USA Trauma Surgeons Save Lives While Supporting Region’s Growing Economy

Dr. Jon Simmons  ·  Dr. Richard Gonzalez  ·  Dr. Sidney Brevard  ·  Dr. Amin Frotan
The University of South Alabama Health System continues a tradition of excellence in education, research and medical care. USA’s health network is comprised of USA Medical Center, USA Children’s & Women’s Hospital, USA Mitchell Cancer Institute, USA Physicians Group and the USA College of Medicine. In addition to advanced and innovative patient care offered at University hospitals and clinics, our medical education programs provide first-class training experiences for the next generation of physicians and scientists. Combined, the USA Health System delivers excellence in care while improving the quality of life for residents across the Gulf Coast.

Each year the USA Health System ...

185,000 clinic visits
356,302 outpatient procedures
59,807 emergency room visits
2,757 babies delivered

Our team includes ...

179 physicians
241 residents and fellows
69 mid-level providers
783 nurses
OUR PEOPLE

They have different backgrounds. One started as a physician, one a pharmacist, another a nurse. One has an HMO background, while another is a longtime administrator. All of the USA Health System leaders, though, have come together for the same mission — improving our community through education, research, service and health care.

Pages 4-5

INNOVATION

Academic medical centers are noted for their innovative approaches to health care through education, research and technology. USA Health System demonstrates that tradition in big ways, from the recent expansion of USA Children’s & Women’s Hospital to the discovery of new cancer drugs at USA Mitchell Cancer Institute.

Pages 6-13

COVER STORY

Drs. Sidney Brevard, Amin Frostan, Richard Gonzalez and Jon Simmons see patients at their worst. And that’s when these USA surgeons are at their best. The four lead specially trained teams that provide around-the-clock care at the area’s only Level 1 trauma center. That’s good news for patients arriving at USA Medical Center and for growing business along the Gulf Coast.

Pages 14-17

SERVICE

USA Health System employees devote their lives to giving. Their example inspires others to give back. From those selfless partnerships have come such difference-making special programs as pet therapy in USA hospitals and an effort to protect student athletes from brain injuries.

Pages 18-23

COMMUNITY

Health care delivery is more than just a business at USA’s hospitals and clinics. It also involves civic responsibility. The people of USA Health System extend a caring hand in ways great and small, from sharing expertise on treating congenital abnormalities in children to planting roadside trees.

Pages 24-30
**DR. RONALD D. FRANKS** is the vice president for health sciences at the University of South Alabama. In addition to his academic oversight of the USA College of Medicine, USA College of Nursing and the Pat Capps Covey College of Allied Health Professions, Dr. Franks oversees the USA Physicians Group practice.

Prior to his appointment at USA, Dr. Franks served as vice president for health affairs and dean of medicine at East Tennessee State University. In addition, Dr. Franks has served as dean for the University of Minnesota Duluth School of Medicine and director of inpatient service in the department of psychiatry at the University of Colorado School of Medicine in Denver, where he was also associate dean for student affairs and curriculum.

Dr. Franks has served as co-chair of the Liaison Committee of Medical Education and on the medical school governing council of the American Medical Association. He is a past member of the executive council of the Association of American Medical Colleges. He will serve as president of the Medical Association of the State of Alabama beginning May 2014.

Dr. Franks earned his medical degree from the University of Michigan and completed his residency in psychiatry at the University of Colorado.

“USA understands that the best way to treat patients is through team-based, integrated and coordinated care. We are able to offer quality health care in all stages of a patient’s treatment through our physicians, nurses and allied health professionals.”

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**STAN HAMMACK** is the University of South Alabama vice president of health systems, overseeing administration of USA’s hospitals.

Hammack began his health care career as a staff pharmacist for the USA Medical Center in 1975. Following various management positions, he was named administrator of USA Knollwood Park Hospital in 1992, administrator of USA Children’s & Women’s Hospital in 1997, associate vice president and chief executive officer of USA Hospitals in 2000 and vice president for USA Health Systems in 2006.

Born in Jasper, Ala., Hammack graduated from Auburn University in 1974 with a bachelor’s degree in pharmacy and from the University of South Alabama in 1988 with a master’s degree in public administration.

Hammack, an advocate for health care quality and accessibility in Alabama, has been involved with a wide range of health care organizations, including the Alabama Medicaid Advisory Commission as chairman, the Alabama Hospital Association as chairman, the Alabama Hospital Association’s Medicaid Steering Committee as a board member, Blue Cross and Blue Shield of Alabama, Regional Policy Board of the American Hospital Association and the Business Council of Alabama. He was honored by the American Hospital Association in 2013 with the Grassroots Champion Award and was awarded the Gold Medal of Excellence by the Alabama Hospital Association in 2009.

“Our hospitals and clinics are practical manifestations of the University’s commitment to teaching, research and service,” Hammack said. “We are unique because education and the expansion of knowledge through research are embedded in all of our programs and services. This brings patients the most appropriate and up-to-date approach to health care.”
BECKY S. TATE is the chief executive officer for the University of South Alabama Health Services Foundation, which operates as USA Physicians Group. This multispecialty physicians practice is comprised of 165 academic physicians and 450 staff employees who operate 23 clinics throughout Mobile.

Tate joined the USA Health System in 1978 and has served in various leadership roles. She was appointed as CEO of the Health Services Foundation in 1999 and also is president of the Gulf Coast Patient Network, an Alabama Medicaid initiative.

She is president of the board of directors for the Mobile Ballet and also serves as secretary for the Ethelyn B. Hays Endowment Fund.

Tate earned her undergraduate degree from Auburn University and her master’s degree in hospital and health care administration from the University of Alabama at Birmingham.

“The physicians in our academic medical practice provide specialized clinical expertise that in many cases is unduplicated in our community,” Tate said. “For patients, having this level of care readily available reduces the need to travel for specialized care. From routine to complex, USA Physicians Group enhances the quality of life for those who choose to make the Gulf Coast region their home.”

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WEN BAILEY brings nearly three decades of health care leadership experience with him as administrator of the University of South Alabama Children's & Women's Hospital.

Prior to joining the USA Health System in 2011, Bailey served as president and CEO of Thomas Hospital in Fairhope and as executive vice president for Infirmary Health System.

Bailey has an extensive background in community relations and economic development. He has served on boards including Blue Cross Blue Shield of Alabama, the Mobile Area Chamber of Commerce, the Business Council of Alabama, the Southwest Alabama Workforce Development Council, the Mobile Area Education Foundation, the University of Mobile and the Mobile Symphony.

He is a fellow with the American College of Healthcare Executives.

A native Mobilian, Bailey earned his bachelor’s degree in health administration from Auburn University and his master’s degree in health administration from the University of Alabama at Birmingham.

“USA Children’s & Women’s Hospital delivers more babies each year than any other hospital in the area. Our Neonatal and Pediatric Intensive Care Units treat nearly 1,800 children each year, with about one-fifth of those coming from other hospitals,” Bailey said. “This is a very special place with an amazing team. They are devoted to providing exceptional healthcare with a spirit of compassion to the children and women of our region.”

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ETH ANDERSON is the hospital administrator for the University of South Alabama Medical Center.

Anderson began her career in nursing, working in leadership positions at several prominent academic medical centers across the United States. She joined USA in 1990, serving in various leadership roles before her appointment as hospital administrator.

At USA, Anderson has improved patient outcomes while creating efficiencies in health care delivery. Her work extends beyond USA Medical Center; she serves on the Alabama Hospital Association Board of Trustees as well as several state committees and community boards.

Anderson received her bachelor’s degree in nursing from the Medical College of Virginia and a master’s degree in nursing from the University of Texas Medical Branch.

“I am proud to be part of a health system that provides the highest level of care to our community,” Anderson said. “Our medical center is a Level 1 trauma center, treating more than 1,700 critically injured patients a year. Our Regional Burn Center is the only one in lower Alabama, Mississippi and the Florida Panhandle. These services provide our community with specialized care unavailable anywhere else in our region. Many industries look at our critical-care capabilities in evaluating the decision to locate businesses to Mobile.”
Just as a traditional lighthouse offers a lifesaving beacon in stormy seas, the new lighthouse at the University of South Alabama Children's & Women's Hospital represents hope and healing for patients and their loved ones. The steel and fiber-glass structure, standing 30 feet wide and 45 feet tall and weighing 71,000 pounds, has become the focal point of an outdoor courtyard and the most visible symbol of the hospital's major expansion.

The 195,000-square-foot, $72.6 million project nearly doubles the hospital's size. The lighthouse connects the new addition with the original structure, highlighting the complex's maritime theme. The expansion allows the hospital to offer dedicated care for children in the new building, with the original renovated for women's services.

The eye-catching design reflects the hospital's ambitious goals. "The community needs to know what happens here," said Children's & Women's Hospital administrator Owen Bailey. "Our vision is for this hospital to be the top of mind for children's and women's health."

As it expands, the hospital is communicating with area physicians to identify their needs and share what it can offer, such as pediatric sedation services, the area's only Level III neonatal intensive-care unit (NICU) and high-risk obstetrical unit, and advanced care for premature babies and critically ill or injured children.

Dedication ceremonies for the new pediatrics addition took place in September 2013. The first floor includes eight new operating rooms linked for videoconferencing, a surgery waiting room and the cafeteria. The second floor features an expanded NICU with 12 private rooms and a 20-bed pediatric ICU. On the third and fourth floors, patient rooms are larger than usual to accommodate family members. Family spaces include small kitchen and bath areas, comfortable seating and sofas that convert into beds. There is also a classroom, a teen lounge and a playroom.

The second phase of construction is renovating the gift shop and lobby of the original structure and adding a spacious courtyard. Nearly 2,700 babies are delivered at the hospital annually, making Mobile's leader in births. The hospital also houses the region's only high-risk obstetrics unit.

In 1997, the University of South Alabama formed a freestanding hospital dedicated to children and women — one of fewer than 10 such facilities in the United States. With this expansion, the University has reaffirmed that, in this area of health care, it intends to continue lighting the way.
As it expanded and renovated its facility, USA Children’s & Women’s Hospital also welcomed two new leaders.

Dr. David F. Lewis was named professor and chair of the department of obstetrics and gynecology, and Dr. David Gremse was appointed professor and chair of pediatrics.

Dr. Lewis said USA’s major capital investment in Children’s & Women’s Hospital signals its importance to the University and community. Combining pediatrics and women’s health services in a single facility leads to better-equipped departments, such as the neonatal intensive care unit, and better outcomes for women and their babies, he said. “Most communities this size have multiple NICUs, fracturing care,” he said.

As part of the expansion, Dr. Lewis requested additional operating rooms in order to serve more patients and provide more training opportunities for students and residents.

Dr. Lewis came to USA from the University of Cincinnati College of Medicine, where he had been professor and vice chair for the department of obstetrics and gynecology since 2007. He received his medical degree from the Louisiana State University School of Medicine in Shreveport, where he also completed his internship and residency training in obstetrics and gynecology. He was professor and chair of the department of obstetrics and gynecology at the LSU Health Sciences Center in Shreveport and is board-certified in maternal-fetal medicine.

The hospital’s growth also intrigued Dr. Gremse, who came back to USA after serving as professor and chair of pediatrics at the University of Nevada School of Medicine in Las Vegas since 2004. His appointment marks the first USA College of Medicine alumnus to chair an academic department at the medical school.

“I’m really excited about the opportunity for expanding pediatric care in Mobile and the southern Alabama area,” he said. “As the only freestanding children’s and women’s hospital in southern Alabama, we’re in a unique position to provide subspecialty care for children in this area.”

Dr. Gremse graduated from the USA College of Medicine in 1983, completed his internship and residency in pediatrics at the USA Medical Center, and held various positions at USA from 1990 through 2003.

He was Mobile’s first board-certified pediatric gastroenterologist and directed the division of pediatric gastroenterology and nutrition. He also has been professor of pediatrics, associate professor of pharmacology, medical director at the USA Pediatric Pharmacology Research Unit, chief of gastroenterology at Children’s & Women’s, vice chair of pediatrics and adolescent medicine at the USA College of Medicine and president of the Children’s & Women’s medical staff.
Since its inception, the University of South Alabama’s Mitchell Cancer Institute has focused on bringing cutting-edge care to patients by combining the talents of academic surgeons and researchers — including those from USA’s College of Medicine — with the most up-to-date oncology treatments available. At its core, enlisting board-certified surgeons who also train the doctors of tomorrow brings a wealth of benefits to those with a cancer diagnosis.

Dr. William Richards, chair of the department of surgery at the USA College of Medicine, leads a team of surgeons caring for patients at the Mitchell Cancer Institute. Among those USA teaching surgeons are Drs. Lynn Dyess and Paul Rider, veterans of the College of Medicine and MCI, and Drs. Marcus Tan and Leander “Lee” Grimm, recent arrivals.

“As academic surgeons, we are very interested in further developing a multidisciplinary approach to care,” Dr. Richards said. “In the past, it was very common for a surgeon to see a patient and make all the decisions about the type of surgery and treatment without consulting others. We now work as a team to include medical oncologists and radiation oncologists and other surgeons to deliver optimal patient treatment.”

Dr. Richards said everyone involved in the team approach to cancer care — from patients, residents and medical students, to nurses and physician assistants — benefits from the process. “This is important because we are not only working to provide optimum surgical care for the patient, but we are also teaching the next generation and promoting best practices to provide this expertise.”

Dr. Dyess, who treats breast and endocrine disorders, said the relationship between the USA College of Medicine and the USA Mitchell Cancer Institute is mutually beneficial. While MCI features cutting-edge equipment and techniques to treat complex cancer cases, Dr. Dyess said, it’s more than just state-of-the-art technology that makes the difference: “It’s the overall coordination of care and treating the whole patient. You are looking at support services, social workers, a patient navigator, a chaplain and physical therapists, which makes for more concise care from all standpoints.”

Dr. Rider, a colorectal surgeon, said working at the Mitchell Cancer Institute allows for a wealth of cerebral investment not typically found in treatment centers where academic research isn’t a priority. “You have experience in the realm of all modalities of cancer care that allows us to include our students, and especially our residents, to see how different disciplines approach the diagnosis of cancer. It’s a well-developed system by which you evaluate and treat cancer cases that gives patients more options and helps students become better and more compassionate cancer doctors.”
Robots aren’t just building cars in Alabama. Through the generosity of USA Trustee Arlene Mitchell, the University of South Alabama Health System purchased a $1.7 million daVinci Si robotic surgery system for USA Children’s & Women’s Hospital in 2011. Since then, the state-of-the-art equipment has been used to perform hundreds of life-saving, minimally invasive operations on women with complex gynecologic cancers, as well as surgeries on children suffering from cancer and other serious conditions.

“It’s revolutionized the care for patients with uterine and endometrial cancers,” said Dr. Michael Finan, chief of gynecologic oncology services at the USA Mitchell Cancer Institute, who has performed nearly a thousand robotic surgeries in his career. “Prior to the robot, we used to have to do those cases open. Now, most patients go home the next day.”

Using a minimally invasive robot for surgery means instead of extensive scars from traditional open operations, patients are left with tiny incisions. Many who undergo laparoscopic surgeries through the use of a daVinci experience less pain and shorter recovery times.

The daVinci Si has miniaturized instruments mounted on three separate robotic arms with a fourth arm featuring a high-definition 3-D camera to guide a surgeon through procedures. The surgeon controls the arms from a seat at a nearby console, viewing a monitor that takes the surgeon inside the patient with an image sharper than the human eye provides.

Using the daVinci Si for complex surgeries — such as when someone needs an advanced radical hysterectomy because of a cancer diagnosis — typically lowers the risk for post surgery complications such as blood clots and infection, said Dr. Jennifer Scalici, a gynecologic oncologist at MCI and an assistant professor of interdisciplinary oncology at USA.

“The reason it’s so helpful now in these surgeries is because we are able to visualize a lot better than we used to,” Dr. Scalici said. “And we’re not seeing the wound complications we used to see. It’s a tremendous change and a huge upside for the patients.”

Patients aren’t the only ones benefiting, Dr. Rodney P. Rocconi, an associate professor of gynecologic oncology and the Abraham A. Mitchell Cancer Research Scholar at USA’s Mitchell Cancer Institute, said he and his colleagues regularly use another component of the robotic system, the daVinci Si simulator, to teach residents how to best perform the procedures.

“It is part of their curriculum and training,” said Dr. Rocconi, who also is deputy associate director of clinical research at the Mitchell Cancer Institute. “Not all residents go out and do that — but all leave here robotically certified. If each of them incorporates that into their practices, we could see exponentially improved patient outcomes and quality of life.”

To date, the Mitchell family has committed more than $93 million to the university and its health system, endowing chairs and funding scholarships, among other endeavors. The gift of the daVinci Si, Dr. Rocconi said, “has significantly impacted the training of physicians here and has helped benefit the patients who come to get robotic surgery. It will leave a lasting impression.”
The University of South Alabama Medical Center’s new MRI machine is making life easier for both doctors and patients.

A magnetic resonance imaging machine makes pictures of the body’s interior by using a magnetic field and pulses of radio waves. The stronger the magnet, the more powerful the MRI machine.

USA’s new MRI machine is twice as powerful as the old one, sporting 3 teslas of magnetic strength to the previous machine’s 1.5 teslas.

“This is the only 3-tesla MRI machine in the Alabama Gulf Coast area, and it dramatically decreases the examination time for the patient, as well as improves the image quality significantly,” said Dr. Melanie Clark, assistant professor of radiology at USA’s College of Medicine. “It enhances everyone’s experience — both the physician and the patient.”

The scans it creates are so sharp, for instance, that they can be used to diagnose inflammation in cranial arteries, a process that would otherwise require an invasive biopsy.

The speed of the scan also is a benefit. When a patient moves during an MRI procedure, that can distort the image. So the faster and more efficient machine offers better images and is more comfortable for the patients, who must lie still in the machine’s tube-shaped cabin during the procedure.

Doctors order MRI scans to diagnose a host of medical conditions, including tumors, internal bleeding, blood vessel diseases and infections. MRI machines are particularly adept at diagnosing damage to soft tissues like organs and ligaments.

Dr. Clark trained an extra year in musculoskeletal imaging. At USA Medical Center, she primarily reads scans of bones and joints in orthopaedic patients.

“At USA, I am the specialty reader for these scans and use my training and expertise to give the highest level of care to our patients and qualified guidance to the residents I train,” she said. “I am always available to any patient or clinician if they have questions.”

Dr. Clark said that the new 3-tesla machine is a good complement to the open MRI machine at USA Children’s & Women’s Hospital. Rather than entering the tube-like enclosure of a regular machine, patients at Children’s & Women’s Hospital lie on a table that is open on the sides, making it more comfortable for children and those who are claustrophobic.

“Together, they help us provide an unprecedented level of care for our patients that is unique to the area,” she said. “Along with the expertise of the radiology faculty, our imaging technology provides patients an opportunity for care that they can only get from an academic medical center.”
In a world where supersized meals and all-you-can-eat buffets are the norm, the University of South Alabama Center for Weight Loss Surgery offers some much-needed balance.

“The availability and accessibility of high-calorie, low-nutrition food is fueling a lot of obesity,” said USA bariatric surgeon Dr. William O. Richards. But there is more involved than just what people eat. Family history, he said, has an impact on body composition. “Genetics plays a big role in what we look like,” he said.

For patients unable to achieve meaningful weight loss through diet and exercise alone, Dr. Richards offers several surgical options. “Bariatric surgery works,” he said. “Patients lose weight, some more than others. From my perspective, all of our patients are successful to some degree in terms of the weight loss surgeries we do.”

Five years after surgery, most patients have kept off about 50 percent of excess weight. “They are now programmed for success,” Dr. Richards said. “Some are wildly successful.”

While there are obvious physical advantages to bariatric surgery, the dramatic health benefits can be just as profound, including positive changes in glucose disposal, insulin sensitivity and blood pressure. Bariatric surgery also can change a patient’s self perception. “People look at the morbidly obese differently,” Dr. Richards said. “They often have been trying to lose weight for years. They’re very frustrated.”

Dr. Richards has performed more than 2,000 laparoscopic procedures since 1990, including numerous bariatric procedures. He performs three types of bariatric surgery: laparoscopic adjustable gastric banding, laparoscopic gastric bypass and laparoscopic sleeve gastrectomy. Kathy Vrachalus’ weight-loss attempts were monitored by Dr. Richards for six months before she had bariatric surgery. “I had just gotten to the point where I was tired of being fat,” she said, explaining that she failed in previous attempts to lose weight. “It was time for me to make a change.”

Vrachalus, who lost 77 pounds in the first year after her surgery, now takes joy in shopping for clothes. She's dropped from a size 28 to a 14. “That is a big change,” she said. Now, she can wear outfits from popular clothing stores that typically don’t carry larger sizes. “To someone that couldn’t do it before, that’s important. I have a stronger self-confidence now. If you look better, you feel better.”

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Bariatric surgery is a lifelong commitment, she said, noting that her weight loss journey continues. For example, her eating habits have changed dramatically. Breakfasts of bacon, eggs, grits and biscuits have been replaced with protein shakes.

To ensure continued success, bariatric surgery patients play an active role in maintaining a healthy weight, including follow-up medical visits and participation in support groups.

For Vrachalus, the effort has been more than worth it. “It's the best thing I have ever done for myself.”
“Finding a cure for cancer is like trying to find a light switch in a dark room,” said Dr. Gary A. Piazza, professor of oncologic sciences at the University of South Alabama Mitchell Cancer Institute.

Bringing some illumination to the quest is the institute’s new, $2 million-plus Drug Discovery Research Center. Its robotic equipment and specialized instruments make possible a new approach to fighting cancer that promises to be more effective and much easier on patients’ bodies.

“We are especially interested in developing drugs for patients with early stages of cancer or who are at high risk of disease recurrence,” said Dr. Piazza.

Traditional cancer drugs are used at advanced stages of the disease. They kill healthy cells along with the cancer cells. Researchers are now working to discover drugs that target specific cellular processes in early-stage cancers and even precancerous tissue while being less toxic to healthy cells. Dr. Piazza is also working on drugs that prevent cancer from spreading to other parts of the body.

His focus is translational research — or “bench to bedside,” as Dr. Piazza says — in contrast to basic research that’s done without regard to practical applications. For the University of South Alabama, in addition to improving patient care, such research translates into intellectual property, patent and licensing opportunities, and the potential to spin off pharmaceutical companies, thus providing jobs and a financial boost for the local economy as well as the University.

One promising category is nonsteroidal anti-inflammatory drugs, or NSAIDs. Among them are aspirin, ibuprofen (Advil) and naproxen (Aleve). NSAIDs have been shown to significantly reduce the risk of death from colorectal, breast, lung and other cancers. Unfortunately, they are toxic when taken for long periods of time. Dr. Piazza and his team are working on safer and more effective versions.

Such narrowly targeted drugs can be elusive. That’s where the new technology comes in. It gives Dr. Piazza and his team the ability to screen tens of thousands of molecules, rapidly testing them one by one for anti-cancer activity.

“High-throughput screening is a unique capability for Mobile and the University to develop biotechnology in the Gulf Coast region,” Dr. Piazza said. “They haven’t done this before in Mobile. It’s a new initiative, a new endeavor. We now have the potential to become a hotbed for cancer research.”
All Under One Roof

NEW BUILDING ADDING CONVENIENCE TO PATIENT CARE

Better patient care, time-saving convenience for doctors and a stronger brand identity for the University of South Alabama Health System — all of those benefits will flow from a new building scheduled to open in 2016.

The 130,000-square-foot, multimillion-dollar medical office and clinic building should start to rise in early 2014 near the Mitchell Cancer Institute, a short walk from the newly expanded USA Children's & Women's Hospital off Spring Hill Avenue.

“This will allow us to further enhance the quality of care that we provide for our patients,” said Dr. Ronald D. Franks, USA vice president for health sciences, “by having the majority of our doctors consolidated in one setting where they can easily communicate with each other about their patients, who are ultimately the center of our focus.”

Becky Tate, chief executive officer of the USA Physicians Group, said USA physicians happily anticipate the opportunity to work so closely with colleagues. For one thing, she said, “A lot of valuable, productive time is lost driving back and forth between clinics and hospitals.”

The concentration of medical skill and knowledge will benefit patients. If a general pediatrician, for example, discovers a gastrointestinal problem, she can call the pediatric gastroenterologist down the hall for an immediate consultation.

The building also will be a teaching facility, Franks said. Each physician will be a full-time College of Medicine faculty member. Patients, he said, “will have the benefit of the senior, experienced faculty physicians that are nationally recognized for their expertise as well as the extra attention and thoroughness that they get by having the residents and fellows involved with their care.”

The new building will have two wings and three floors. The first floor will house pediatric offices, and its entrance will face Children's & Women's. Another entrance on the other side of the building will open to the second floor. Waiting rooms will overlook the soothing Geri Moulton Children's Park, with its soaring oaks and playful sculptures.

“The faculty, physicians and staff are very excited about this new building,” Tate said. “We believe it will serve our patients well and be a tremendous asset.”

The USA Health System is scheduled to open a new medical office and clinic building in 2016 near USA Children's & Women's Hospital. The 130,000-square-foot facility will put many of the Health System's services under one roof.
A woman lies on an operating table, tended by more than a dozen doctors, nurses and other medical personnel. A dog attack has left her with serious injuries. Dr. Richard Gonzalez, the University of South Alabama Medical Center’s lead trauma surgeon, and his chief surgical resident, Dr. Cassidy Koonce, will have to amputate her right arm.

The atmosphere is focused but not tense. Everyone does his or her job without hurrying, but without wasting any time either. Such is the normal pace at the region’s only Level I trauma center.

“The longer people are on the operating table,” Dr. Gonzalez says later, “the worse the outcome.”

Patients with life-threatening injuries are rushed to USA Medical Center from across south Alabama and a large swath of the Gulf Coast — approximately 1,800 a year. Almost 80 percent are victims of motor vehicle crashes.

The victims are met by a member of a small but elite group, one of only four physicians in Mobile board-certified in surgical critical care: Drs. Gonzalez, Sidney Brevard, Amin Frotan and Jon Simmons. Each surgeon leads a team that also consists of an emergency physician, three surgical residents, a trauma nurse coordinator and other trauma/emergency department nurses, a radiologic technologist, a respiratory therapist, and an anesthesiologist or nurse anesthetist.

USA Medical Center is the only Level I trauma center in southwest Alabama. That’s why hospitals in the region routinely transfer their most difficult trauma cases to USA.

Dr. Frotan recalls a victim of a vehicle crash in Mississippi. Surgeons at her local hospital discovered severe liver injuries. “At that point,” he said, “they basically stabilized her and rushed her our way.”

Role in Economic Development

USA has the specialized equipment, knowledge and experience necessary to save even those as gravely injured as the patient from Mississippi, who required nearly 100 units of whole blood and blood products in her first 24 hours at USA.

“The vast majority of places, she would not be alive at this point,” Dr. Frotan says. “The level of care that we have at this trauma center cannot be overstated. It’s what I consider world-class care.”

But the trauma center’s benefits extend far beyond the immediate care of the injured. Its presence helps Mobile attract such large industrial employers as Airbus and ThyssenKrupp. In fact, says Bill Sisson, president and chief executive officer of the Mobile Area Chamber of Commerce, many big companies won’t locate a plant in an area without a Level I trauma center. More generally, he says, “It is a quality of life issue that comes up in the whole economic development process, for small, medium and large companies.”

While a trauma surgeon must be within
15 minutes of the hospital at any given time, usually one is at the medical center 24 hours a day. There, they have a bed, shower and microwave. Sleep is often interrupted by incoming patients.

Spartan conditions and the whirl of activity are nothing new for Dr. Brevard, who spent 26 years as an Air Force surgeon. In 2008, during his second deployment to Afghanistan, he was chief of trauma for all U.S. forces in the country.

His experience in the military benefits his patients, whose wounds from events such as vehicle wrecks and workplace accidents can be similar to those service personnel receive in combat.

“Across the country at the trauma centers, some of the techniques that they are using in the war zone have now come home and are being used locally,” said Dr. Brevard, who graduated from St. Paul’s Episcopal School in Mobile in 1979 and was honored in 2012 as a Distinguished Alumnus.

Outside the Operating Room
At the USA Trauma Center, surgery and other urgent care come first. Everything else gets worked in when time permits.

On the day of the surgery on the patient with the dog attack injuries, about half of the 16 beds in the Surgical/Trauma Intensive Care Unit are occupied. Dr. Gonzalez makes a quick run-through, noting with satisfaction the progress of a man who fell 40 feet while at work. Good news about any of his patients makes his habitual look of concentration relax.

“The level of care that we have at this trauma center cannot be overstated. It’s what I consider world-class care.”
A first-year resident, just starting her hands-on training after receiving her medical degree, runs through the particulars of each case. There are more than a dozen patients, recovering from vehicle crashes — cars, motorcycles, bicycles — home and workplace accidents, bullet wounds, even a parasailing mishap at the beach.

Dr. Barry Ballard, a third-year resident, chips in an occasional comment, short and to the point. The parasailer, Dr. Ballard has concluded, is ready to be discharged. “She’s fine,” he says with conviction. “She’s going home.”

Confidence, Dr. Gonzalez says, is one of the most important things he tries to teach his residents. “That separates the good surgeons from the average surgeons,” he says. “Being a surgeon isn’t doing the procedure. Most people can do that. It’s knowing when and when not to intervene in order to get the best outcome. And when you get into a situation where you have problems, you have to figure out how to get out of it.”

The doctors stay busy between shifts at the medical center. They’re all surgery professors at the USA College of Medicine. They lecture and conduct weekly case conferences where they discuss “what we did right and what we could have done better,” Dr. Gonzalez says.

They also engage in research. In fact, Dr. Simmons works closely with the USA pharmacology department on translational research — figuring out how basic science discoveries can directly improve patient care. For example, he said, the greatest threat to trauma patients after the initial injury is organ failure. Often, that’s caused by the body overreacting to mitochondrial DNA released by ruptured
cells, which the immune system mistakes for a bacterial infection.

“What we have developed are some drugs that specifically target this mitochondrial DNA, which prevent the body from creating this severe inflammatory immune response,” Dr. Simmons said. Such therapies potentially could help trauma patients everywhere, not just in Mobile.

“While we take great pride in the responsibility of treating the injured patients in our region,” Dr. Simmons said, “we also feel it is necessary to perform quality research to advance the medical and surgical care for trauma patients all over the world.”

To support that idea, the Trauma Center puts on the annual Greater Gulf Coast Trauma and Acute Care Surgery Symposium and an annual lecture series that brings in a guest trauma surgeon from another hospital.

Spending Time With Patients

Back in the operating room and attending to the victim of the dog mauling, Dr. Gonzalez and Dr. Koonce work on her mangled arm mostly in silence, one on either side, their bent heads almost touching at times.

Afterward, Dr. Gonzalez talks about a job well done. “We got a good flap of skin,” he says. “It’s going to be nice and smooth. It’s going to turn out well.” Then something shifts in his face. “Not for her, of course,” he says. “This isn’t what she would prefer.”

Surgeons have to approach their jobs technically. But they also have to remember that they’re working on people.

After surgeries, the USA trauma surgeons make it a point to try to spend time with patients and their families, not just to get medical information, but also to reassure them. Each case is also a person, Dr. Gonzalez says, who deserves to be treated with care and dignity. It is, he says, “all about the patient.”
When Louis and Melinda Mapp toured USA Children’s & Women’s Hospital, one scene in particular struck them: The young patients, tied to IVs and other medical equipment, mustering smiles as pet therapy animals gently licked their faces. “The thing about all animals is the unconditional love they give and how people respond to that,” said Louis Mapp. “People understand, especially in the medical community, what a strong support an animal can be.”

The Mapps were so touched by their visit, they established an endowment with a $500,000 gift to the Child and Family Life Program at the hospital, which was then renamed for their family. The endowment supports pet therapy and other activities.

“Pet therapy was one of the things that really tugged at their heart,” said Owen Bailey, Children’s & Women’s Hospital administrator.

“Oftentimes these dogs connect with these patients in special ways that no one else can,” Bailey said. “Seeing one of these dogs get a smile out of a child in the hospital is really a magical moment.”

He said the medical team tells stories about children who are dealing with very difficult situations — chronic illness or injury — and the dogs are able to raise their spirits after nothing else has.

“That’s what it’s all about for us, getting that positive impact,” Bailey said. “The program is a very important part of our patient-focused culture and our effort to keep the patient and the patient’s family at the center of what we’re doing.”

The Mapp Child and Family Life Program is geared toward nonclinical care. It includes pet therapy, which uses specially trained dogs to visit children in their hospital rooms two days a week; Class Act, which gives hospitalized students access to teachers who can keep them up-to-date with schoolwork; and the TreeHouse, a play and activity room.

“This program is not an afterthought to the clinical, it’s right alongside it, and it’s central to a child and family adjusting to this new situation that they find themselves in,” Bailey said.

Mapp said when he and his wife left the hospital after touring it, they were overwhelmed by the care they had seen provided.

“For all of the staff there, it seemed like a ministry to them rather than a job,” Mapp said. “We wanted to do some small part to help them with that.”

Beyond the Clinical

a dog’s kiss touches the heart

Louis and Melinda Mapp established an endowment to support USA’s Child Life Program that incorporates activities such as pet therapy into pediatric hospital stays. Here, the couple meets one of the pet therapy dogs, Aslan. Below, Ugly, a pet therapy veteran, will never be able to live up to his name.
Bringing Joy to the Infusion Room at MCI

Patient-turned-volunteer honored to give back

Cancer brought Lisa Freeman to the University of South Alabama Mitchell Cancer Institute for treatment. Commitment keeps her coming back on Mondays to the infusion room as a volunteer.

Freeman battled skin cancer since she was a teenager, enduring multiple surgeries and procedures. In recent years, her skin cancer grew worse. When oral chemotherapy treatments failed, Freeman set out to find a place that could help her.

In 2010, Freeman was making plans to travel to a cancer center out of town when she was put in contact with Susan Crutchfield, MCI’s manager of community and physician outreach. After hearing about the services offered at MCI, Freeman thought it sounded like a good alternative to leaving home for care. She began chemotherapy at MCI soon after.

Not knowing what to expect from her first day of treatment was terrifying, Freeman said. “But it’s not quite as scary as all the stories you hear.”

“They have the most loving group of nurses. They give the most comfort and support of anybody I’ve ever seen,” said Freeman, a mother of three. “If something were to ever happen, I’d be comfortable walking back through that door again.”

The welcoming environment at the USA Mitchell Cancer Institute also made a difference, Freeman said. The infusion room at MCI is open and bright, with a full wall of windows overlooking a colorful garden. There are also plenty of people chatting and lots of laughter and activity. “It really takes your mind off what’s going on,” said Freeman. “You’re not lost in being sick. You’re here surviving with everyone else.”

Now, Freeman and her friend Kim McKenzie volunteer weekly in the infusion room, handing out pillows and blankets, snacks and support. “We try to make them feel as comfortable as possible,” explained McKenzie. “It’s as much moral support as anything.”

The friends also offer patients the “MCI Mai Tai,” a fruit juice drink served in a cup with a paper umbrella. “You want to see people smile,” Freeman said. “It’s OK to smile. It’s OK to be joyful even during a trial like this.”

Freeman said her experience as a cancer patient compelled her to give back and help others as a volunteer. “The nurses were a godsend,” she said. “When I cried, they were there. That first day, they were there. When I became a volunteer, I saw a whole new side. I feel honored to be part of their team.”
The annual reunion for graduates of the Neonatal Intensive Care Unit at USA Children’s & Women’s Hospital is a time for celebrating life and those who overcame early obstacles to survive. For some families, it’s also a chance to give back and to show their appreciation for the caregivers who helped their children.

Since 2012, Hanna and Matthew Mayfield, whose twins are NICU graduates, catered the reunion for free. The Mayfields — owners of Tay’s Barbeque in Pascagoula, Miss.; Moss Point, Miss; and outside Jackson, Miss. — have said they will continue to donate their services to the event in the future.

“There’s a theme of wanting to give back,” said Owen Bailey, Children’s & Women’s Hospital administrator. “They fed hundreds of people — barbecue and all the fixings — and did it with a smile, an encouraging word and a thankful spirit. That kind of support is so appreciated by our team. Like so many others, the Mayfields are ambassadors for the hospital. They want to give back.”

The NICU at Children’s & Women’s Hospital is the only one in the region classified as a Level III, which means it provides the most advanced treatment for newborns. The NICU cares for about 900 babies each year, and one-fifth of those are brought from other hospitals.

The reunions are important to families who spent weeks or months together as their babies struggled at the beginning of life, said Dr. Keith Peevy, a neonatologist who started the annual gathering three decades ago.

“A lot of bonds form through that kind of trauma,” Dr. Peevy said.

The parents bond with each other and with the hospital staff. Some of the parents — even those of very modest means — travel to the reunion each year from hours away because of the connections.

“The families find strength through the years by keeping in touch and sharing stories and successes,” Bailey said. “So the reunions have a very special quality to them and a family feeling.”

Since the Mayfields stepped up to contribute to the event, other parents also have shown interest in giving, said Renee Rogers, the NICU nurse manager.

Everything from the use of a bounce house to face painting is donated. The contributions take many forms; at the 2013 reunion, the Mobile Symphony provided a harpist to play at the reunion.

Contributions are critical to the event’s success, Rogers said. “The generosity of those in our community makes it possible to hold these celebrations, reuniting former patients and families.”
For High School Athletes, Testing Goes Beyond Classroom

Because your child’s head may not be as hard as you think, USA neurosurgeon Dr. Anthony Martino pioneered a concussion awareness and education program last year for middle and high school athletes in Baldwin County.

The key to mitigating the damage caused by a concussion is allowing the brain time to heal. Repeated concussions can cause long-term neurological problems, including memory loss and difficulty learning. That is why it’s so important to diagnose concussions early, Dr. Martino said. To that end, Dr. Martino and other USA Health System employees educated parents, coaches and athletes in Baldwin County on the symptoms of concussion so that players could be held out of practice and competition to prevent further injury.

“We really want people to be educated about concussions and the adverse effects of returning to play too early following a head injury,” Dr. Martino said. Recognizing the symptoms is just the beginning. An athlete’s neurological performance must return to normal before resuming sport.

In order to establish normal function, it’s important to have a neurological basis from which to measure symptoms. To that end, Dr. Martino linked up the Baldwin County Public School system with Dick’s Sporting Goods, which agreed to fund baseline testing for 3,300 athletes in all sports. Athletes who suffered concussions were given an initial evaluation by a trainer immediately, Dr. Martino said. If the symptoms were severe, he said, the athlete was transferred to a hospital for further testing.

Only when performance on neurological tests returned to normal was the student allowed to return to practice.

While football concussions have dominated headlines, Dr. Martino said that there is some risk for concussion in all sports. He noted that concussions are particularly prevalent in girls’ soccer. Dr. Martino hopes the concussion prevention and awareness program will expand to include other schools in the future. “What’s in the best interest of the child is in the best interest of everybody,” he explained.
The power of a helping hand can uplift and inspire for generations. Just ask Dr. Errol D. Crook. He’s the Abraham A. Mitchell Chair of the Department of Internal Medicine at the USA College of Medicine — a native of Monroeville, Ala., who traveled a long way before coming back home.

“I’m proud of the fact that my road to getting here was paved by others who were able to go out and work hard and make sacrifices and were incredibly supportive of me,” Dr. Crook said. The example and encouragement of two uncles who were physicians showed him what he could achieve.

And achieve he did. Dr. Crook received his undergraduate degree from Yale University and his medical degree from Columbia University. He became a star researcher, with more than 100 scientific publications to his credit focusing on kidney disease, diabetes, high blood pressure and cardiovascular disease.

He achieved top academic positions in Detroit at Wayne State University School of Medicine, the nation’s largest single-campus medical school, as well as Harper University Hospital and the Detroit Medical Center. In 2005, USA brought him to Mobile, thanks partly to the lure of the endowed chair.

“For me, support from the endowment means I have the opportunity to focus more time on our education mission and providing leadership,” Dr. Crook said. “Through the Mitchell family’s generosity, I am better able to create a vision for the department and mentor my faculty, residents and medical students.”

The College of Medicine now has eight endowed positions to support faculty members’ educational, clinical and research efforts.

Research was a major focus for Dr. Crook earlier in his career, but his interests have expanded over the years. “My favorite part of the job now is watching medical students and residents mature as they travel down that path to become an independent practicing physician,” he said. “Looking at the optimism that they have is really an exciting thing for me.”

He tries each day to pass on his uncles’ gift of encouragement to others, whether by word, by deed or simply by presenting himself as a respected African-American physician and educator. Awareness of being a role model, he said, “I guess is really kind of at the core of who I am.”

Donors can have the same supportive effect, he said, even if they don’t have the means to endow a faculty chair position. “It is not so hard to endow a small scholarship that may support something that someone is passionate about,” he said. “Endowing it so it can be there for future generations is really a gift that has great meaning.”
Inspiring Others to Contribute

USA Couple Endows Surgical Fund

For Dr. Charles B. Rodning and his wife, Mary, making a difference is more than just sharing what you have with others. “It’s about nurturing the next generation,” said Mary Rodning, an artist who has served as an educator for numerous artistic and faith-based organizations.

The ethos of the Rodning family has always been that of servant leadership — a great respect for education, a vigorous work ethic, a striving for excellence, a strong sense of community, benevolence, gratitude and humility.

Dr. Rodning, a longtime professor of surgery at the University of South Alabama College of Medicine, said his family has always aspired to service, both in the academic arena and the community at large.

To honor this commitment, the Rodning family made a gift to the USA department of surgery to provide funding for educational endeavors. The gift, totaling $100,000, will be used to establish the Charles Bernard and Mary Elizabeth Rodning Endowed Surgical Educational Fund.

Dr. Rodning, who has been with the University for more than 30 years, hopes the gift will inspire others to contribute. “We wish this gift to exemplify our commitment, dedication and loyalty to the University of South Alabama, and desire the institution to flourish and thrive,” he said.

After a military assignment in Okinawa, Japan, Dr. Rodning joined the USA College of Medicine in 1981. Since then, the Rodnings have been heavily involved in the USA Anatomical Gifts Program, the Mobile Medical Museum, the Mobile Museum of Art, the Mobile Symphony and the Semmes Public Library.

As a mentor to medical students and residents at the USA College of Medicine, Dr. Rodning has the opportunity to counsel them daily. “Physicians must be philosophically grounded in the liberal arts if they would serve humanity effectually and meaningfully,” he said.

In addition to the department of surgery gift, an endowment was also established to support the Mobile Medical Museum, which preserves the unique medical heritage of the community as a repository of artifacts and documents.

“We have the opportunity to educate Mobilians every day,” Mary Rodning said. “These gifts represent our enthusiasm for both institutions to capitalize on every opportunity to preserve the past and prepare for the future.”

Mary and Dr. Charles B. Rodning established an endowment to support medical education and to encourage others to consider the intrinsic benefits of giving.
Jenny Biggs spent much of 2011 suffering from frequent, debilitating headaches that nobody seemed to be able to fully explain. Initially thought to be caused by a genetic predilection for migraines or maybe a hormone imbalance — Jenny was 14 at the time — the headaches eventually became so bad that she could not eat or sleep.

That’s when doctors at Thomas Hospital scanned her brain, revealing a tumor the size of a tennis ball pressing on the back of her skull.

Jenny was rushed to USA Children’s & Women’s Hospital, where neurosurgeon Dr. Anthony Martino scrubbed for surgery.

Biggs’ mother, Berry McKelvain, described the day’s events as a tornado of activity. “We were in survival mode,” she said. “The tumor had no place to go. It would have ruptured. You don’t survive that. We were terrified until we saw Dr. Martino.”

The operation took four hours, Dr. Martino said, painstaking work because of the tumor’s position between cerebellar hemispheres that control coordination and movement and the brain stem, through which the brain transmits signals to the body. The operation had to be performed using a microscope to provide the precision required to excise the tumor without damaging surrounding tissues.

Dr. Martino was able to remove the tumor successfully, but as he examined her after the surgery, he noticed that her pupils were no longer the same size, a sign that something was not right. Another scan revealed a blood clot had formed, caused by blood pooling on the top of her brain. After another surgery successfully removed the clot, Biggs was sent to the intensive care unit for recovery.

For the first 24 hours, it was unclear to her family if she would make a full recovery.

The surgeries saved Biggs’ life, but the trauma wasn’t without consequences in the days after the surgery. Biggs had to learn to walk, write, speak and even smile again. Even when those abilities returned, she continued to suffer from depression, which is not unusual for brain-surgery patients.

Biggs said that she’s found solace in reading and writing poetry. “It is my passion,” she said. “It just makes me happy. It’s how I get out all my feelings. I feel like I have more to talk about. I just write and
Write and write. What I went through was terrible, but survival has given me a sense of pride.”

As Dr. Martino watched Biggs struggle through a difficult recovery, he saw her become a leader and a role model to the friends who visited her, he said. “She is a bright, bubbly, enthusiastic young lady,” he said, “a natural leader.”

Hospital administrators took notice of her tenacity and nominated her for the title of Alabama Champion Ambassador for Children’s Miracle Network Hospitals, a charitable organization that raises money for 170 children’s hospitals across North America, including USA Children’s & Women’s. Champion Ambassadors serve as advocates for the organization, sharing their stories of hope and perseverance to help raise support for children’s health care across the country.

Biggs served as Alabama’s Champion Ambassador in 2012. She learned of her selection from USA Children’s & Women’s Hospital Administrator Owen Bailey.

“She’s beautiful outside and inside. She’s happy, she’s smart, she’s creative. She has the gift of making everyone around her feel good. “The way she dealt with it and overcame adversity is a powerful story. Recovering and starting over in so many aspects of life showed her rising to the challenge and her positive approach to life, drawing on faith, family and friends.”

Berry McKelvain said that the family remains thankful that Dr. Martino was on call the day the tumor was discovered. “We are so blessed he was on call, and he was not supposed to be on call. She would not be here if God had not used Dr. Martino to heal her.”

Each time Biggs sees Dr. Martino, she thanks him for saving her life. “To me, of course, it’s a huge, huge deal,” she said. “I just feel better every time I see him. I’m very, very thankful for him.”
The Science, and Art, of Repairing Broken Bones

As a pediatric orthopaedic surgeon at the University of South Alabama, Dr. Prasit Nimityongskul’s background in repairing musculoskeletal abnormalities and injuries is based in science. But his expertise goes beyond fixing muscle and bone. It also includes knowing how to gain the trust of his young patients. “It’s an art form that I learned early on,” he said. “For children, medical care can cause anxiety. Some kids cry when they see a white coat. I take a different approach with my pediatric patients than I would an adult patient.”

During the past three decades, Dr. Nimityongskul — known by most as Dr. Nimit — has become the area’s go-to expert on orthopaedic problems involving children. If other doctors encounter a difficult case, they call Dr. Nimit.

“I deal with all aspects of pediatric orthopaedics,” said Dr. Nimit, a professor of orthopaedics at USA’s College of Medicine. “That means children under 18. And that includes deformities; it could be congenital or developmental or post-injury, post-traumatic. I deal with all aspects of that. And even some sports-related injuries.”

The longtime teacher prefers hands-on lessons to formal lectures. “It’s teaching by training and doing the work together, performing surgery together and seeing patients together,” he said.

Sports medicine is one of the two most popular fellowship fields among aspiring orthopaedic surgeons, along with joint replacement, said Dr. Nimit. “People like treating sports injuries because it’s dramatic and the results are seen relatively quickly,” he said, “With a football player, you’ve got him playing in three months.”

On the other hand, congenital deformities can require much longer courses of treatment, sometimes encompassing many years and multiple surgeries. The changes Dr. Nimit can bring for his young patients and for their families, though, is particularly rewarding.

The doctor is a parent himself. His daughter is a medical student at USA. His son has a bachelor’s degree in electrical engineering from USA. He and his wife, Sivaporn — universally known as La — are natives of Thailand. La opened and operates the local Bangkok Thai Cuisine restaurants.

As Dr. Nimit looks forward to continued opportunities to impact those he encounters, he mentors his residents in his specialty — with, of course, a blend of art and science.

“They see me happy doing this,” he said, “and also I tell them, ‘Look, there’s a shortage of surgeons in this field. You’re guaranteed to have a lot of work, and you’ll enjoy working, helping these children.’”
USA Resident’s Quick Response Saves Life of Teen Swimmer

Dr. Aaron Morgan finished his workout at the YMCA in Daphne like any other. But his routine was upended when, through a combination of medical expertise and sheer timing, he was able to help save a teenager’s life.

Dr. Morgan, a USA family medicine resident, had finished his workout routine and was in the sauna overlooking the pool when he noticed the swim team was huddled, and someone was on the ground.

When Dr. Morgan reached Sam Cockrell, the then 16-year-old swimmer and local triathlete was facedown and suffering from what Dr. Morgan believed was cardiac arrest with labored breathing. “He was completely unresponsive,” Dr. Morgan said. “I tried talking to him and was telling him to squeeze my hand. But he didn’t. I started checking for pulses and couldn’t feel any.”

Dr. Morgan said he cleared everyone away and flipped Sam over. At that point, Sam had stopped breathing. Dr. Morgan immediately started CPR while the YMCA staff retrieved the defibrillator.

“When it happened, I just went through the motions of what we’re trained to do. It was very important to be as calm as possible so that we could maximize Sam’s resuscitation,” he said.

Dr. Morgan shocked Sam with the defibrillator multiple times and continued CPR until the ambulance arrived. Sam’s heart started beating en route to Thomas Hospital. He was soon transferred to the intensive care unit at USA Children’s & Women’s Hospital.

Dr. Morgan, who went to USA Children’s & Women’s Hospital immediately after Sam’s arrival, said he couldn’t leave until he knew what was going on. “It was tough, especially not knowing if he was going to be OK,” he said. “You wonder if you did enough.”

Sam was diagnosed with arrhythmogenic right ventricular dysplasia, a rare form of cardiomyopathy in which the heart muscle of the right ventricle is replaced by fat and/or fibrous tissue.

Sam’s parents, David and Amy Cockrell, who are both pharmacists within the USA Health System, said they were blessed to have Dr. Morgan at the YMCA that day.

“We are fortunate that our community has a College of Medicine that educates and trains so many of the medical community that serve in the Gulf Coast area,” David Cockrell said. “Dr. Morgan used his medical training and expertise to prevent a tragedy and keep our young son alive and our family together.”

A father himself, Dr. Morgan said he felt like a parent to Sam that day. “I was on edge and wondering what would happen,” he said. “I thought of my own kids and what I would do should anything happen to them.”
The Long Way

The left sleeve of Dr. Jana Rocker’s white lab coat is tucked neatly into her pocket. She has been missing an arm for 30 years. But what previously held her back in life now serves as motivation.

As a researcher, she’s “tenacious,” said Dr. Lewis Pannell, her boss and mentor at the University of South Alabama Mitchell Cancer Institute. He watched her struggle during her first 18 months as a doctoral research student in his lab as she tried to develop methods for her sampling approach, each of which had to be methodically tried and refined.

“But Jana worked her way through the difficult problem she had to solve,” said Dr. Pannell, a USA professor of oncologic sciences. “She is very sharp and knows what she has to achieve. She never gives up.

“Having had cancer herself, she brings an understanding of the disease. And her research is extremely promising.”

A Grapefruit-Sized Lump
In February of 1982, when Dr. Rocker was 10 years old, she was playing on an exercise machine when she felt a twinge of pain in her shoulder. It kept bothering her, so her parents took her to a doctor, who diagnosed a pulled muscle.

But the pain continued, and a lump the size of an orange appeared. Her parents went back to the doctor, who said it was an infection in the muscle and prescribed antibiotics.

The lump continued to grow.
“By this time, it was the size of a grapefruit and hard as a rock,” Dr. Rocker said. “My mom said, ‘We’re not going to wait anymore. We’re going to get some answers.’”

Even though it was a Sunday, her parents took her to a sports medicine specialist in Dallas who did something no doctor had done up to that point. He took an X-ray, which detected a solid mass. That evening, the fifth-grader was in Baylor Hospital, where a biopsy revealed osteosarcoma, a very aggressive bone tumor.

The doctor referred the family to Dr. George Cierny, who was a specialist in limb salvage at the University of Texas Medical Branch in Galveston. Dr. Cierny performed another biopsy and recommended immediate surgery.

“I was very interested in science, even at 10,” Dr. Rocker said. “Dr. Cierny saw that, and he was always good about explaining things to me in real, scientific terms, but ones that a kid could understand.”

In surgery, Dr. Cierny found the tumor had enveloped the blood vessel and nerve, so the arm had to be amputated. He also removed her clavicle and shoulder blade.

“Then I started chemotherapy,” she said. “I tasted metal in my mouth, and then I threw up. And I didn’t stop for a year.”

Hopes Dashed, a Career Detoured
Dr. Rocker believes the aggressive surgery and treatment saved her. With the cancer gone, she went on with her life. In order to fit in, she always wore either a cosmetic or robotic prosthetic arm.

“Throughout high school and college, I would never let someone see me without the arm. I was very self-conscious,” she said.

Dr. Rocker pursued her scientific interest at the University of North Texas, receiving a bachelor’s degree in biology with a minor in chemistry. In her second year in the master’s program, she had an encounter that altered her path for the next decade.

She wanted to focus on biochemistry, but a professor didn’t feel she could work in a lab safely with one arm. Recognizing her computer talent, he suggested she instead pursue the then-emerging field of bioinformatics.

“All I heard was, ‘You can’t do it.’ I’m 24 years old, and this professor I idolized just told me he wouldn’t put me in his lab. I was devastated. So I stopped going to class and dropped out.”

Dr. Rocker landed jobs in computer support and technology. After Hurricane Katrina in 2005 led her to re-evaluate her career path, she got a job with the Gulf Coast Research Lab and enrolled in the University of Southern Mississippi to pursue a master’s degree in coastal sciences.
Arrival at MCI

In 2008, Dr. Rocker had an appointment at Mitchell Cancer Institute on the first day the new building opened. As she approached the entrance, she walked by the glass windows and looked into the working labs. She realized she knew how to use most of the equipment and decided then that she wanted to work there.

She applied to the Ph.D. program at the University of South Alabama and was accepted. She did a rotation in Dr. Pannell’s lab and never left.

Dr. Rocker dedicated her thesis to the man who saved her life, her former doctor, George Cierny. When she tried contacting him to inform him that she would be graduating, Dr. Rocker found his obituary. Dr. Cierny had died from pancreatic cancer at the age of 66.

Curiously, while her doctoral work is in colon cancer, Dr. Rocker’s methodology has formed the groundwork for extremely promising research in the detection of pancreatic cancer. It has also spawned three other projects.

In December, at age 40, she earned her Ph.D. Dr. Rocker plans to stay on in the lab to get her postdoctoral degree, publish, apply for grants and continue her research.

She no longer wears a prosthetic arm. For one thing, in the South, it’s just too hot to wear one. More importantly, Dr. Rocker no longer feels she needs it.
The path to USA Medical Center looks better than ever before.

USA Medical Center and Keep Mobile Beautiful, with help from Mobile City Councilman Fred Richardson, organized a beautification effort to plant 120 crepe myrtle trees on Mobile and Fillingim streets between Spring Hill Avenue and the medical center.

Elmer Sellers, assistant hospital administrator, said more than 20 hospital and administration staff participated in the planting.

“We are excited to see Mobile Street being improved,” he said. “After the street was widened to three lanes, we reached out to the city of Mobile to see if we could collaborate to beautify and maintain the route to the hospital from Spring Hill Avenue.”

In all, more than 70 volunteers assisted in planting the trees, said Bob Haskins, coordinator of Keep Mobile Beautiful. Richardson has organized churches, business and neighbors to help with ongoing care.

“We received enthusiastic support from the USA Medical Center, people in the neighborhood, students from LeFlore High School and other volunteers from the area,” he said. “We greatly appreciate the input and support from the University and are thankful for the cheerful volunteers.”

The trees were provided with funds from the Keep Mobile Beautiful Living Legacy program and a grant from the Hearin-Chandler Foundation, Haskins said. The planting was supported by the City of Mobile Parks Department, which provided transportation, delivery and the drilling of the 120 holes for the trees.

Sellers said future plans include adding decorative street lighting and remodeling the USA Medical Center sign to help identify the route to the hospital.

“We have several ideas to help improve the area’s appearance,” he said. “There’s a lot to be done, and we will continue to cooperate with the city of Mobile to beautify this area.”

Dr. Clara Massey has spent much of her career championing cardiovascular health for women. Through education and advocacy, Dr. Massey, director of cardiology at the USA College of Medicine, has called attention to how men and women differ in the way heart disease manifests itself.

For her continued work in her field, the American Heart Association recognized Dr. Massey as a Go Red for Women honoree.

Dr. Massey has been an advocate of using the latest research in developing patient care plans to result in best possible outcomes. The practice, called evidence-based medicine, is part of a growing national trend to improve quality of care.

As a professor of internal medicine, Dr. Massey is also closely involved with training physicians. She educates medical students and works alongside cardiology fellows at the University of South Alabama Medical Center.

“Dr. Massey has been involved with the American Heart Association’s Go Red movement since her fellowship days, and she regularly speaks at community events to educate the public about prevention and treatment of heart disease,” said Beth Anderson, hospital administrator at USA Medical Center. “She balances her role as a physician with that of a wife, mother and community leader.”

As part of the Go Red for Women campaign against heart disease, the event educates and inspires women to take action against the No. 1 killer of women in the United States.

Go Red for Women

Dr. Clara Massey was recognized as a Go Red for Women honoree for her efforts in preventing heart disease and advocacy of evidence-based treatment.

New Trees Bring Fresh Look

From left, USA Medical Center’s Steve Lancaster, manager for food service; Ann Carter, director of therapy services; and Michelle Richardson, nurse manager, were part of a team of employees who helped plant trees along Mobile Street, the main entry point to the hospital.
“In 2011, I had an operation to repair a hernia. After the surgery, complications developed, preventing me from eating or drinking normally for six months. During this time my doctors were uncertain about my recovery.

I decided to go to the USA Health System for another opinion. After meeting with a surgeon at the USA Medical Center, I had a 14-hour surgery that basically reversed the complications and repaired my hernia.

Now that I’m healthy again, I enjoy reading and spending time with my granddaughter. I was treated very well by the excellent doctors, nurses, and hospital staff who were instrumental in my complete recovery. Today, I am leading a happy and productive life because of the expertise and care available at the USA Health System.”

- Leanados Summers
Opelika, Alabama