LVHN Cancer Center–Hazleton Opening Soon

This fall, LVHN will open its first dedicated Cancer Center in Hazleton at 388 Airport Road, Hazle Township. LVPG hematologist oncologists Michael Evans, MD, Harvey Hotchner, MD, and Thomas Lyons, PA-C, will relocate from their current location at 1000 Alliance Drive to the new center.

The LVHN Cancer Center–Hazleton will include seven exam rooms and eight infusion rooms, and will provide diagnosis, treatment and chemotherapy services so people in Hazleton and the surrounding communities can receive comprehensive cancer care close to home. Specialty cancer services such as genetic testing and clinical trials will be available for Hazleton-area residents at Lehigh Valley Hospital–Cedar Crest in Allentown as needed.

Next Step

WATCH VIDEOS of providers who will practice at the LVHN Cancer Center–Hazleton. Visit LVHN.org/hazleton/hemonc-alliance.

Pocono Health System, LVHN Sign Letter of Intent to Merge

Pocono Health System (PHS) and Lehigh Valley Health Network (LVHN) have signed a letter of intent to merge, subject to due diligence, the negotiation of definitive transaction documents and appropriate regulatory approvals. The Boards of Directors of both organizations, in separate meetings, authorized the letter of intent.

“We believe that the residents of the Poconos region will greatly benefit from the merger of these two longstanding, high-quality health care systems,” says Jeff Snyder, president and chief executive officer (CEO) of PHS. The combination of our two organizations will mean that Poconos residents will have greater access to the highest-quality clinical care in the region, the most qualified and capable physician network supported by the most sophisticated technology and advanced health records systems, all delivered locally through PMC, while being supported by the resources and scale of Lehigh Valley Health Network.”

Brian Nester, DO, MBA, FACOEP, LVHN’s president and CEO, says the two organizations have a long history of productive partnerships in certain clinical areas, such as the affiliation to provide trauma and radiation oncology services to the region. He said together as a single, integrated system, they will accelerate steps to develop and grow additional, affordable health care services to best serve the community.

“We look forward to developing with PMC a hospital of the future that incorporates the highest level of clinical competence to provide the highest-quality care close to home. In addition, LVHN looks forward to the opportunity to provide more integrated care to the Pocono region through population health management, which includes sharing a common electronic medical records system.”

Pending completion of due diligence and regulatory approvals, the parties expect the proposed merger to take effect in the first half of 2016.
In this interview, Lehigh Valley Hospital (LVH)–Hazleton president John Fletcher discusses how the hospital has grown since its merger with Lehigh Valley Health Network (LVHN) in January 2014, and what lies ahead.

**Q** How do you measure the success of the merger?

**A:** From the start, we viewed our coming together with LVHN through one specific lens: How can this merger help us grow the health care services we offer in and around the Greater Hazleton region? We know that in the past, people from our area would travel to Wilkes-Barre or Allentown for services. Our goal was to grow our services here, close to home, so people don’t have to leave the area.

To that end, we’ve been very successful. Since the merger we have:

- Recruited 17 new providers, including physicians and advanced practice clinicians
- Opened a new ExpressCARE location in the Hazleton Shopping Center
- Started new service lines – chiropractic medicine, hematology oncology and orthopedics – that have been requested by people in our community
- Relocated LVHN–MedEvac to LVH–Hazleton
- And in May we opened our new internal medicine and pediatrics practices in the Brookhill Plaza, serving residents of the Conygham and Sugarloaf valley area.

In addition, we’ve held orientation programs to introduce our employees and our community to LVHN, and added video conferencing capabilities to deliver more services locally. We’ve also implemented a new strategic plan around the Triple Aim, which means we will provide better health, better care and better cost to people in our community.

All of these initiatives have helped us achieve our goal. Our hospital admissions, outpatient visits, visits to Lehigh Valley Physician Group–(LVPG) Hazleton practices and surgical cases have all grown since the merger, which tells us we are providing the care our community needs.

**Q** Will services continue to grow in the Greater Hazleton area?

**A:** Absolutely. This fall we are excited to move our LVPG Hematology Oncology practice to our new LVHN Cancer Center–Hazleton in Hazlet Township (see details on page 2). This will allow us to expand the types of cancer care we offer. In addition, we will continue to focus on growing the number of primary care and specialty physicians in our community, and are planning a new health center in Mountain Top.

**Q** Health care is continuing to change. How will LVHN’s services in northeast Pennsylvania change and grow?

**A:** To help us chart the right path for health care in our region, we’ve engaged Kaufman Hall, a national health care strategic consulting firm. They will help us develop a strategy for a new acute care facility that will position us to meet the health care needs of our area now and well into the future. In early April, Kaufman Hall began looking at health care trends locally and nationwide and conducted interviews with key people inside and outside our organization. At the same time, a steering committee of LVHN leaders, LVH–Hazleton leaders, trustees, physicians and community business leaders is working with Kaufman Hall. These initiatives will help us to develop our future health care strategy.

**Next Step**

[LEARN MORE](https://lvhn.org/hazleton) about health care services available in the Greater Hazleton area. Visit [LVHN.org/hazleton](https://lvhn.org/hazleton).
A Blessing to Breathe

SPECIALTY TEAM HELPS TOBYHANNA FAMILY MANAGE SON'S HEALTH
Justin Collura likes video games, building forts and playing with his siblings. But the 6-year-old Tobyhanna boy isn’t your average kindergartner. He was born prematurely, has numerous breathing problems and lives with cerebral palsy. At each step of his journey, his family has received support from caregivers affiliated with Children’s Hospital at Lehigh Valley Hospital in Allentown. Here’s how his team helps:

Prior to giving birth, Justin’s mother, Melanie Collura, relied on a team from LVPG Maternal Fetal Medicine for her high-risk pregnancy (she carried twins). At first she went to appointments in Moosic, about a half-hour away from her home. As her pregnancy progressed, she needed to travel to Lehigh Valley Hospital–Cedar Crest in Allentown.

Unfortunately, while in utero, her babies developed a rare condition called twin-to-twin transfusion syndrome, which creates an unequal blood flow between twins. While Justin survived and was born at 26 weeks, his twin did not.

Because he was born so young, Justin needed specialty care inside the neonatal intensive care unit (NICU) at Children’s Hospital at Lehigh Valley Hospital for nearly 120 days. For the first six weeks of his life, he needed ventilator therapy to help him breathe due to his prematurity-related lung disease. In the NICU, he underwent multiple procedures to help him with his health challenges.

While inside the NICU with her son, Collura watched and learned. “I loved the way the nurses would talk, play and rock the baby,” she says. “It made me feel so much better about not being able to be there 24/7.”

When the time came for Justin to come home, he still needed oxygen. “To keep him and all of my five children clean and germ-free, we adapted many of the things we learned in the NICU,” Collura says. “My children washed up and changed clothes after school. No one sick was allowed near Justin, and everyone who touched him or his things had to wash their hands first.”

To help Justin stay as healthy as possible, Collura continues to rely on her Children’s Hospital at Lehigh Valley Hospital care team. It includes pediatric pulmonologist Dharmeshkumar Suratwala, MD, who has guided Justin’s growth through medications, diagnostic testing and surgeries, including a lung biopsy, sleep study evaluation and surgery to help with obstructive sleep apnea hypopnea syndrome (OSAHS). Justin’s team also includes pediatric gastroenterologist Naser Tolaymat, MD, and pediatric registered dietitian Monica Paduch with Sodexo, who helps direct Justin’s feeding and weight-gain issues.

At age 2, Justin was diagnosed with cerebral palsy, a condition marked by impaired muscle coordination (spastic paralysis) and typically caused by damage to the brain before or at birth. The condition has caused him to walk with leg braces and a walker. As a result of underlying low muscle tone and cerebral palsy, he also was noted to have OSAHS and uses nightly continuous positive airway pressure (CPAP) therapy during sleep.

Yet despite his health challenges, Justin continues to fight every day. “He’s come a long way in the past six years, primarily as a result of his family’s extraordinary efforts toward his comprehensive care,” Suratwala says. “Physical and occupational therapy have been very helpful in his development.”

Collura is thankful for the help Suratwala and the team have given her. “Dr. Suratwala answers my questions and never ignores a concern,” she says. “He uses what I tell him, as well as what he observes with Justin, to find the best treatment.”

Today, Justin is in a regular kindergarten classroom and has an aide to help with things like carrying his lunch tray. He participates in all school activities and loves gym and outside recess.

“He loves life and is a happy boy,” Collura says. “My hope for the future is that he will learn for himself what he needs to do in order to stay healthy. And I hope he always remembers what a blessing it is to breathe. I know I do.”

—Leslie Feldman
Bob Yurcho walked bowlegged on purpose. He altered his gait to relieve the excruciating pain he felt in both knees. “My wife said I walked like an old man, and I felt like an old man,” says Yurcho of Oneida. But at age 55, Yurcho is far from over-the-hill.

Under the care of Lehigh Valley Health Network (LVHN) orthopedic surgeon Joseph Horton, MD, with Lehigh Valley Physician Group Orthopedics–Health & Wellness Center, Yurcho received nonsurgical treatments to relieve his pain, which was caused by arthritis. But the pain persisted.

At work – where he stands on a cement floor for hours at a time – Yurcho fought through the discomfort, which also hampered his active lifestyle outside work. Then came the final straw. “Walking my dog wasn’t even fun anymore,” he says. That’s when Yurcho decided to have bilateral (double) knee replacement surgery from Horton.

“He made the decision at the right time,” Horton says. “I’m disappointed when people see me three years too late because I know we could have helped them sooner.”

Here are reasons to see an orthopedic surgeon soon if you’re experiencing knee pain:

► Pain can snowball into other health problems. Knee pain causes inactivity, which causes weight gain, which can lead to diabetes, heart disease and other conditions.

► Knee replacement is just one treatment option. Nonsurgical treatments – like cortisone shots and physical therapy – may effectively relieve pain.

► Knee replacement is effective. “More than 90 percent of patients are satisfied with the results,” Horton says.

► The longer you wait, the harder it is to recover after surgery. When pain leads to inactivity, the muscles in your legs weaken. It then takes longer to strengthen them after surgery. That’s why it’s smart to receive physical therapy before knee replacement. “Two sessions before surgery have shown to reduce the amount of care people need after surgery by 29 percent,” says physical therapist Shai Post with the Health & Wellness Center at Hazleton.

► The replacement should last 15 to 20 years. By following up with your orthopedic surgeon every two years, problems with your replacement can be detected and corrected when they’re minor.

► You won’t be laid up for long. After surgery, you’ll be walking with assistance the same day. Although everyone recovers differently, most people are able to walk comfortably in six weeks.

Yurcho received inpatient reha-
bilitation in Lehigh Valley Hospital–Hazleton’s Gunderson Rehabilitation Center for one week. Under the supervision of skilled rehabilitation professionals, he performed exercises to strengthen his legs, increase range of motion in his knees and regain the confidence to return home. He then transitioned to outpatient rehabilitation from Post and her colleague, physical therapy assistant Ken Wenner. Their care helped Yurcho increase flexibility and strength, and progress from using a walker to no device at all.

Staying motivated is the key to success, because the exercises you do with a physical therapist will help maximize your outcome. “When you do rehab exercises at home as directed, you progress even faster,” Wenner says.

After seven weeks, Yurcho wanted to stay motivated despite the icy winter weather. So he visited his sister in Florida, enhancing the rehab he received in Hazleton with outdoor activity. “I went swimming, walking and bike riding every day,” he says. “I knew what I had to do to get better, and I did it.”

A few months after surgery, Yurcho is living an active lifestyle, which once again includes enjoyable walks with his dog. Twenty-five pounds lighter, he is confident he made the right decision to undergo knee replacement. “From the hospital, to the rehabilitation center, to the Health & Wellness Center, everyone who cared for me was excellent,” he says. “I would do it again tomorrow.”

–Rick Martuscelli

Q
Should you have one or two knees replaced at a time?
A: Weigh the pros and cons with your orthopedic surgeon. “Having bilateral knee replacement slightly increases the risk for complications and makes rehabilitation more difficult,” Horton says. However, if you’re young, active, healthy and can’t take time off work to rehabilitate twice, it may be your best option, like it was for Yurcho.
Sheaman is 140 pounds lighter. Her secrets to dramatic weight loss: diet and exercise.
She was your typical high school athlete. Chrissy Sheaman played softball, swam on the YMCA and Hazleton High School swim teams, stayed thin and felt great. Then came some busy college years, followed by a job working third shift.

“I started eating fast food because it was more convenient than cooking,” Sheaman says. “And that’s when my weight started to creep up.”

So a year-and-a-half ago, when her weight surpassed 300 pounds, Sheaman took charge. Today, at age 33, she’s 140 pounds lighter and preparing to run a local obstacle race to test her strength and endurance.

“Nearly 18 months later, Sheaman regularly attends a 5 a.m. spin class. On weekends, she’s in the fitness center at 8 a.m. On days off, she takes back-to-back spin classes, a body pump class and yoga, and continues to train with Brown one day a week. Sheaman also serves as a “workout buddy” for her friends and co-workers.

She Weighs Less Than She Did in High School

FREELAND RESIDENT CHRISSY SHEAMAN REVEALS HOW SHE LOST 140 POUNDS

SUPERCHARGED FITNESS
Sheaman began the fitness part of her weight-loss journey in January 2014 at the fitness center inside the Health & Wellness Center at Hazleton. There she met exercise physiologist Janet Corchado Brown.

“I started her out easy with some cardio work, then added strength and circuit training,” Brown says. “We worked together three days each week, and then Chrissy did two days of cardio on her own using a treadmill or a cross-trainer.” A few months later, Sheaman began group exercise classes.

“Janet and the rest of the fitness center staff create a family atmosphere that I love being a part of,” Sheaman says. “Janet would tell me, ‘you can do it.’ I put my heart and mind into it and started seeing results. Then I pushed harder.”

VISUAL MOTIVATION
Sheaman now weighs less than she did in high school and gets frequent compliments. To encourage others to follow her lead, she carries a photo of her former self.

“I like to tell people my story,” she says. “It helps them know that anything is possible. Once you get started, you don’t want to stop.”

—Sheila Caballero

Janet Corchado Brown
Exercise physiology
Riding With MS

RESEARCH TRIAL HELPS MACUNGIE WOMAN CELEBRATE SUCCESS

When she experienced blurry vision at age 18, Rachel Zavecz of Macungie thought she needed new glasses. When she experienced tooth pain a year later and two dentists couldn’t find a source, she assumed it wasn’t serious – especially once the pain disappeared.

But by age 24 – just after she had started a family – Zavecz began suffering a loss of balance, numbness and weakness. It all added up to a diagnosis of multiple sclerosis (MS), a chronic disease of the central nervous system that causes frequent flare-ups (exacerbations).

With MS, she feared she’d never enjoy quality time with her three children, horseback riding or any other favorite activity. Even worse, early treatments didn’t help. “At the time I was diagnosed, there were only four injectable medications available for MS,” Zavecz says. “I tried two of them, and they weren’t effective.”

But her caregivers at the MS Center of the Lehigh Valley, located inside LVPG Neurology–1250 Cedar Crest and certified as a Center for Comprehensive MS Care by the National MS Society, found a new option. They told Zavecz about a seven-year clinical trial called CAMPATH that tested a new drug – alemtuzumab. The FDA approved the drug, marketed as Lemtrada,™ after it was shown to reduce relapse rates and slow worsening of disability for people with MS.

“The trial was offered to patients who had experienced inadequate responses to two or more MS therapies and was approved by the FDA in 2014 for similar patients,” says neurologist Lorraine Spikol, MD, who directs LVHN’s neuroscience research. “Taking Lemtrada is a serious decision, as it is very difficult to physically go through. Lemtrada administration requires close monitoring in an infusion center and regular, long-term safety monitoring after the infusion, so it is restricted only to certain MS patients.”

Zavecz started the trial in 2008, just when her youngest child turned 1. She received Lemtrada intravenously for two years at Lehigh Valley Hospital–Cedar Crest’s infusion center, five days for a week in year one, then three days for a week in year two. She then had safety monitoring for the next five years.

“Without these trials, advances in treatment are not possible,” Zavecz says. “It made going through this worthwhile.”

Since taking Lemtrada, Zavecz has less pain and fewer exacerbations. “I can ride horses, exercise and take my kids to the park,” she says. “I used to be afraid to go out or plan a vacation because I didn’t know how long my energy would last or how the heat would affect me. Now this drug has given me my life back. I’m determined to continue moving forward.”

–Leslie Feldman
As you age, it often gets harder to cook nutritious meals or absorb nutrients from your food. You may fall short on the vitamins and minerals you need to stay in top physical and mental shape.

“Even with a good diet, older people may need to take supplements,” says Lehigh Valley Health Network nurse practitioner Jennifer Yourey, CRNP, with Lehigh Valley Physician Group Internal Medicine–Brookhill Plaza.

Start by talking to your provider about which supplements and dosages are right for your specific needs. Be sure to mention other medications you are taking to avoid dangerous interactions.

“Many herbal products can interact badly with prescribed medications,” Yourey says. “Bring your medication bottles so your provider can read the labels.”

Here are some supplements that may help you stay “golden” in your golden years.

**BONE HEALTH**
- **Calcium** – Bones store calcium, but with age you may not consume enough. Your body starts grabbing it from your bones, causing brittleness and raising your osteoporosis risk. Calcium supplements may help keep bones strong for a lifetime.
- **Vitamin D** – This essential nutrient assists your body in absorbing calcium. Older people often lack sufficient vitamin D in their diets or do not get enough sunlight (which prompts the skin to produce vitamin D). Your provider may recommend taking vitamin D and calcium supplements together.

**HEALTHY CELLS**
- **Iron** – It helps produce red blood cells that carry oxygen to all your cells. But poor eating habits or internal bleeding problems like stomach ulcers can lead to iron-deficiency anemia, which causes fatigue, fuzzy thinking and frequent infections.
- **Vitamin B12** – Even if you eat well, you may not absorb enough B12 as you age. Lack of this key vitamin – which helps produce red blood cells and supports brain and nerve cells – causes another kind of anemia that triggers confusion, depression and poor memory.

**HEART HEALTH**
- **Fish oil** – Rich in omega-3 fatty acids, fish oil helps lower cholesterol and curb inflammation in the body that leads to heart disease, arthritis and other chronic conditions.

**EYE HEALTH**
- **Lutein** – This antioxidant boosts eye health and helps prevent macular degeneration.

**JOINT HEALTH**
- **Glucosamine and chondroitin** – Cartilage contains these two natural substances. Taking them in a supplement encourages joint health and can relieve osteoarthritis pain.

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Visit [LVHN.org/hazleton/senior-choice](http://LVHN.org/hazleton/senior-choice) to learn about the benefits of the Senior Choice program.

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**Jennifer Yourey, CRNP**
*Internal medicine*

Watch her video at [LVHN.org/hazleton/Yourey](http://LVHN.org/hazleton/Yourey).
Lehigh Valley Health Network offers ExpressCARE without an appointment 365 days a year. We treat common illnesses and minor injuries. It’s a convenient option to a hospital emergency room. Wondering what conditions could be easily treated at an ExpressCARE and what conditions must be seen at an ER? Here’s a quick guide for some common conditions:

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<th>ExpressCARE</th>
<th>CONDITION</th>
<th>ER</th>
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<tbody>
<tr>
<td>✗ Allergies</td>
<td></td>
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<tr>
<td>✗ Animal bites (rabies vaccine at ER only)</td>
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<td></td>
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<tr>
<td>✗ Back pain</td>
<td></td>
<td></td>
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<td>✗ Broken bone (open wound)</td>
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<td>✗ Broken bone (no open wound)</td>
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<tr>
<td>✗ Bronchitis</td>
<td>Chest pains (severe)</td>
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<tr>
<td>✗ Chest pains (from cold or bronchitis)</td>
<td>Cuts (deep)</td>
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<td>✗ Cuts (minor)</td>
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<tr>
<td>✗ Cough, sore throat</td>
<td>Coughing up blood</td>
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<td>✗ Ear pain</td>
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<td>✗ Eye swelling, irritation</td>
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<td>✗ Flu</td>
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<td>✗ Flu shot</td>
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<th>ExpressCARE</th>
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<td>Head injury</td>
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<td>Loss of consciousness</td>
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<td>Minor fever, colds</td>
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<td>Minor headache</td>
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<td>Nausea</td>
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<td>Poison ivy</td>
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<td>Rashes</td>
<td>Severe abdominal pains</td>
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<td>Severe shortness of breath</td>
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<tr>
<td>Sinusitis</td>
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<tr>
<td>Sprains, strains</td>
<td>Stroke signs (numbness, speech slurring, vision changes)</td>
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<tr>
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<td>Suicidal feelings</td>
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<tr>
<td>Wounds (minor)</td>
<td>Wounds that won’t stop bleeding</td>
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ExpressCARE

Hazleton Shopping Center
564 W. Broad St., Hazleton

570-501-6220   LVHN.org/hazleton/expresscare