chronic kidney disease (CKD). It slowly damages the kidneys, keeping them from working normally and filtering extra fluid and harmful wastes out of the body.

"Left untreated, CKD can cause kidney failure, requiring either dialysis or a kidney transplant," says W. Merrill Hicks Jr., MD, Archbold nephrologist. "But early treatment can help keep the kidneys healthy and delay kidney failure—or even prevent it altogether."

Should you be tested? Many people with CKD don't know they have it until their kidneys are on the verge of shutting down. That's because CKD rarely causes symptoms until it's advanced. Dr. Hicks says it's possible to know sooner if you get your kidneys checked with these tests:

- A blood test that checks your GFR—short for *glomerular filtration rate*. GFR is an estimate of your kidney's filtering ability.
- A urine test for albumin—a protein that can pass into the urine if your kidneys are damaged.

"Getting tested is a must if you have a heightened risk of CKD—for example, if you have either high blood pressure or diabetes, the two leading causes of CKD," says Dr. Hicks. "You should also be tested if you have heart disease or a family history of kidney disease, which also raise risk."

If testing reveals that you do have CKD, your doctor will help you take steps to spare your kidneys any more damage. The most crucial one is to keep your blood pressure at the level your doctor advises.

Finding problems early can help keep kidneys from failing.

Two types of blood pressure medicines—ACE inhibitors and angiotensin receptor blockers—may slow CKD. These drugs can help people with CKD even if they don't have high blood pressure.

Be sure to take any medicine your doctor advises exactly as prescribed. Follow through, too, with any lifestyle changes your doctor suggests to control your blood pressure, such as cutting down on salt or losing weight.

Likewise, if you have diabetes, keeping your blood sugar in your target range will help protect your kidneys. And if you smoke, you'll help your kidneys if you quit.

For more information on home dialysis programs, call Archbold's Southwest Georgia Dialysis Facility at **229.227.5000**.

W. Merrill Hicks Jr., MD Nephrology Archbold Nephrology Group



Not nodding off?

ANSWERS TO SOME FREQUENTLY ASKED QUESTIONS

How much sleep do we need?

A Most people need about eight hours of sleep at night. It is common for people to say they do not need that much sleep, but experiments have shown that is usually not the case.

What are some misconceptions about sleep disorders?

A One of the common misconceptions about sleep that I see is that people think having a sleep disorder means they simply can't sleep. A great number of people experience excessive sleepiness as their main symptom of a problem. They may sleep at night, but they are also easily susceptible to falling asleep during the day. A person with a sleep disorder may also be totally unaware of any sleep issues at night. That is why it is always important to talk to bed partners, family members or others who are more aware of what is going on with someone during their sleep.

What's the most common sleep disorder?

A Insomnia, which means difficulty falling or staying asleep. There are many different reasons for this problem. When talking to someone about insomnia, I discuss their sleep habits. Regular bedtime and wake-up times are encouraged, and people should avoid alcohol, caffeine and nicotine, especially in the evening. If people aren't doing the basics right on a regular basis, then it can be hard to get a good night's sleep.

Can a sleep disorder be a sign of a serious health disorder?

A One of the most common sleep disorders we see is a condition known as

obstructive sleep apnea, or OSA. A person with this problem will almost always have significant snoring, and a bed partner will often notice episodes when the breathing seems to stop—this is called an apnea. A person with OSA will usually have no idea that they breathe like that. They often complain of feeling fatigued during the day. It is important to diagnose and treat this condition, however, because it may worsen heart disease and hypertension, problems with blood sugar control in diabetes, and may contribute to problems of memory and thinking.

What makes Archbold Memorial Hospital's Sleep Center programs unique?

A There is the commitment to quality. All of the studies are reviewed by specially trained sleep technicians and a physician who is board-certified in sleep medicine. The studies done in the Sleep Center also emphasize patient comfort in order to get the best information possible. Parents or other significant others can spend the night too. The Sleep Center works with your regular physician, providing him or her with important information regarding your health and being here for you locally for follow-up and care as needed.

From apnea to zzz's, Archbold Memorial Hospital's Sleep Center is here to help. Talk with your doctor about a sleep study, or call **229.228.2729**.



Craig Wolff, MD Pulmonology, Sleep Medicine McIntosh Clinic



GAMMA KNIFE® PERFEXIONTM

Precision second to none

Conditions treated with the Gamma Knife®

- **AVM**—an abnormal connection between arteries and veins, bypassing the capillary system. Although many AVMs are asymptomatic, they can cause intense pain or bleeding or lead to other serious medical problems.
- *Trigeminal neuralgia*—a neuropathic disorder with symptoms of intense pain in the face that originates from the trigeminal nerve.
- **Acoustic neuromas**—noncancerous and usually slow-growing tumors that develop on the main nerve from the inner ear to the brain and directly influence balance and hearing.
- **Pituitary tumors**—abnormal growths that develop in the pituitary gland and can cause excessive production of hormones that regulate important functions of the body.
- **Brain metastasis**—a cancer that has metastasized (spread) to the brain from another location in the body.

WITH THE ABILITY to deliver a noninvasive but highly accurate therapeutic dose of radiation to the brain with Gamma Knife®, Archbold Memorial Hospital has transformed treatment for patients across the region with brain disorders and cancer metastases (cancer that has traveled to the brain from elsewhere in the body) for the last 12 years.

Using this state-of-the-art radiosurgery equipment, the Gamma Knife® team has successfully treated over 900 patients since the hospital acquired the equipment through the generosity of Archbold Foundation donors in 2003.

This fall, Archbold's Gamma Knife® team will welcome technology that is expected to redefine excellence in stereotactic radiosurgery in the South Georgia/North Florida region—again.

The Gamma Knife® Perfexion™, the gold standard treatment for radiosurgery of the brain and the new benchmark for which all other stereotactic radiosurgery options are measured, will be available to patients in Thomasville later this fall. Archbold is one of only 275 hospitals worldwide to acquire Gamma Knife®. And Archbold is the only hospital in the region with Gamma Knife® Perfexion[™] technology—the latest and most precise radiosurgery technology to hit the market.

The Gamma Knife® Perfexion™ functions similarly to earlier models in that there is actually not a knife, in the normal sense of the word. The major advantages of the Perfexion™ is the revolutionary new positioning system that wraps doses of radiation around the most complex shapes of brain malformations and disorders.

How does Gamma Knife® technology work?

Simply put, the Gamma Knife® technology uses simultaneously focused radiation—a cobalt-60 isotope—to destroy tumors and other brain disorders without opening the skull.

"The system precisely targets even the smallest tumors with sub-millimeter precision," says Archbold radiation oncologist Steve Johnson, MD. "Each beam has a relatively low energy, so the radiation has virtually no effect on the healthy brain tissue it passes through. At the focal point, however, all the beams converge to deliver a high dose of radiation that kills the cancer cells, even in deep-seated tumors with irregular shapes."

Why upgrade to Gamma Knife® Perfexion™?

Archbold physicians say the technology offers unparalleled advantages. The precision, automation and reliability of the technology are unmatched.

"The main difference between the PerfexionTM and the former Gamma Knife® model is in the automation," says Gerald Kadis, MD, Archbold neurosurgeon. "Just like the former technology, we don't make an incision in the patient's head at all. That hasn't changed. But with the new design and automation of the PerfexionTM, we can access much harder-to-reach places in the brain."

The advancements in Perfexion™ make the whole radiosurgery process even more streamlined.

"There is a vastly improved capability to treat multiple lesions in a single session due to the system's special beam shaping technology," says Craig Fredericks, MD, Archbold neurosurgeon. "The Gamma Knife® is noninvasive, so patients that are candidates for this type of procedure have much quicker recoveries compared to those who have open surgery. And now that we can treat multiple lesions at one time, we can help patients with very complicated cases using this technology."

"The main difference between the Perfexion™ and older models of the Gamma Knife® is a new configuration of the cobalt-60 radiation sources relative to the gamma ray beam shaping collimation system," says David Saunders, MD, Archbold radiation oncologist. "This improvement has increased the treatment volume range. We can now treat targets that were previously unreachable. When combined with the PerfexionTM's superior software planning system, a treatment plan can now be generated and executed much more efficiently, thereby decreasing the overall treatment time for both patient and physicians."

"We have had amazing success with the original Gamma Knife® technology for the past 12 years," says Dr. Johnson. "And the Perfexion™ will help us continue with that tradition, but also allow us to take our Gamma Knife® program to the next level. With Perfexion[™], we can provide treatment for patients with even more complicated cases, who otherwise might not have had any treatment options at all. We're very excited to have access to this new technology, and we're proud to offer our patients the most advanced and precise radiosurgery technology available."

Archbold remains one of only four hospitals in Georgia to have Gamma Knife® technology, and the only hospital with Gamma Knife® south of Augusta in Georgia and in Florida's Big Bend Region.

Numbers to know

Number of hospitals worldwide who have acquired Gamma Knife® technology

Over 900 patients treated at Archbold's Gamma Knife® Center since 2003

Accuracy of gamma radiation beams

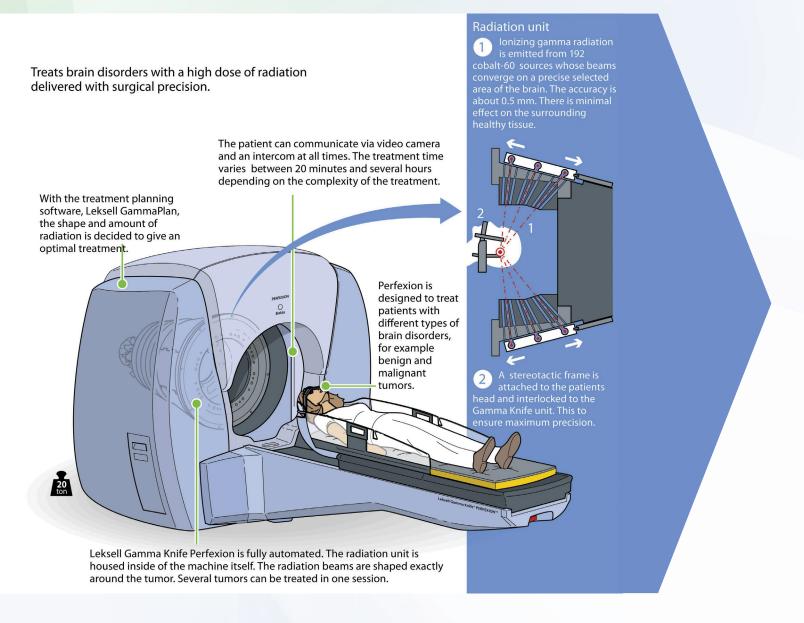
Weight of the Leksell

Gamma Knife® Perfexion™

Years that Archbold Memorial Hospital's Gamma Knife® Center has served patients in our area

Number of studies that document the positive outcomes and results of Gamma Knife® technology

How does the Gamma Knife® work?



Why do physicians recommend Gamma Knife® Perfexion™?

- It has proven clinical results—More than 3,000 publications document the positive outcomes and results.
- It's a noninvasive technique—This means the patient can usually return to their normal lifestyle the day after treatment.
- **Gamma Knife® radiosurgery is constantly evolving**—New indications are being researched, and the excellent results have led to increasing acceptance. This leads to more treatments, and a greater need for Gamma Knife® systems.
- *Imaging is getting better*—MRI is widespread, and 95 percent of Gamma Knife® procedures are based on MRI. Thus, as MRI gets better, so does Gamma Knife® radiosurgery.
- *Patient awareness*—Patients and their families are more aware of the benefits of Gamma Knife® radiosurgery as compared to other techniques, and more patients are referred to Gamma Knife® treatment. This includes both doctor and self-referrals.

Gamma Knife®: Simple and painless

THE GAMMA KNIFE® treatment procedure is simple, painless and straightforward. The treatment consists of five steps:

Attaching the stereotactic head frame. The frame allows the physicians to accurately pinpoint the target to be treated in the patient's brain. The lightweight frame, which is attached to the patient's head with four pins, ensures that the radiation beams can be directed with precision at the target. The frame also prevents the patient's head from moving during imaging and treatment. Local anesthetic is applied where the pins are to be attached.

Imaging: CT, MRI or angiography. Imaging is required to determine the exact size, shape and position of the tumor. During imaging, a coordinate box is placed on the head frame to provide reference points on the images for the treatment plan. After imaging, the coordinate box is removed.

Treatment planning. Once your images have been taken, the patient rests while the Gamma Knife®

team develops a very precise and accurate treatment plan. Each treatment plan is unique; every patient's plan is individually designed to address the specific medical condition. The Gamma Knife® team makes the plan in a specially designed computer and calculates how the treatment should be performed.

The treatment. Once the patient's treatment plan is complete, the actual treatment can start. The patient lays down on the treatment couch and the head frame is attached. The patient is awake during the procedure and able to communicate with the doctors and nurse through an audio and video connection.

When the treatment begins, the couch moves into the dome section of the unit. The treatment is silent and totally painless. Often the patient will listen to music during the treatment, and they are actually encouraged to bring the music of their choice. The team monitors the procedure at all times.

The treatment lasts somewhere between a few minutes to more than an hour, depending on the number of tumors that are treated, as well as the size and shape of each target.

After treatment. When your treatment is complete, the head frame is removed. Some patients experience a mild headache or minor swelling where the head frame was attached, but most report no problems. Most patients are able to return to normal routines in a day or so.

What happens next?

The effects of treatment occur over time. Radiation treatments are designed to stop the growth of tumors or dysfunctional tissue, which means that the effect will be seen over a period of weeks or months. The Gamma Knife® team stays in contact with patients to assess their progress, which may include follow-up MRI, CT or angiography images.

For more information about Gamma Knife®, call 229.584.5400.



The Gamma Knife® team

From physics to radiation oncology, and neurosurgery to nursing, the dynamics of Archbold's Gamma Knife® team haven't changed in the last 12 years, and that's a primary reason the program has been so successful. The team is composed of physicist Ramesh Nair, PhD; a Gamma Knife®-trained nurse, Janet Collins, RN, BSN; neurosurgeon Gerald Kadis, MD; radiation oncologists David Saunders, MD, and Steve Johnson, MD; and neurosurgeon Craig A. Fredericks, MD.

The language of flowers

Through the generosity of many community members, patients of Hospice of Southwest Georgia receive beautiful flower arrangements made especially for them. Flowers are donated by local organizations and individuals. Volunteers from area garden clubs arrange the flowers that are delivered to hospice patients by hospice staff and volunteers.

Participating garden clubs in Thomasville include Lady Banks, Rambler Rose, Briarcliff, Killarney Queen and the TCGI Council. The Flower Angel Ministry serves Hospice of Southwest Georgia's patients in Grady County, and the flowers are arranged by Marie Ansley. Flowers by Cooper serves Hospice of Southwest Georgia's Bainbridge patients.



Become a hospice volunteer

IF YOU HAVE A HEART for helping people, we need you as a Hospice of Southwest Georgia volunteer! We provide training and allow you to help in the area that interests you.

Our volunteers use their talents in many ways to help our patients and their families. Some help in patient homes, nursing homes and hospitals, or even in the hospice office. You can also volunteer when it is convenient for you.

How you can help

- Arrange and deliver flowers to patients.
- Assist patients with writing letters and journaling.
- · Help family members with errands.
- Be a friend to patients and their families.
- Assist in the hospice office.
- Participate in pet therapy.
- · Assist patients with meals.
- · Visit with patients and their families.
- Call and check in with patients and their family members.
- · Read to patients.
- Help with hospice events.

For more information on becoming a hospice volunteer, call

volunteer coordinator Betty Ann NeSmith at 229.584.5500.







A COMMON MISCONCEPTION

is that hospice is about end-of-life care.

The reality is hospice helps patients and their family members focus on living.

"Hospice care brings comfort and peace to help people with life-limiting illness live every moment of life to the fullest," says Jason Griffin, MD, medical director of Hospice of Southwest Georgia.

Enrollment in hospice care offers patients, as well as their family members, a number of benefits. But according to Dr. Griffin, there are still some important facts about hospice that people don't know which prevents them from receiving the best care possible.

Myth: Hospice is a place you go when nothing else can be done.

Fact: Hospice is not a place—it's high-quality medical care that helps the patient and family caregivers focus on comfort and quality of life. Hospice serves people living in nursing homes and assisted-living facilities, as well as in the comfort of the patient's home.

Myth: Not everyone can afford hospice care.

Fact: Hospice is paid for by Medicare, Medicaid, most insurance plans, HMOs and managed care plans. Fear of costs should never prevent a person from accessing hospice care.

Myth: Hospice is only for the elderly. Fact: Hospice serves anyone with a

life-limiting illness, regardless of age or type of illness. Hospice serves people of all backgrounds and traditions; the core values of hospice—allowing the patient to be with family, providing spiritual and emotional support, and treating pain—are appropriate for differing

Myth: Patients on hospice only have a few days left to live.

Fact: Hospice patients and families can receive care for six months or longer. To get the most out of what hospice offers, it's better to have hospice care for more than just a few days.

Myth: I'll have a new doctor if I'm referred to hospice.

Fact: A patient may keep his or her referring physician involved while receiving hospice care. Our hospice team communicates with your physician to

make sure he or she is aware of how you're doing while you're in our care.

"Research has shown that the majority of Americans would prefer to be at home at the end of life's journey," says Dr. Griffin. "Hospice care makes that possible for most people."



Jason Griffin, MD **Medical Director** Hospice of Southwest Georgia

Hospice of Southwest Georgia Bereavement Support Group

Hospice of Southwest Georgia offers a monthly Bereavement Support Group for those who have recently experienced the loss of a loved one. Support group meetings are led by trained Hospice of Southwest Georgia staff and provide an outlet and support system for those who are newly bereaved to share thoughts and feelings with others going through similar situations. Participants learn from both each other and hospice staff how to navigate the grief process and how to cope with their feelings after loss.

For more information on Hospice of Southwest Georgia's Bereavement Support Group, please call 229.584.5500.



NURSING HOMES

When only the best will do

When searching for a nursing home, schedule visits and ask tough questions. Be attentive to each home's personality and attitude toward its residents, and pick the facility that your family feels will be the best fit for your or your loved one's needs.

FAMILY MEMBERS tend to wonder when they'll know it's time to consider a nursing home to help care for a family member. But the reality is there really isn't a specific time for everyone—it varies a great deal from person to person and family to family.

"People go to long-term care facilities for different reasons," says Jamie Womack, administrator of Archbold's Mitchell Convalescent Center in Camilla. "Some go because they have chronic care needs or disabilities that require ongoing nursing care. Others go because they're recovering from surgery or dealing with a temporary illness or injury and they need extensive nursing care or rehabilitation to get better so they can return home."

Whether you're planning ahead or need to make an unexpected decision, knowing the questions to ask and what to look for in a long-term care facility is very important. Following these steps can help you find a nursing home that meets your needs.

Step 1: Find nursing homes in your area

To learn about the nursing homes in your area, ask people you trust, like your family, friends or neighbors if they've had personal experience with nursing homes. They may be able to recommend

a nursing home to you.

"Ask your doctor if he or she provides care at any local nursing homes," says Carolyn Friday, administrator at Archbold's Glenn-Mor Nursing Home in Thomasville. "If so, ask your doctor which nursing homes he or she visits so you



may continue to see him or her while you're in the nursing home."

If you're in the hospital, ask your social worker about discharge planning as early in your hospital stay as possible. The hospital's staff should be able to help you find a nursing home that meets your needs and help with your transfer when you're ready to be discharged.

Step 2: Compare the quality of the nursing homes you're considering

Compare the care that nursing homes provide to help find the nursing home that meets your needs.

"Archbold's three nursing homes— Glenn-Mor Nursing Home, Pelham Parkway Nursing Home and Mitchell Convalescent Center—recently underwent rigorous state surveys by the Centers for

Medicare & Medicaid Services," says LaDon Toole, vice president of long-term care and system operations at Archbold. "All three of our long-term care facilities had excellent survey results, with Glenn-Mor scoring well above the state average and MCC and PPNH receiving perfect scores on their surveys with zero deficiencies. (See page 5.)

Step 3: Visit the nursing homes you're interested in or have someone visit for you

"Before you visit any nursing homes, consider what's important to you and think about some of the questions below," says Vickie Teemer, administrator of Archbold's Pelham Parkway Nursing Home in Pelham.

• Is the nursing home close to my family

and friends so they can visit often?

- Is a bed available now or can I add my name to a waiting list?
- How will the nursing home help me participate in social, recreational, religious, or cultural activities that are important to me? Can I decide when I want to participate?
- Do I get to choose what time to get up, go to sleep or bathe?
- Can I have visitors at any time? Will the nursing home let me see visitors who may come to visit at early or late hours?
- Is transportation provided to community activities and doctor appointments?
- Can I decorate my living space any way I want?
- How will the nursing home make sure I have privacy when I have visitors or personal care services? Would I be able to leave the facility for a few hours or days if I choose to do so?
- Who makes the plan of care and how do they know what I want or need, or what should be in the plan? Will I be included in planning my care?
- Who are the doctors that will care for me? Can I still see my personal doctors?
- If a resident has a problem with confusion and wanders, how does the staff handle this type of behavior to protect the residents?
- What does the quality information on Nursing Home Compare at **Medicare.gov/** nursinghomecompare show about how well this nursing home cares for its residents?
- Is there enough staff to give me the care I need?
- Will I have the same people take care of me day to day or do they change?

After reviewing each home's pros and cons, you can then develop a list of potential facilities. Schedule visits and ask tough questions. Be attentive to each home's personality and attitude toward its residents, and pick the facility that you and your family feel will be the best fit for your needs.

Meet our new providers

Thousands of people choose patient care at Archbold facilities every year. Our new providers are many great reasons why you should too.

Lauren Clemmons, MD, re-

ceived a bachelor of science degree in biology from Furman University.
Dr. Clemmons earned a doctor of osteopathic medicine degree from Lincoln Memorial University—DeBusk College of Osteopathic Medicine.
She completed a residency in family medicine at Manatee Memorial



Lauren Clemmons, DOFamily Medicine

Hospital in Bradenton, Florida. Dr. Clemmons will practice family medicine at the Medical Group of Mitchell County in Camilla.

Virginia Conrad obtained her bachelor of science degree in nursing from Our Lady of Holy Cross College in New Orleans and her masters of science in nursing degree from University of South Alabama in Mobile. Conrad is practicing hospital medicine with Southland MD and is seeing patients at Archbold Memorial Hospital.



Virginia Conrad Nurse Practitioner

Emily Copeland completed a bachelor of science degree in biology from Valdosta State University. She earned a master of medical science degree in anesthesiology from Emory University. Copeland practices anesthesiology with South Georgia Anesthesia Associates.



Emily Copeland Anesthesiologist Assistant

Elizabeth Dulaney-Cripe, MD,

received her bachelor of science degree in exercise science from the University of Cincinnati College of Allied Health Sciences, where she graduated magna cum laude. Dr. Dulaney-Cripe earned her medical degree from the University of Cincinnati College of Medicine. She completed her residency in



Elizabeth

Dulaney-Cripe, MD

Orthopedic

Surgery

orthopedics at Wright State University Boonshoft School of Medicine in Dayton, Ohio. She is joining the Archbold team at Archbold Orthopedic Group.

Martha Hanna earned a bachelor of science in nursing degree from the Medical College of Georgia and a master of science in nursing degree from Frontier Nursing University. She completed clinical training at Archbold's Pelham Primary Care Practice, The Shaw Center in Thomasville and The Pediatric Center in Cairo. She is a certi-



Martha Hanna Nurse Practitioner

fied family nurse practitioner and member of the American Academy of Nurse Practitioners. Hanna is now seeing patients at Medical Group of Mitchell County in Camilla.

Pranav Diwan, MD, received a bachelor of science degree in biological engineering from Louisiana State University in Baton Rouge, and earned a medical degree at SUNY Downstate Medical Center College of Medicine in Brooklyn, New York. He completed his residency in internal medicine at the University of Texas at Houston Health Sciences Center and completed



Pranav Diwan, MD Interventional Cardiology

fellowships in cardiology and interventional cardiology at Louisiana State University and the University of Toledo Medical Center in Ohio, respectively. Dr. Diwan is practicing interventional cardiology and will be treating patients at Archbold Memorial Hospital.

Primary care physicians and specialists work together to ensure your good health. For a comprehensive list of Archbold providers, visit www.archbold.org.

Deuel C. "D.C." McElreath

received his bachelor of science degree in biology from Valdosta State University and his master of science degree in physician assistant studies from South University in Savannah. McElreath joined Archbold Nephrology Group and is seeing patients at Archbold Memorial Hospital.



Deuel C. "D.C." **McElreath IV** Physician Assistant

Jane W. Murray, palliative care nurse practitioner, earned a bachelor of science in nursing degree from Jacksonville University. She earned a master of science in nursing degree from Walden University and completed her post-master's degree at Valdosta State University. Murray is seeing patients at Archbold Memorial Hospital.



Jane W. Murray **Nurse Practitioner**

Rainey Sellers, boardcertified advance practice nurse, received an associate of science degree in nursing from Bainbridge State College and a bachelor of science in nursing degree from Thomas University. She earned a master of science degree in family nurse practitioner from the University of Alabama



Rainev Sellers Nurse Practitioner

at Birmingham. Prior to becoming a nurse practitioner, Sellers worked as a registered nurse in the emergency department at Archbold Memorial Hospital. She has joined Thomasville Family Medicine, where she will practice family medicine.

Thomas Street, MD, earned a bachelor of science degree in industrial and systems engineering from the Georgia Institute of Technology and a doctor of medicine degree from Mercer University School of Medicine. He completed a residency in anesthesiology at the University of Alabama at Birmingham where he was also chief resident for



Thomas Street, MD Anesthesiology

the department of anesthesiology. Dr. Street practices with South Georgia Anesthesia Associates in Thomasville.

Jill Summerlin earned her associates degree in nursing from Abraham Baldwin College in Tifton. She obtained her bachelor of science degree in nursing from Thomas University and her master of science degree in nursing from the University of Alabama at Birmingham. Summerlin is a board-certified family nurse



Jill Summerlin **Nurse Practitioner**

practitioner and is seeing patients at the Archbold Memorial Hospital emergency department.

Brandi Warren, DO, boardcertified in family practice, received a bachelor of science degree from Valdosta State University. She received a doctor of osteopathic medicine degree from West Virginia School of Osteopathic Medicine. She completed a residency in family medicine at the University of Florida Health Shands



Brandi Warren, DO Family Medicine

Hospital. Dr. Warren is practicing family medicine at Shaw Living in Thomasville.

Robin Wilson is an advance practice registered nurse and certified nurse midwife. She completed an associate degree in nursing from Darton State College and a bachelor of science in nursing degree from Thomas College. She completed a master's degree in science with a focus in nurse-midwifery. Wilson joined



Robin Wilson Nurse Midwife

Primary Care of Southwest Georgia Midwifery Center in Thomasville where she will practice midwifery.



Archbold Foundation

Auxiliary. Donors, families and the com-

munity are invited to the lighting of the

tree, a ceremony that heralds the begin-

ning of the holiday season and offers

a celebration of life and remembrance

Grateful Patient Program

IF YOU OR A LOVED ONE has ever been a patient at John D. Archbold Memorial Hospital, you may have encountered a doctor, nurse, technician or volunteer who brought you great comfort and reassurance in a time of need. Many patients express their gratitude for their care through their kind words, smiles and letters of thanks. Hearing the words "thank you" from a patient is more meaningful to a caregiver than most people think.

Archbold Memorial Hospital's Grateful Patient Program now provides patients with another way to say "thank you" to a caregiver who may have made a difference in their lives. By honoring a caregiver who went the extra mile to care for you or a loved one, you will be making a tangible and meaningful impact on our ability to provide the absolute best in patient care to all who need it.

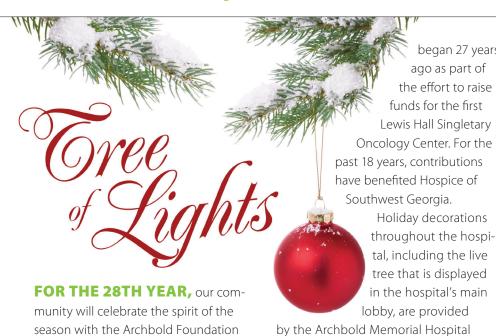
Gifts received through the Grateful Patient Program pay tribute to a caregiver who has enriched your life while also helping to provide essential resources for a healthier tomorrow—for you, your family and the communities we serve.

When a gift is made, the person you are honoring will be sent an acknowledgment letter expressing your thanks. The gift amount will be kept confidential, but the feeling of accomplishment will be felt for years to come.

To contact the foundation, please call **229.228.2924** or visit us online

at www.archboldfoundation.org.





began 27 years ago as part of also be lit to honor the tradition of the season.

This year's ceremony will take place wis Hall Singletary

for attendees. A Hanukkah menorah will also be lit to honor the tradition of the season.

This year's ceremony will take place Monday, Dec. 7, at 6 p.m. in the lobby of

Guests will enjoy refreshments and special music, followed by the arrival of Santa Claus. Gifts are acknowledged and cards for the Tree of Lights and Hanukkah are sent throughout December. A donation of \$10 per individual honored is suggested, but gifts of any size are welcome. Individuals honored and family members of those remembered receive a special card letting them know a gift has been given.

For more information about the Archbold Foundation Tree of Lights or to make a donation, call **229.228.2924** or visit **www.archboldfoundation.org**.

Monday, Dec. 7, at 6 p.m. in the lobby of John D. Archbold Memorial Hospital.

Guests will enjoy refreshments and special music followed by the arrival

Tree of Lights. For many in South

Georgia, it's a tradition to honor and

remember friends and loved ones by

making contributions to the Archbold Foundation. The Tree of Lights tradition



Archbold Classic

Monday, Nov. 9 Glen Arven Country Club Thomasville



By far our most popular fundraiser, this year's Classic promises to be another great day of fun and fellowship on the historic Glen Arven Country Club golf course in Thomasville. The Classic brings in professionals from the PGA, Seniors and Web.com tours to play alongside our amateur players, making it a unique experience for all involved. Past professional participants have gone on to great fame and fortune on the PGA tour, including Bubba Watson, Harris English, Chris DiMarco and Jason Dufner.

Please join us for another great event in November. For more information on sponsorship opportunities or to register to play in the Classic, please contact the Archbold Foundation at 229.228.2924 or online at www.archboldfoundation.org.





Camp HEAL

Saturday, Nov. 7 Camp Piney Woods Thomasville

This November, Hospice of Southwest Georgia will host the 10th annual Camp HEAL (Healing and Encouragement After Loss), a bereavement day camp that helps children ages 6 through 13 cope with the loss of a loved one.

Camper registration started Aug. 1, and the deadline to reserve a spot for a camper is Oct. 24. Applications are also being accepted for camp volunteers. The deadline for volunteer applications is Sept. 30.

For more information on registering a camper or becoming a Camp HEAL volunteer, please call the bereavement coordinator at Hospice of Southwest Georgia at 229.584.5500 or visit www.archbold.org/campheal. Camp HEAL is funded by generous donations to the Archbold Foundation.



A Pink Affair

Friday, Oct. 23 Singletary Oncology Center Thomasville

A Pink Affair is Archbold's annual fashion show fundraiser, featuring local cancer survivors as models. Proceeds help fund the purchase of new 3-D mammography equipment for the Archbold Women's Center. This three-dimensional mammography allows radiologists to examine breast tissue in clearer, three-dimensional detail and potentially detect breast cancer earlier, when treatment is most effective.

Corporate and individual sponsorship opportunities are available for the event. For sponsorship information, please call the Archbold Foundation at 229.228.2924 or visit www .archbold.org/apinkaffair. If you or someone you know is a cancer survivor and interested in modeling in A Pink Affair, please call Debbie Beeson, breast cancer navigator at the Singletary Oncology Center, at 229.584.5445.





John D. Archbold Memorial Hospital 915 Gordon Ave. P.O. Box 1018 Thomasville, GA 31799-1018 NONPROFIT ORG. U.S. POSTAGE PAID JACKSONVILLE, FL PERMIT NO. 1176



Come celebrate with us.

September 10, 2015 • 4–6pm • Archbold Memorial Hospital, front lawn

Located on Gordon Ave at the main hospital entrance.

Join us for a family fun event commemorating Archbold Memorial Hospital's 90th year.

Cake and Ice Cream • Ambulance, Fire Truck and Police Car tours for kids
Little ones are encouraged to bring their favorite stuffed companion for a check-up courtesy of the Archbold Teddy Bear Care clinic

