

2024

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JOINT VENTURES

# Mon Health prepares to mark 2 years of Vandalia merger

## Looks ahead for more growth

BY DAVID BEARD  
DBeard@DominionPost.com

Two years ago, in March 2022, Mon Health System and CAMC Health System announced their intention to merge into Vandalia Health.

The merger received state approval that August. Mon Health System President and CEO David Goldberg sat down with The Dominion Post to talk about recent progress and successes and to look ahead.

He opened with some thoughts on health care across the state — not just Vandalia, but in general.

“I don’t think we tell a good enough story around the state, about the excellence there is in the state of West Virginia related to overall health care.”

Every system tells its own story, but there’s no single state story.

“We’re doing great things,” he said.

About 95%-98% of everybody’s care can be done in-state. Some high-level transplants and other services may not be here, but most high-level care is.

For Vandalia North (Mon Health’s service area) and the recently joined Davis Health, 85% of care can be done here or referred to another nearby provider.

“People should be assured that they don’t have to go far to get access,” Goldberg said.

And it’s the system’s job to make sure the access translates into action.

Ground will be broken this summer on Mon Health Harrison Neighborhood Hospital, the second small-format hospital after Mon Health Marion.

Harrison Neighborhood

Hospital will have 10 patient beds and eight emergency rooms, plus space to grow.

Preston Memorial received a \$3 million grant, via Congressionally Directed Spending, to expand for more clinic space.

Goldberg said the people in Preston are getting better access to chemotherapy and other therapies.

“We’re excited about that.”

Mon Health’s surgical care and bariatric care moved into a single space in the former Intermed headquarters in the medical park just off W.Va. 705.

And it is looking to break ground on the Stonewall Jackson Memorial Hospital replacement once the court case is resolved.

The nearby St. Joseph’s Hospital, part of WVU Medicine, has challenged the move claiming the closer proximity of the new Stonewall Jackson will threaten its critical access hospital status, which allows it to be reimbursed on a cost-basis for providing service to Medicare and Medicaid patients.

Goldberg remains optimistic about getting the 29-bed, \$56 million facility built.

“We’re completely dedicated to having a new state-of-the-art facility built so the people of greater Lewis County have access to the facility they deserve.”

The merger creating Vandalia didn’t lead to any lost jobs, Goldberg said. In fact, Mon Health is hiring. It’s hired 16 doctors in the in last four months, with more are to come. It’s also hired practitioners in thoracic and bariatric surgery, gastroenterology and oncology, to name a few. It now can offer 24/7 neuro-



David Beard/The Dominion Post

Mon Health Medical Center in Morgantown.

logical care and Mon Health Medical Center was re-accredited for stroke readiness.

It is recruiting for vascular surgery and for primary care in Preston and Lewis counties.

Mon Health partners with several area nursing schools and Goldberg mentioned the recent success of the partnership with West Virginia Junior College.

The first cohort of 50 yielded 28 who agreed to work in Mon Health System facilities, and the second cohort of 50 yielded about 34. Nursing hires have reduced the system’s need for agency or traveling nurses.

Some numbers: Vandalia has 17 hospitals in its footprint. Mon Health has Mon Health in Morgantown, plus Marion Neighborhood, Preston Memorial and Stonewall Jackson; manages two, Grafton City and Highland Clarksburg; and is affiliated with Min-

**“I DON’T THINK WE TELL A GOOD ENOUGH STORY AROUND THE STATE, ABOUT THE EXCELLENCE THERE IS IN THE STATE OF WEST VIRGINIA RELATED TO OVERALL HEALTH CARE. ... WE’RE DOING GREAT THINGS.”**

David Goldberg  
Mon Health System president and CEO

nie Hamilton.

Vandalia has 1,530 beds, more than 13,000 employees and more than 2,000 providers.

Mon Health sees baby deliveries 16% above budget (meaning 16% more births than expected), hospital discharges 12% above budget and operating room and emergency room visits both 2% above budget.

Regarding the discharges, Goldberg said, “We’re seeing more people use our hospital. Unfortunately that means they’re sicker, but we have the ser-

vices to wrap around them to make sure they’re well taken care of.”

And it means the patients are coming here, he said.

That leads to a discussion about community health and a shift from reactive to proactive medicine.

“We are one of the sickest, oldest states in the country,” he said.

There is a need to get people into a primary care home instead of relying on the ER. That’s not always easy in remote rural loca-

tions with no ER or urgent care nearby.

“It’s our job then to transition you to primary care and then get you taken care of in your community.”

Telemedicine is making community-based care more accessible, he said, with 50,000-75,000 telemedicine visits. And that’s not just by smart phone.

Vandalia has telemedicine hubs across the state, where patients can make a short drive to the hub, equipped with stethoscopes, blood pressure cuffs and other diagnostic equipment, and talk to a doctor onscreen. GI doctors, nephrologists, rheumatologists and cardiologists have all participated.

“I think that the difference at Vandalia is our doctors know their patients,” Goldberg said. “We want to make sure that when a patient has an issue we personalize the experience around them.”

## REGIONAL EYE ASSOCIATES IS THE FIRST PRACTICE IN MONONGALIA COUNTY TO OFFER RxsIGHT LIGHT ADJUSTABLE LENS (LAL)

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Cataracts begin as early as age 40, and it’s estimated that by age 75, about 50% of people will develop them. In other words, it’s likely that you, a loved one, or both will, at some point, need a cloudy natural lens replaced with a clear synthetic one. When that time comes, advancements like the LAL are good news for everyone. Once begun, cataracts only worsen until surgery is necessary. Cataract surgery is the most performed procedure in the United States. During surgery, a patient’s natural lens is removed and replaced with a clear synthetic one. Until now, surgeons relied upon the accuracy of pre-surgery measurements to determine a patient’s post-operative prescription power. RxSight’s Light Adjustable Lens is changing with the ability to customize vision after surgery.

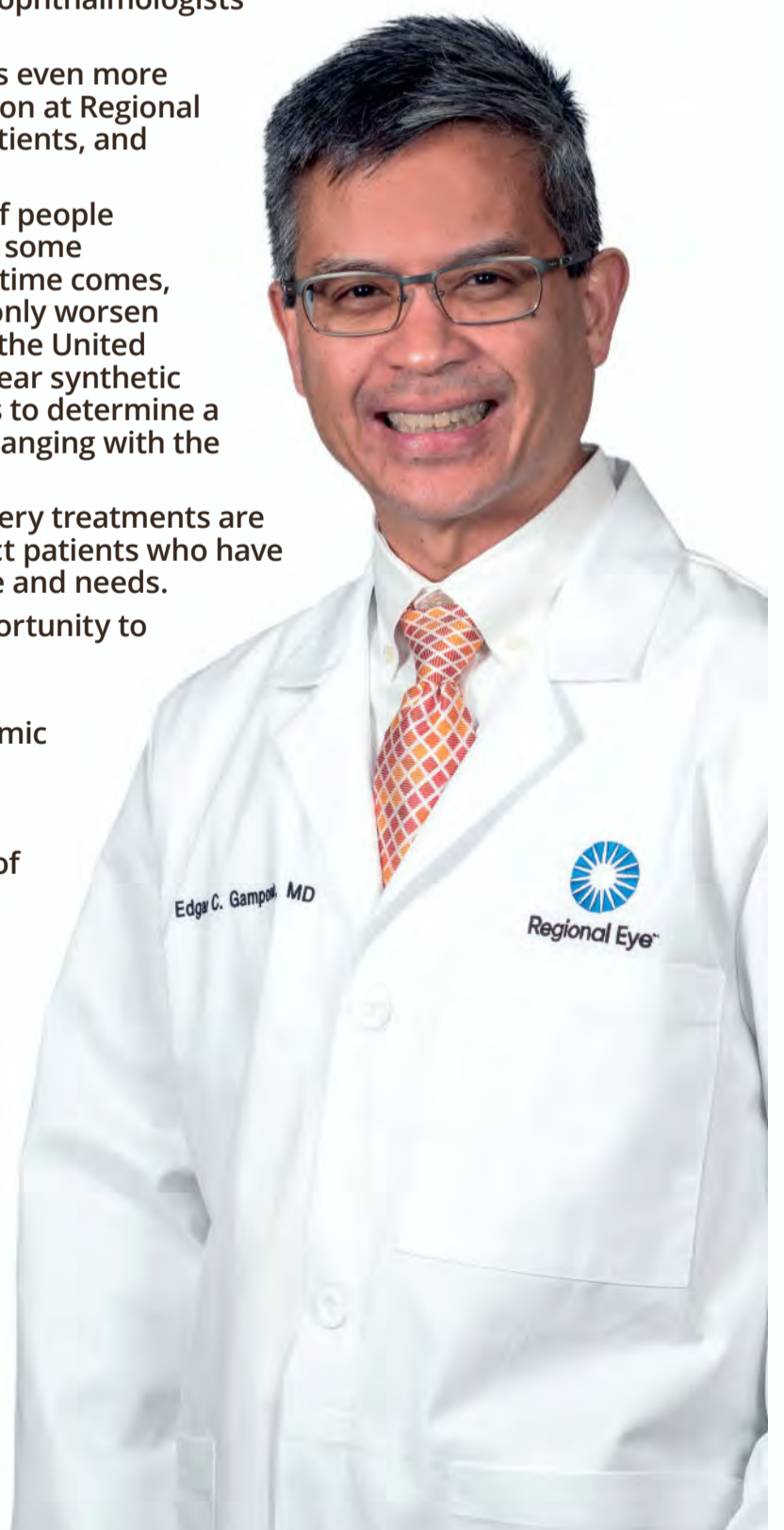
Studies show that patients who receive the LAL and the recommended post-surgery treatments are more likely to achieve 20/20 vision or better without glasses compared to cataract patients who have standard lens implants. The LAL can be adjusted to meet every patient’s lifestyle and needs.

“Small variations in healing happen in most eyes. With the LAL, we have the opportunity to correct for those and to give patients vision customized for their specific eyes,” said Dr. Edgar Gamponia.

Dr. Edgar Gamponia is an ophthalmologist specializing in comprehensive ophthalmic surgeries including laser refractive surgery, cataract surgery, glaucoma surgery, oculoplastic surgery, and retinal laser surgery. Dr. Gamponia is a board-certified ophthalmologist, a diplomat of the American Board of Ophthalmology, and a member of the American Academy of Ophthalmology and the American Society of Refractive Surgeons.

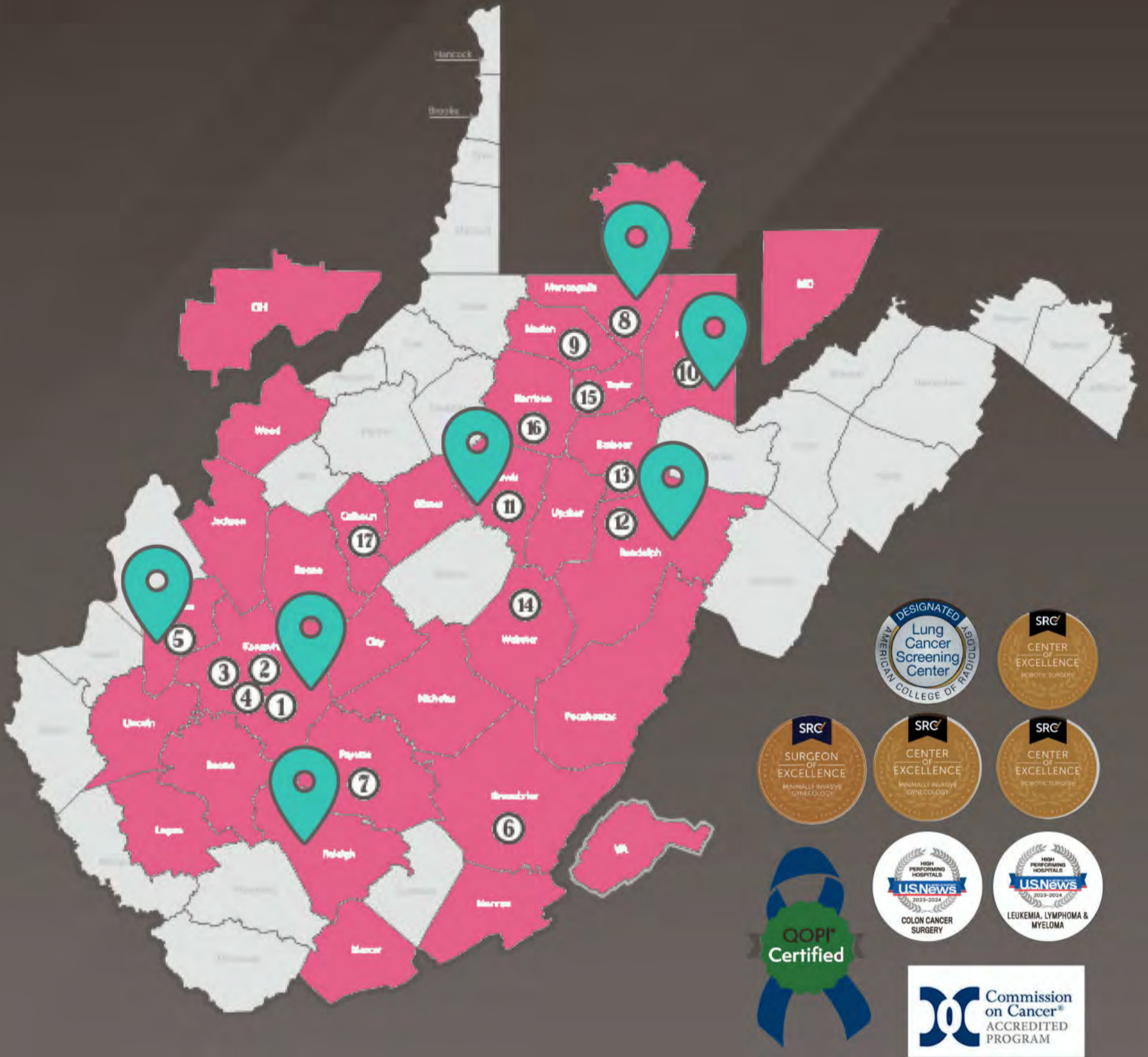
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GROWTH

# WVU Medicine Children's grows with young patients

BY LINDSEY FLEMING  
DPNews@DominionPost.com

Since opening its doors in September 2022, WVU Medicine Children's has steadily expanded its services and continues to do so, both on its main campus in Morgantown and at facilities around the state.

That growth has resulted in roughly 600 new jobs in the past year, said Dr. Christopher E. Mascio, executive chair of the newly formed WVU Children's Institute, which was created to improve kids' health in West Virginia and the region, as well as enable the hospital to expand its mission. Those hires include all specialties, general practitioners, nurses and advanced practice providers.

"We have a lot of positions posted," he said, "too many to count."

The need is there, as Morgantown's 150-bed facility remains "quite full most of the time" and WVU Medicine Children's continues to grow its network, for instance, with the opening of the inpatient pediatric unit at Thomas Memorial Hospital in South Charleston earlier this year and the hospital's recent collaboration with Valley Health to improve access to specialty care for pediatric heart patients in southern West Virginia, southeastern Ohio and eastern Kentucky.

The unit at Thomas Memorial, which serves patients 18 and under, provides round-the-clock pediatric care and allows for easier access to Morgantown's specialty and subspecialty services.

In the case of the partnership with Valley Health, WVU Medicine physicians

travel to Huntington every month to see young patients at the Valley Health Pea Ridge Health Center.

"They reached out to us and wanted us to have a presence in the area," Mascio said. "We're able to complement the services they already offer."

With WVU Medicine's presence in all of West Virginia's 55 counties and 21 counties in Maryland, Ohio and Pennsylvania, ensuring patients receive personalized care can prove a challenge.

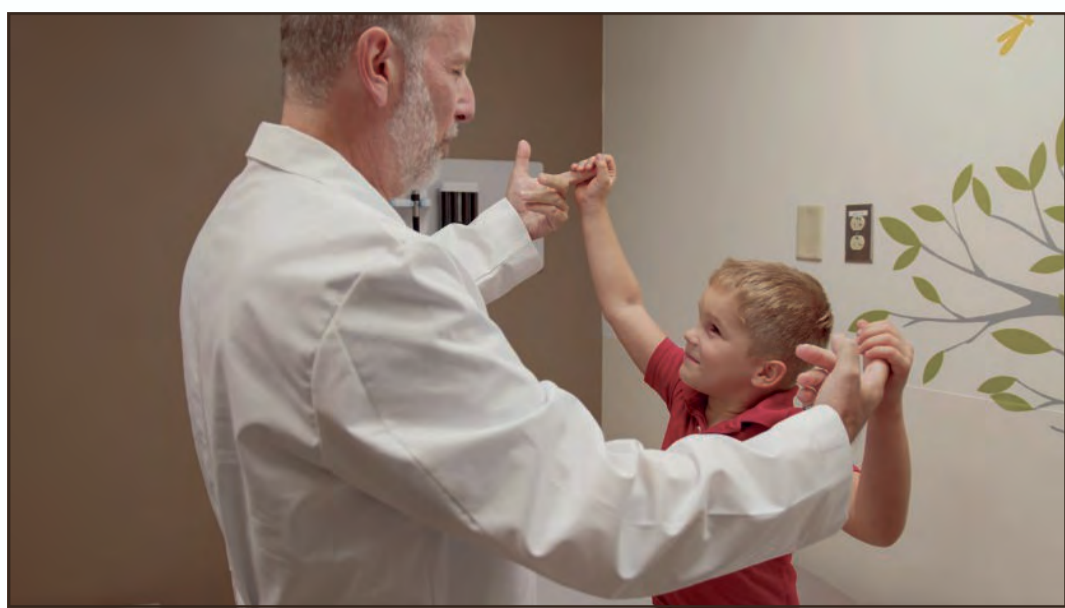
"We meet that challenge with training, investing in professional development of staff and by retaining employees," said Dr. Rafka Chaiban, who is associate chief quality officer of WVU Medicine Children's, the medical director of pediatric ambulatory clinics and vice chair of pediatric ambulatory operations.

Patient and staff surveys are one tool she said the hospital uses to evaluate satisfaction and learn "areas that may need improvement, so we can improve."

She added that technology is vital to maintain efficiency, by streamlining operations, reducing wait time and increasing access to care.

One example: WVU Medicine Children's pediatric telemedicine hubs, which are located in Wheeling, Martinsburg, Princeton, Summersville and Vienna. These clinics reduce barriers to care by having patients visit in person with advanced practice providers (APP) and virtually with subspecialists.

"These APPs are local. They're from that community, so they better understand the needs of the people there," Chaiban said.



Neurosurgeon Dr. P. David Adelson interacts with a young patient at WVU Medicine Children's. In addition to being the executive director of WVU Medicine Children's Neuroscience Center, Adelson is also Steve A. Antoline endowed chair for children's neuroscience, vice chair at the WVU Rockefeller Neuroscience Institute and a professor in the department of neurosurgery at the WVU School of Medicine.

WVU Medicine photo

"This has been a very successful and productive program, and it's lessening health care disparities. Parents are avoiding lost wages because they don't have to call off of work, and they don't have to pay for gas to come up to Morgantown."

These areas, along with Lewisburg (which does not have a telemedicine facility), also have outreach clinics, where subspecialists in pediatric genetics, pediatric cardiology, pediatric neurology, pediatric endocrinology, pediatric orthopedics and pediatric surgery drive to see patients.

"We want to keep kids as close to home as much as we can. They come here for the more complex things," Mascio said, referring to Morgantown's hospital.

That may involve anything from heart surgery to high-risk maternal care.

Mascio said neuro-oncology and the neuroscience center's epilepsy program are a couple areas of focus for the hospital moving forward.

"This state has a higher rate of brain tumors than

average," Mascio said, when explaining the importance of the push.

And according to WVU Medicine Children's website, "in West Virginia alone, more than 35,000 people are living with epilepsy — about 8,000 are children and a third of them are medically intractable," meaning medications don't work.

To help address these issues, hospital officials worked to recruit internationally recognized neurosurgeon Dr. P. David Adelson, who is the executive director of the neuroscience center.

In addition to Adelson's experience with CNS tumors and vascular malformations and management of brain, spinal cord and brachial plexus/peripheral nerve injuries, he has blazed a path in epilepsy surgery.

Chaiban added that pediatric neurology providers are also investigating ways to integrate developmental and behavioral health services — such as assessment and counseling — into existing pediatric prac-

tices, including a restructuring of how the process works, so "you're not waiting two or three years to get an evaluation."

Another area of attention for the hospital is the trauma center's march toward becoming a Level I facility. Level I and II trauma centers have similar personnel, services and resource requirements, according to the American Trauma Society, with the biggest difference being that Level II facilities don't have the same research and teaching expectations.

"We just got reapproved at Level II," Mascio said. "In the next few years, the goal is to get to Level I."

As the executive director of the heart center and the chief of pediatric cardiothoracic surgery, he is also leading the ongoing effort to bring pediatric heart transplants to the hospital.

Obesity continues to be a serious public health concern for residents of all ages in the state, so the hospital is starting a bariatric weight management program. Mascio said this will involve a multi-

disciplinary team of medical professionals who will evaluate patients and determine the best course of action for them.

He added that in the future the hospital would like to expand cancer services, for instance by providing infusions at locations outside of Morgantown.

"Some need to be done on campus, due to the side effects, but some things can be done at satellite sites, so we're looking into that," he said.

"With all of this growth around the state, we have a huge increase in patient visits," Chaiban said, citing that new patient visits have gone up by 18% in 2023, while completed visits are up 32% and the patient no-show rate decreased by 10%.

That involves pediatric care in all areas, including surgical and non-surgical subspecialties.

"We're booked all of the time," Chaiban said. "Our job is to continue to build bridges and connect communities in every corner of the state with the same high-quality care."

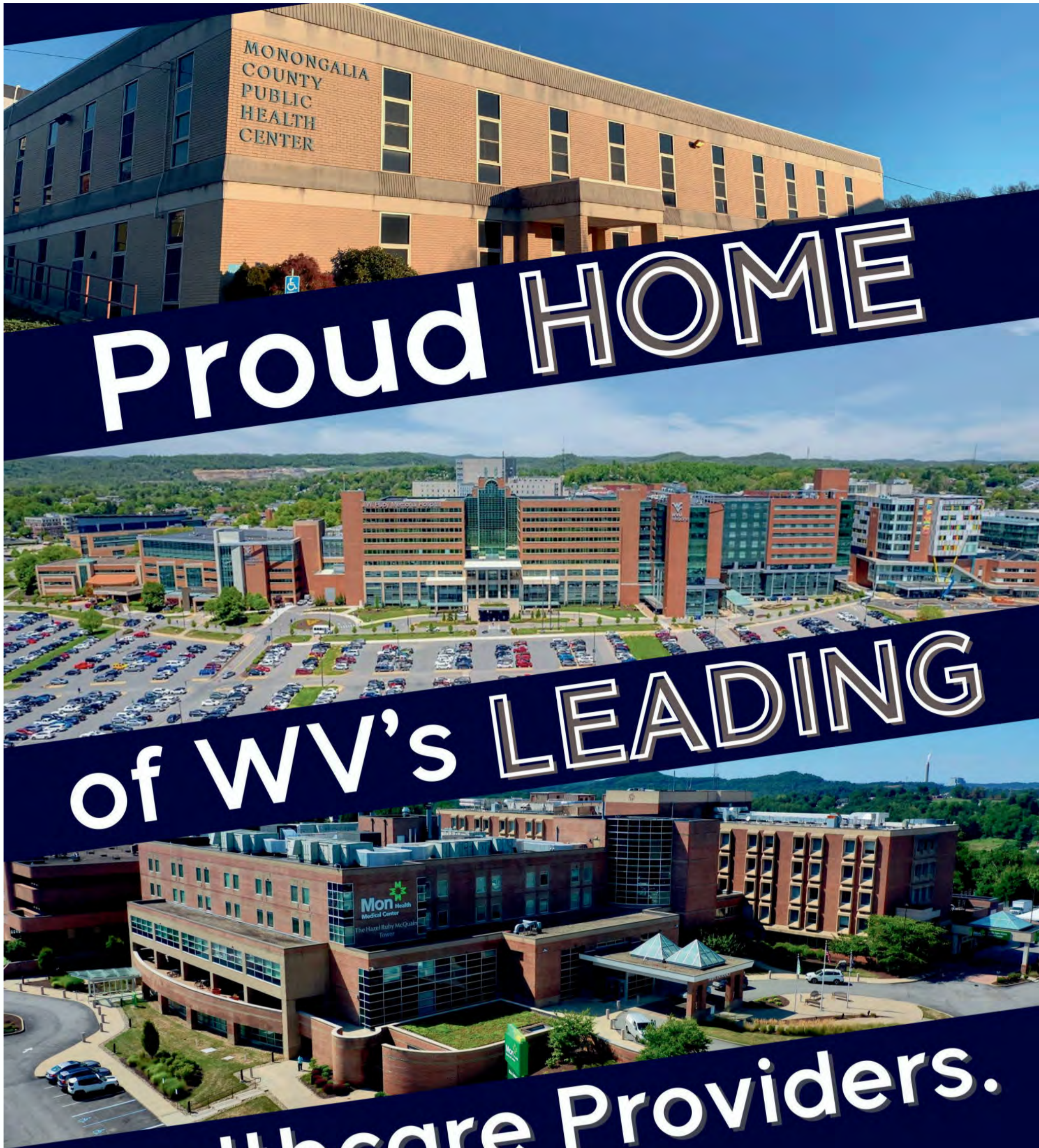
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MON HEALTH

# Postpartum program represents hospital at national conference

DPNews@DominionPost.com

Mon Health's Progressing Through Postpartum (P3) Program represented the Mon Health System at the recent Institute of Reproductive Grief Care Symposium in San Diego, Calif.

Through Mon Health's P3 Program, mothers are screened before, during and after pregnancy for any indication of anxiety, depression or mood disorders.

This allows for early detection and management of symptoms, giving the P3 team an opportunity to connect with mothers early on and provide continuous support throughout their pregnancy and postpartum journey.

Representing West Virginia's only dedicated peri-

natal mental health program, P3 members Jennifer Bender, perinatal nurse navigator, and Lora McDonald, perinatal social worker, spoke on proactive outreach support for pregnancy and postpartum patients with a focus on that patient's experience with any type of reproductive loss.

"We feel a special focus on families that have experienced a loss is close to our hearts and are honored to share how proactive outreach is impacting our patients," said Bender. "Reaching out and providing proactive care during one of the most difficult times in someone's life is the least we can do. We will never change what happened; we can support our precious families as they

journey through grief and loss."

According to the Institute of Reproductive Grief and current available data, one in four U.S. pregnancies end in miscarriage. Additionally, hospital emergency departments are reporting an average of five pregnancy losses each day and it is reported that 2.4 million fetal and neonatal deaths occur in the perinatal period in the United States each year.

These numbers don't include infertility, which carries its own repeated, emotional pain.

Grief after pregnancy loss and reproductive loss is often underestimated, yet 60% of bereaved parents experience depression, anxiety and PTSD.

"We see the importance of the care that we provide to our patients and families through P3 every day, especially as it relates to reproductive loss," said McDonald. "We are proud to represent our program and share our practices with others across the country. Our hope is that our experience can inspire others to provide more comprehensive support to patients and their families as they navigate through one of the most difficult times in their lives."

For more information about the P3 offerings at Mon Health, visit [MonHealth.com/OBGYN](http://MonHealth.com/OBGYN). If interested in supporting the program, visit [MonHealth.com/Donate](http://MonHealth.com/Donate).

CUTTING EDGE

# Heart & Vascular Center performs state's first WATCHMAN FLX Pro procedure

Mon Health System

Mon Health Heart & Vascular Center's Dr. Krishna Kishore Bingi performed the first patient implant of the new WATCHMAN FLX™ Pro Left Atrial Appendage Closure (LAAC) Device in West Virginia in early March.

Mon Health Medical Center is the first in the state to offer this latest LAAC technology that is designed to reduce stroke risk and serve as an alternative to the lifelong use of blood thinners for people with atrial fibrillation (AFib) not caused by a heart valve problem.

Built upon the proven safety and procedural performance of the WATCHMAN FLX, of which Mon Health was the first in West Virginia to offer, the WATCHMAN FLX Pro device features a permanent polymer coating that is designed to reduce the risk of device-related thrombus, visualization markers for enhanced placement and a broader size matrix to treat a wider range of patients.

More than 5 million Americans are estimated to be affected by AFib — an irregular heartbeat that can feel like a quivering heart. People with AFib have a five times greater risk of stroke than those with normal heart rhythms.

The WATCHMAN FLX Pro device closes off an area of the heart called the left atrial appendage (LAA) to keep harmful blood clots that can form in the LAA from entering the blood stream and potentially

causing a stroke. By closing off the LAA, the risk of stroke may be reduced, and, over time, patients may be able to stop taking their blood thinner.

"The Mon Health Heart & Vascular Center continues to stand at the forefront of medical advancements and will always strive to bring advanced care close to home for our patients," said Bingi. "I'm proud to have performed West Virginia's first implant of this device, as it offers another patient a potentially life-changing stroke risk treatment and will allow us to continue to treat a broad range of patients."

The WATCHMAN technology has been implanted to treat more than 300,000 patients worldwide and is done in a one-time procedure. This permanent device doesn't have to be replaced and can't be seen outside the body. The procedure is done under general anesthesia and takes about an hour. Patients commonly stay in the hospital overnight and leave the next day.

Mon Health System is an integrated network of physician clinics, outpatient centers and hospitals in north-central West Virginia. It includes five hospitals — its flagship, Mon Health Medical Center in Morgantown; Mon Health Preston Memorial Hospital in Kingwood; Mon Health Stonewall Jackson Memorial Hospital in Weston; Mon Health Marion Neighborhood Hospital in White Hall; and affiliate, Grafton City Hospital in Grafton.

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WVU MEDICINE

# Children's has state's only Epilepsy Monitoring Unit for pediatric patients

BY DAVID BEARD  
DBeard@DominionPost.com

WVU Medicine Children's is expanding its epilepsy program services this year.

We talked with Children's neurosciences Executive Director Dr. P. David Adelson about epilepsy in children and the hospital's Epilepsy Monitoring Unit (EMU).



Dr. P. David Adelson

There are about 350,000 children in West Virginia, he said, and based on the statistics of epidemiology, about 7,000 to 8,000 will have epilepsy, at risk for or experiencing recurring unprovoked seizures.

In most cases, this can be helped with one or two medications, he said. But about a third — 2,000 to 3,000 in West Virginia — will fail to find help from two or more medications and have what's called drug-resistant epilepsy.

This is life-threatening and the state can see potentially 10-50 children per year who die suddenly.

So the goal is simple. "We're trying to stop the seizures in patients who have epilepsy," he said.

First, they try to figure out what's causing the seizures. It may be something physical like a brain tumor or vascular problem that can be treated.

It could be something more subtle or a malfor-

mation of the brain. Then they would try medications first, and if that fails, further evaluation is needed — where are the seizures coming from and can they be treated or cured?

Evaluation can involve an MRI or EEG (electroencephalogram), neuro-psychological testing or functional imaging, such as a PET scan or functional MRI that shows the anatomy plus where connections are not normal.

Sometimes, continuous monitoring is needed and that's where the EMU comes in. The child is admitted and hooked up to an EEG for several days to see the seizures and the brain activity and body movements. If a child's seizures are infrequent and couldn't be seen in just a few days, they may reduce the child's medications to allow the seizures to happen so they can be monitored.

Sometimes, monitoring may need to be invasive: placing electrodes in the brain itself to the gather data.

After the monitoring, the team meets to discuss treatments, Adelson said. Can the seizures be halted by removing a small part of the brain, or through focused laser ablation, or through neuromodulation to alter brainwaves in the area where the seizures originate?

Neuromodulation involves planting electrodes in the brain; the modulator is powered by a

small battery that is also implanted. Vagus nerve stimulation involves electrodes in the neck. Deep brain stimulation involves electrodes just where it sounds like.

Responsive neuro-stimulation can be superficial or deep in the area of seizure focus, with the generator planted into the skull itself. It's called responsive because the device records electrical activity. Then, through machine learning and working with the neurology group, the device will actually learn when to give a stimulus: When abnormal electrical activity pops up, the device gives a stimulus to stop the seizure.

The EMU has four beds now with shell space to add two more, and for the last three months, it's been full, Adelson said.

The EMU is currently the only place of its kind in the state. Looking ahead, "as we grow, we want to try to get services out into the rest of West Virginia."

WVU Medicine Children's is looking long-term at where to set up other neuro-diagnostic units in the state.

**"WE'RE TRYING TO STOP THE SEIZURES IN PATIENTS WHO HAVE EPILEPSY."**

Dr. P. David Adelson  
Children's neurosciences executive director

SURGERY

# Hospital committed to highest quality of care

BY KAITLYN EICHELBERGER  
Keichelberger@DominionPost.com

In 2023, WVU Medicine Children's hospital performed over 7,000 general surgeries and procedures, improving the lives of patients from across West Virginia and neighboring states.

All the while, the hospital has expanded its skilled staff and makes effort after effort to continue its advancements.

The hospital provides unparalleled specialized care not available anywhere else in the state. Its growth is evident through recent advancements such as surgical and staff expansions, alongside the introduction of new programs.

Dr. Federico Seifarth, surgeon-in-chief at WVU Medicine Children's, emphasized the interconnected nature of its specialized services. For example, a cardiac surgery typically then requires the surgical installation of a feeding tube — it's a symbiotic process, said Seifarth. To address the growing demand for professionals across various specialties and to accommodate the ever-growing demand of its patients, two pediatric surgeons joined the general surgery team late last year.

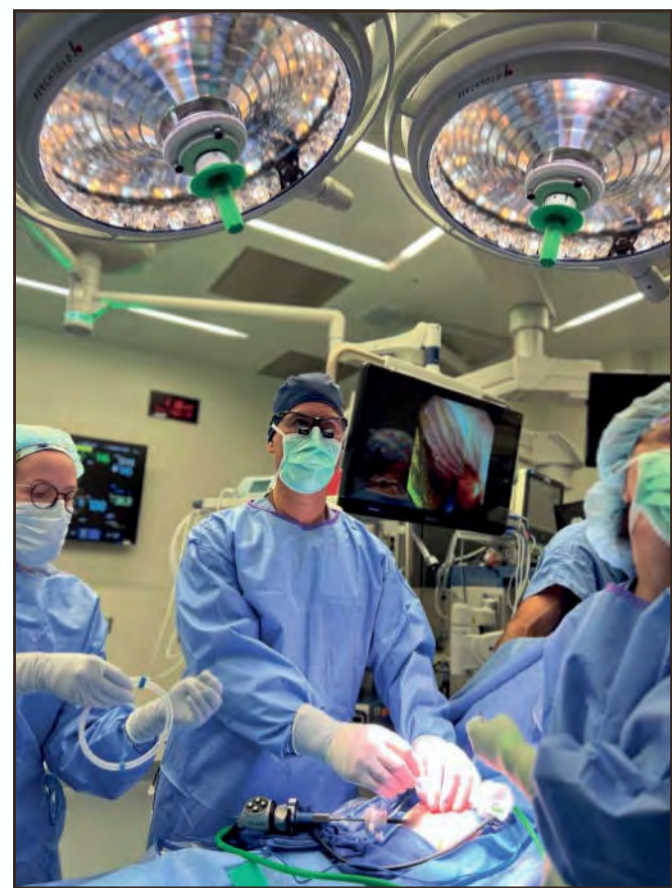
Dr. Joseph Drews, trained at Ohio State University and Nationwide Children's Hospital, specializes in minimally invasive surgery, neonatal surgery, surgical oncology and colorectal surgery. He also serves as an assistant professor of pediatric surgery at the WVU School of Medicine.

Dr. Lea Wehrli, specializing in colorectal surgery, studied at the University of Zurich and is also an assistant professor at the WVU School of Medicine.

With these additions, along with Pediatric Trauma Director Dr. Patrick Bonasso, the pediatric surgery team at WVU Medicine Children's now comprises four surgeons.

Other updates, made largely possible by the hiring of new surgeons, include expansions to the chest wall program and the 2023 introduction of an advanced bowel management program, then the subsequent 2024 addition of a specialized clinic.

Over the past two years, WVU Medicine Children's has pushed to perform minimally invasive surgeries on smaller and therefore more complex patients, down to babies as small as 6 pounds. This correlates with the further use of the da Vinci robotic system — technology that allows surgeons to perform robotic-assisted surgery, resulting in faster recovery and reduced impacts of surgery, like scars or pain during recovery. The robotic



WVUM photo

Dr. Federico Seifarth, surgeon-in-chief at WVU Medicine Children's, and his team perform a surgery at the hospital.

surgery program covers all ages except for babies. Both initiatives share one goal: to accommodate a wider range of cases with the most efficient and comfortable care.

WVU Medicine Children's qualifies as the region's only Level II pediatric trauma center as certified by the American College of Surgeons. As a Level II facility, the hospital is recognized to provide care for a wide range of traumatic injury types and severities and demonstrates educational and leadership qualities. This designation is reevaluated every three years, and the hospital is already planning its next application to qualify for Level I pediatric trauma center classification, the highest level defined by the American College of Surgeons.

As a Level I pediatric trauma center, WVU Medicine Children's will showcase comprehensive and skilled care for all injuries, supported by round-the-clock professionals and cutting-edge technological advancements. It will also recognize the hospital's regional role in research and education, an aspect of the hospital that fuels its progress year after year.

"We are, across the board, involved in research, mostly practical and outcomes research. The fact that we grew as a facility and patient volume growth has boosted our research output," said Seifarth. "It's also much more attractive for pharmaceutical or technology companies to work with us."

Beyond the multidisciplinary approach to the surgical process, the children's hospital prioritizes the

patient and family from the moment they step through the doors to long after they've left. Resources like the hospital's expanding therapy dog program and child life specialists are dedicated to helping patients cope with anxiety surrounding topics like surgery.

"We are aware that surgery is just the first step in healing. What really improves overall health is psychological and mental healing, and family comfort and healing," said Seifarth. "The hospital invests a lot in care for families."

Looking ahead, the 2022 acquisition of Thomas Health, in Kanawha County, will allow WVU Medicine to make its renowned medical services more accessible to the southern part of the state, and the children's hospital is eager to extend its care to children all across West Virginia. It will also continue to use telemedicine to improve accessibility of care.

Additionally, the children's hospital aims to lower the age for weight-loss surgeries in adolescents to accommodate teenagers, previously limited to patients 18 years or older, a goal that may be fulfilled this year.

With the new bowel management clinic, WVU Medicine Children's will host a "Bowel Management Week" for young patients and their families to stay on-campus to undergo X-rays and treatments with the goal of sending patients home seeing positive changes in their bowel movements.

For more information about WVU Medicine Children's, visit [Childrens.WVUMedicine.org](http://Childrens.WVUMedicine.org).

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The Dominion Post



EXPANSION

# Preston County Health Department hopes to get funding for new building

BY JENIFFER GRAHAM  
DPNews@DominionPost.com

KINGWOOD — The Preston County Health Department is looking forward to a busy year with several changes.

One of the projects being worked on is funding for a new building.

According to V.J. Davis, director of the Preston County Health Department (PCHD), once constructed, the proposed building would be used to house the health department, WIC and the WVU Extension Office, as well as provide additional storage space for EMS and the 911 Center.

The building will be constructed on county prop-

erty, near the 911 Center.

Davis said the Board of Health (BOH) is working with the Preston County Commission and Region VI to find funding for the project. He said Region VI is looking at possible congressional funding and money through the governor's discretionary funding program.

The BOH is also hoping to expand its Quick Response Team (QRT) by finding funding to train more coaches. Currently, the county has only one coach.

During a recent meeting, Dr. Fred Conley, county health officer, said the current coach works in the Preston Memorial Hospital

Emergency Room. He said whenever someone overdoses and goes to the ER, the team coach contacts the patient about rehabilitation programs.

Conley said a lot of times, when EMS goes out and gives Narcan to a patient, that person doesn't want to go to the ER. He said if a QRT coach is on hand, they have a better chance of talking with the patient about going into rehab.

Narcan is an over-the-counter drug used to treat known or suspected opioid overdoses. It blocks certain receptors in your body that opioids bind to. Blocking receptors help reverse the symptoms of

opioid overdose.

Conley said two or three more coaches would allow one to be on hand 24 hours a day.

Davis said members of the Preston County Commission contacted him about the QRT program and asked what it would cost to fund it. He said funding could come from the \$599,802.64 check the commission received from the Opioid Settlement Funds. This first check represented only 24.5% of the funds due to the commission. Davis said the program will be run by Preston Prevention.

Commission President Don Smith said the PCHD has not formally requested funding for the QRT pro-

gram. He said members of the commission are putting together an advisory board, and once in place, the advisory board will recommend funding for programs it believes will provide the most benefits to county residents.

Jeannie Welch, a registered nurse with PCHD, said the health department is also trying to increase its community health activities, like "Walk 10 miles in 10 Days." She said more information about community health programs will be on social media. Welch said information about tuberculosis, immunizations and communicable diseases will be included in the outreach information.

Welch said the PCHD also hopes to expand its diabetes program once Jennifer Nestor, the RN in charge of the program, receives her license this year.

"People don't realize how active we are in the community, working with agencies like the Family Resource Network and the extension service. VJ is active with the cleanup committee through the county commission and with the local emergency planning committee."

The Preston County Health Department, 106 W. Main St., Suite 203, Kingwood, is open 8 a.m.-4 p.m. Monday-Friday. Phone 304-329-0096.

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WVU MEDICINE CHILDREN'S

# Pediatric heart center expands into Huntington

BY CAVAN TARLEY  
CTarley@DominionPost.com

Based in Morgantown, WVU Medicine Children's Heart Center has continued its growth as a health institution and is expanding its services across West Virginia.

In February, it was announced that WVU Medicine Children's Heart Center and Valley Health partnered to provide pediatric heart care to patients in Huntington.

Dr. Jai Udassi, director of the heart center, and his staff meet with patients at Valley Health Pea Ridge Health Center every month to deliver services needed there.

The partnership with Valley Health contributed to the expansion of WVU Medicine Children's pediatric heart care services, bringing it to those living in southern West Virginia. "We believe we need to



A ribbon-cutting celebration at Valley Health Pea Ridge Health Center in Huntington.

move knowledge to the patients who need it, so families don't have to travel too far away from their home," Udassi said. "Our main campus being in Morgantown, we wanted to have our team members travel to the patients and

provide services locally in Huntington."

WVU Medicine Children's Heart Center was founded in June 2021. Udassi and Dr. Christopher Mascio, executive director of the heart center, were brought in to lead the insti-

tution with their expertise in pediatric cardiology. Infants, children and teenagers are the target age groups.

According to Udassi, it was necessary for WVU Medicine Children's to start its own heart center

because there weren't many heart disease programs in West Virginia, especially in pediatric care.

"We needed this pediatric and adult congenital heart disease program in our state of West Virginia," said Udassi. "It is important that our program is comprehensive and has all the pertinent team members under one umbrella who bring together the best possible care to our patients."

The heart center provides various heart care services for children and young adults. Diagnostic cardiac imaging, electrophysiology and interventional cardiology are the three types of pediatric services offered.

There are also a variety of heart conditions the center offers treatment for, including myocarditis, hyperlipidemia and aortic stenosis.

Udassi credits the collaborative efforts among the staff at WVU Medicine Children's Heart Center as

a distinctive factor from other pediatric hospitals.

"We work together as one team, focused on cardiac care for all of WVU Medicine Children's and all the acquired heart disease for children," he said. "We have built a center of excellence with comprehensive care that has all the pertinent team members under one umbrella, who bring together the best possible care to our patients. We have clinical rounds involving all the staff at least twice a day."

There are plans for new programs soon and plans for greater expansion of the health center.

"We are working to start pediatric cardiac transplants and a mechanical heart support program," said Udassi. "We already have approval and are currently recruiting the team members."

Udassi noted that he's seen the positive impact that the health center has on its patients.

MONONGALIA COUNTY

# MCHD's nurse practitioner part of plan to offer more services

Mon County Health Department

As Monongalia County Health Department gathers input from the community about how it can better serve patients, at least one piece of the formula is already in place.

Haley Tucker, APRN (advanced professional registered nurse), has recently joined the staff of MCHD Clinical Services as the new nurse practitioner.

Tucker has taken over the position after the recent retirement of Julie Armistead, who had been with the health department for about 20 of the last 40 years.

In this position, Tucker will be the primary nurse who provides the health department's free and low-cost birth control options to patients.

Tucker will also help spearhead MCHD's plan to offer a clinic to provide PrEP (pre-exposure prophylaxis), a drug that helps prevent individuals from getting HIV.

"And in the near future, we hope to offer some primary care options," Tucker added.

Tucker, a native of Morgantown, has three undergraduate degrees from WVU, in psychology, animal and nutritional services and nursing, which makes her well-rounded to deal with a variety of patient issues.

"I was taking too many classes and then I only had a few more classes to get a

degree," she explained.

She worked as an emergency department bedside nurse and eventually went to Penn State to earn her master's degree to become an APRN.

"Even when I was just working on becoming a nurse, I knew that I always wanted to continue my education and go to the next level and not just be able to care for people, but also to diagnose and treat them," Tucker said.

Monongalia County Health Department has been looking toward the future in several ways, including by undergoing accreditation offered by the Washington, D.C.-based Public Health Accreditation Board and also implementing a strategic plan.

As part of that strategic plan, MCHD's leaders held two town hall meetings this past week, and the health department is still conducting a short survey, which can be accessed on social media (Facebook, Instagram and X) using the handle @wvmchd, and on the website home page, monchd.org.

Although nurses at Monongalia County Health Department have already undergone Safe Zone training through the WVU LGBTQ+ Center, the staff will be taking the class again, said Jennifer Goldcamp, RN, the program manager for MCHD Clinical Services.

And Tucker fits into this plan as well.



Submitted photo

Dr. Brian H. Huggins (left), incoming health officer with Monongalia County Health Department, speaks with Haley Tucker, APRN, in the health department.

"Haley has been identified as our champion for our LGBTQ community," Goldcamp said. "We're going to go through the Safe Zone training again to make people feel more comfortable. And we will be offering the PrEP and trying to explore new ways to treat our underserved community. There are undocumented people and others for whom we are a safety net."

Goldcamp noted that offering some primary care will be an evolving process. "With our reproductive

care patients, if they want to come in, we want to be able to address their anxiety or depression, their prediabetes and hypertension, or maybe they will come in with an upper respiratory infection," she said.

Sometimes younger patients don't always have a primary care provider and a gynecologist ends up treating them for issues that might otherwise be addressed by a general practitioner, Goldcamp said.

Added Tucker: "As a

family nurse practitioner, I'm excited to open up the treatment and care options for Monongalia County Health Department. In my new position, I'm excited to grow the Clinical Services program and to provide new care options."

A graduate of Morgantown High School, Tucker began robotics in the third grade and eventually helped to create the Mountain Area Robotics (MARS) team that went on to win world championships.

"I really liked it because it was a hobby my dad and I

got to do, and the competitions were always new and exciting and enabled us to travel all over the country and meet people from all over the world."

Tucker has an 18-month-old daughter, Adeline, with her partner Lucas Hilsbos. She also runs, but noted that "children make you lose a lot of hobbies."

She had prior experience with babies when she fostered two of them during the COVID-19 pandemic in what was a quick decision she made one day at work.

"I knew I was taking them home that day."

**MONONGALIA COUNTY HEALTH DEPARTMENT HAS BEEN LOOKING TOWARD THE FUTURE IN SEVERAL WAYS, INCLUDING BY UNDERGOING ACCREDITATION OFFERED BY THE WASHINGTON, D.C.-BASED PUBLIC HEALTH ACCREDITATION BOARD AND ALSO IMPLEMENTING A STRATEGIC PLAN.**

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TECHNOLOGY

# Innovations always in works at Intermed Labs

BY ERIN CLEAVENGER  
 ECleavenger@DominionPost.com

Some really exciting innovations are in the works and underway at Intermed Labs, the award-winning, Morgantown-based startup venture studio that advances technological breakthroughs in health technology.

"We're in all stages of development, from ideas that we are still vetting — of which we have many — to ideas that are on the bench, to those that are more

mature and either on the market or in advanced phases of study," said Dr. Tom McClellan, CEO.

One such idea is getting ready to start in a trial at Marshall University and will help keep airways open when a patient is undergoing an endoscopy.

The device will be used during bariatric surgeries that are performed to aid weight loss. The procedure requires an endoscopic camera to be placed down the throat to see the inside of a patient's stomach. That tube can cause difficulty breathing with some patients, which leads to more risks during the surgery.

McClellan said the oropharyngeal airway device is designed to keep the airway open while they are scoping.

"The combination of that doesn't exist on the market and it's particularly useful in obese patients, and we think that can be a nice addition to the market," he said.



The Dominion Post file photo  
 Chief Engineer Officer Justin Chambers (left), Engineer Ryan Gross, COO Drew Lytton, CEO of Intermed Labs Dr. Tom McClellan and Chief Strategist Officer Ashok Aggarwal cut the ribbon at Intermed Labs' new location earlier this year.

Also in collaboration with Marshall, Intermed Labs is developing a new device to test for prosthetic joint infection.

McClellan said when people get something like a knee or hip prosthetic, they can develop swelling, so doctors will stick in a needle to withdraw fluid.

"We developed an add-on to that, which can also touch the component and break-up the biofilm to get a sample of bacteria, which can also help diagnose and treat joint infections," he said. "So, we're really excited about that idea as well."

Intermed, started at Mon Health Medical Cen-

ter, is now headquartered at WVU Innovation Corp.

It has several devices in the works here in Morgantown, too, McClellan said.

"We are starting our IRB (Institutional Review Board) approved study at WVU Hospitals for our Octopus, which is our rib fracture device," he said.

Octopus Rib Stabilization is a patent-pending, innovative non-operative solution to improve rib stability following trauma that wraps around the ribcage.

"It's basically a device that started as a sketch and has gone through about a year of development and now is going to be used to

treat patients, which is really exciting," McClellan said.

The study will begin in the next few weeks after some training has been completed for the nursing staff.

McClellan was also happy to announce Intermed just went over 50 Fingy3D devices sold in the last couple months.

The award-winning device is a simple, functional, totally 3D-printed prosthetic finger that can be purchased online for less than \$300.

Intermed has also been having a lot of success with Moodr, a technology platform developed in

Morgantown to help expectant and post-delivery moms deal with mental health challenges.

Working with Mon Health System on the project, McClellan said, "we're now over, I want to say, 1,000 patients enrolled in that and more than 40,000 communications between patients and providers. It's really taken off."

Not only does Intermed Labs have a lot of new innovations in the works, it is also working on expanding its reach outside of the state and the region within the next two years, while building a fair-sized company here in Morgantown that services

thousands of physicians.

"We offer service to health systems and physicians that doesn't exist within the state or the region — no one is doing what Intermed Labs is doing," McClellan said. "The more that we go out and talk to doctors and health care systems, the more obvious it is that there is a need for this. I think that's why we've been so successful in expanding to now Marshall and soon to be another health system."

McClellan said he believes the state is reaching a tipping point with innovation, particularly in the medical space.

"I really feel that tipping point coming to where now people are starting to think — 'hey, I've got an idea, now how can I make that a company?' We're starting to train these doctors to think, 'OK, how can this idea help patients and become a business?' and that's really, really exciting."

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@SC 6:35 PM	OFF	@WIL 6:35 PM	@WIL 6:35 PM	@WIL 6:35 PM	SC 7:00 PM	SC 7:00 PM	@TRE 1:00 PM	OFF	@FRE 7:00 PM	@FRE 7:00 PM	@FRE 7:00 PM	WIL 7:00 PM	WIL 7:00 PM	
SC 4:00 PM	OFF	@MV 7:05 PM	@MV 7:05 PM	TRE 6:30 PM	TRE 7:00 PM	TRE 7:00 PM	MID SEASON BREAK					@TRE 7:00 PM	@TRE 7:00 PM	@TRE 6:00 PM
TRE 4:00 PM	OFF	WIL 6:30 PM	WIL 6:30 PM	WIL 6:30 PM	@SC 6:35 PM	@SC 6:35 PM	@TRE 5:00 PM	OFF	WIL 6:30 PM	WIL 6:30 PM	WIL 6:30 PM	TRE 7:00 PM	TRE 7:00 PM	
@SC 6:35 PM	ALL TIMES ARE SUBJECT TO CHANGE							TRE 4:00 PM	@MV 7:05 PM	@MV 7:05 PM	@MV 7:05 PM			

## AUGUST

## SEPTEMBER

SUN	MON	TUE	WED	THUR	FRI	SAT	SUN	MON	TUE	WED	THUR	FRI	SAT
				WIL 6:30 PM	WIL 7:00 PM	@FRE 6:00 PM	@FRE 6:00 PM	MV 6:30 PM	MV 6:30 PM	MV 6:30 PM	CHAMPIONSHIP GAME		
@FRE 3:00 PM	OFF	@WIL 6:35 PM	@WIL 6:35 PM	@WIL 6:35 PM	SC 7:00 PM	SC 7:00 PM							
SC 4:00 PM	TRE 6:30 PM	TRE 6:30 PM	TRE 6:30 PM	@SC 6:35 PM	@SC 6:35 PM	@SC 6:35 PM							
@SC 6:35 PM	OFF	MV 6:30 PM	MV 6:30 PM	MV 6:30 PM	FRE 7:00 PM	FRE 7:00 PM							
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