

Annual Donate Life Flag Raising Held



Raising the flag on the Princeton campus. From left, Chief Nursing Officer Tim Anderson, President and CEO Karen Bowling, Director of ICU/CCU Kim Poe, and Professional Services Liaison/Donor Family Supports Coordinator at Center for Organ Recovery & Education Jessica Wheeler.

April is National Donate Life Month. The Center for Organ Recovery & Education (CORE), WVU Medicine Princeton Community Hospital, and WVU Medicine Bluefield Emergency and Ancillary Services hosted the annual Donate Life flag-raising ceremony on Tuesday, April 4, 2023, on both campuses.

More than 100,000 people are waiting for a lifesaving transplant. Transplants rely on the generosity of organ, eye and tissue donors, and there are not enough donors to meet the need. That is why public awareness of organ donation is so vitally important.



Hospital employees and members of the media were present for the flag raising.

WVU Medicine PCH and Bluefield Emergency are proud to continue their partnership with CORE to play a small role in helping to meet the great need.

In 2022, WVU Medicine PCH saved the lives of nine people through organ donation. They enhanced the lives of 675 people through tissue donation and gave the gift of sight to 14 people through cornea donation.

(continued)



On the Bluefield campus. From left, Sharon Shockey, Karen Galuszek, Karen Bowling, Amanda Shumate, Amanda Pauley, Elizabeth Hicks, Breanna Rose, Al Boland, Anissa Cundiff, Melissa Danley, Cassidy Frye, and Kim Poe.

Bluefield Emergency enhanced the lives of 225 people through tissue donation and gave the gift of sight to six people through cornea donation. Both campuses hope to do even more in 2023.

Cecil F. Lockhart, a 2021 organ donor from Welch, West Virginia, was honored and remembered at today's ceremony. At 95 years of age, Mr. Lockhart was the oldest recorded organ donor in United States history.

Mr. Lockhart was a World War II veteran and a coal company owner and operator. His desire to serve others continued after his death when his donated liver saved the life of a 62-year-old woman. Mr. Lockhart's family said he was moved to become an organ donor following the death of his son, Stanley, in 2010, after which Stanley healed the lives of 75 people through tissue donation and restored sight to two others through cornea donation.

About CORE:

The Center for Organ Recovery & Education (CORE) is one of 58 federally designated not-for-profit organ procurement organizations (OPOs) in the United States. CORE works closely with donor families and designated health care professionals to coordinate the surgical recovery of organs, tissues, and corneas for transplantation. CORE also facilitates the computerized matching of donated organs and placement of corneas. With headquarters in Pittsburgh and an office in Charleston, West Virginia, CORE oversees a region that encompasses 155 hospitals and almost six million people throughout western Pennsylvania, West Virginia and Chemung County, New York. For more information, visit www.core.org or call 1-800-DONORS-7.

Larry Perdue Retires
After 47 Years of Service



Larry Perdue, RN, BSN
Director Surgical/Diagnostic Services

"May 1976 to April 2023, this has been my life's work, and now it is the end of an era. It has truly been an awesome journey."

– Larry Perdue, RN, BSN

Sherri Snead Retires After 39 Years of Service



Director of Diagnostic Imaging Services Sherri Snead, BART (R), RDMS, RVT, retired on April 30, 2023, after 39 years of dedicated employment at Princeton Community Hospital.

Sherri joined the hospital in January 1984 as a radiology technologist assistant while still attending Bluefield State College. After graduation, she became a staff technologist and later moved to ultrasound as a medical sonographer. She became board certified in physics, abdominal, OB/GYN, neurosonology, breast, and vascular ultrasound.

In addition, she worked for Siemens Ultrasound Division as a per diem applications specialist and vascular ultrasound instructor for their vascular training center in Seattle, Washington. From there she moved into the roles of clinical instructor, radiology supervisor, chief technologist of Medical Imaging, and finally director of Diagnostic Imaging Services in 2009.

In 2016, Sherri was appointed by Governor Earl Ray Tomblin to the West Virginia Medical Imaging and Radiation Therapy Technology Board of Examiners, where she served on the board for two terms.

Under Sherri's directorship, Medical Imaging has achieved and maintained multiple accreditations from the American College of Radiology and the Intersocietal Accreditation Commission, in the areas of mammography, CT, MRI, nuclear medicine, ultrasound and vascular ultrasound. PCH was the first hospital in West Virginia to obtain accreditation by the ACR in Breast MRI. The hospital has also been the first in the state to offer various procedures and treatments. During Sherri's tenure, we have also experienced growth in our rural imaging areas, expanded service lines, and upgraded to digital imaging equipment. In 2013, the Welch Imaging Center was opened, offering diagnostic x-ray, ultrasound, and MRI. The Princeton campus has seen the installation of state-of-the-art imaging equipment in the areas of CT, mammography, special procedures, nuclear medicine, ultrasound, and diagnostic X-ray.

Sherri said, "During my career I have witnessed many changes, some good and others not so good, but the hospital was always able to persevere during the turbulent times and flourish during the better times. When I look at where the organization is in 2022, I am very proud of the hospital, particularly the department that I worked in throughout my career. I am forever indebted to everyone who assisted in making the imaging department as strong as it is today."



Salina Meadows and Sherri Snead at the 2014 Mercer County Women's Expo.



2015: Sherri dancing at CEO Wayne Griffin's retirement party.



Salina Meadows and Sherri Snead were bell ringers in 2014.



Sherri with the Ultrasound Department Bees, Halloween 2021.

The Orthopedic Center's Longest Serving Member Set to Retire



A native of Princeton, West Virginia, Kathryn "Kathy" Dooley is a graduate of Princeton High School and Bluefield State College, where she earned her RN degree in 1978. Shortly after college graduation, Kathy joined Princeton Community Hospital's orthopedic/med-surg unit, then located on 3-West. Set to retire on May 13, Kathy is the longest serving member of the department after 45 years of outstanding service.

From a recent interview:

You spent your entire career in orthopedics?

KD: Yes. I started on 3-West which was a 36-bed unit with almost all orthopedic patients. In 2017, 3-West and 3-South flipped units when the orthopedic unit became Stryker-certified.

What memorable events/changes have you witnessed?

KD: Orthopedics has changed over the years. In the past, total hip and knee replacement patients were hospitalized for at least 14 days. Now, they often go home the day after surgery. Of course, we didn't have the outpatient physical therapy and rehab centers

available that we have today. We used to have patients in K-wire traction, spica casts, and halo traction. I was happy to be part of the first Stryker-certified orthopedic in the state. The new national best practice model for total hip and knee replacement, developed by Stryker and launched at PCH in 2017, was the single most significant change to the Orthopedic Center during my career.

Are there certain individuals that had an impact during your career?

KD: I will always remember Dr. Roy R. Raub (anyone who remembers Dr. Raub knew what a character he was), and Dr. Darrell Belcher. I learned so much about orthopedics from these doctors. I also learned a great deal from Dr. Abdul R. Piracha.

I had the best managers over the years. Loretta Lilly, RN, and Joy Tolley, RN, mentored me as a young nurse. Marlene Martin, RN, has been a manager and friend since 1997. She has always been supportive of me as a charge nurse. Wow! That is 26 years we've worked together. I have worked with so many people over the years that I will always remember and be grateful to each one of them.



1980: CEO William L. "Bill" Sheppard with Kathryn Dooley, RN. Kathy had been on the job two years.



Fall 2017 • Orthopedic Center nursing staff. From left, Marlene Martin, Jennifer Hicks, Danetta Meadows, Jeremy Branham, Stephanie Atkins, Kathy Dooley, and Rhonda Hawkins.



Kathy Dooley at her desk in 2021.



Kathy Dooley received the 2023 WVUM PCH Nurse of the Year award. From left, Board President Rusty Sarver, CNO Tim Anderson, Kathy Dooley, and President and CEO Karen Bowling.

What has been your favorite role at PCH?

KD: I have been a charge nurse of orthopedic/med-surg for over 40 years. It has been rewarding to have been in that role for so long. I have enjoyed floor nursing because of the patient contact it allows. I have met so many people in that role that I will always remember.

What are your interests/hobbies outside of work?

KD: I am fortunate to have my family close by. My husband Rick and I enjoy traveling. I enjoy doing things with my daughter Lynsey and granddaughter Kaitlyn. I am fortunate to still have my parents who live near me. My friend oversees a local animal rescue. I really enjoy helping with that and I hope to do more after retirement. My husband and I will celebrate our 45th wedding anniversary in November.

What are your plans for retirement?

KD: To enjoy every day. I hope my husband and I can travel soon. I definitely have a bucket list. I will continue to enjoy attending my granddaughter’s activities and enjoy family “stuff.”

While I look forward to retirement, I will certainly miss my PCH family – coworkers, physicians, and friends – that have come to be a part of my daily routine. I especially will miss my 3-South family. I appreciate each and every one of them for their help and support over the years.

Kevin Graham Retires After 35 Years As Director of Plant Operations



Kevin Graham joined Princeton Community Hospital on March 27, 1988, but his connection to PCH began years earlier. He was raised in the neighborhood across the creek from the hospital and played in the swampy area that is now PCH when he was a young boy.

On the day in December 1970 when Morrison Drive was opened to traffic for the first time, Kevin was struck by a car as he was walking to catch the school bus. Dr. Dad Duremdes had recently joined Princeton Memorial Hospital and Kevin was one of his first surgery patients. Madeline “Madge” Howard and Kevin became big buddies while he was hospitalized. Madge, who had joined Princeton Memorial in September 1966, remembers taking care of Kevin after the accident. They have remained close friends ever since.

Kevin was discharged from Princeton Memorial on the day patients were transferred to the brand-new Princeton Community Hospital. He received physical therapy to learn to walk again at the new hospital. Kevin noted that, interestingly, his career here ends with another round of physical therapy, this time to restore the use of his arm and shoulder.

From a recent interview:

What is your educational background?

KG: I graduated from Princeton High School, attended Bluefield College, and transferred to Virginia Tech where I earned my B.S. in Civil Engineering. I am a licensed professional engineer, as well.

When did you join PCH?

KG: March 27, 1988.

What was your first department/job responsibility at PCH?

KG: I have been in the same position for my entire career. I have filled in to help manage other departments like Communications and Laundry, but I have had the pleasure of working with Plant Operations, Security, Clinical Engineering, and Construction the entire time. I have also been Safety Officer, chairman of Safety Committee, and Fire Marshal (jack of all trades and master of none).

Please discuss the many and significant cost-saving measures that were initiated within your departments under your leadership.

KG: Wow, that is a loaded question. I have been so fortunate to work with progressive and hard-working people willing to work hard, take on responsibility and make things better for our staff and patients. God didn't call or bless me with the skills to directly care for patients, but rather to contribute in a way to make things safer and better for them:

Clinical Engineering: When I started it was decentralized and each department controlled service contracts for their equipment. We centralized the program under the Clinical Engineering Department, had those employees do first call for repairs, eliminated contracts, and improved not only service but cost. It was nearly 17 or 18 years later that our program cost reached what it was when we started the program in 1991.

Utilities: The electric bill for PCH was around \$300,000 per year when I started. We began a look at plant design



Plant Operations Department • February 2012. From left, Terry Choate, Maxie Hearld, Tracy Shrader, Jimmy Gunnoe, Richard Sigmon, Greg East, Ed Gibson, Kevin Graham, Gary Clark, Scott Spangler, Tim Truitt, Kenny Woods, Judy Boroski, Jarry Robinette, Joe Morris, and Robert Dillon. Inset, Gary Woodring.

and energy efficiency. Within three years, we cut the electric bill to around \$200,000 per year, which allowed us to put our money toward patient-facing issues. To put it in today's perspective, our electrical bill was just south of \$1,000,000 per year, so those savings translated to several hundred thousand dollars per year. We also developed a plan to buy natural gas from the Louisiana well heads that saved us over \$180K per year when we implemented the plan in the 1990s.

Plant Operations: One of the things we are most complimented on, and I am most proud of, is the performance of our employees. We do more in-house work than any of our peer facilities, which, again, improves response and significantly decreases costs. Unless there is a regulatory requirement or special equipment, like elevators, our guys do the maintenance themselves. Nearly every new regulator questions our ability to do the work that all other facilities contract, but we have passed each inspection with flying colors.

Construction: We implemented a style of construction project completion for the first time when we renovated The Behavior Health Pavilion called "Construction Management." We use it exclusively now. It basically marries the architect and contractor from day one of planning. It significantly decreased project time and cost, and totally eliminated change orders. We have also impacted codes and standards for hospitals. We partnered with Trane to become the first hospital we know of that designed systems to automatically control humidity in the OR environment, changed the design perspective of air handling systems for ORs in the event of fires, and how electrical systems are designed for critical services.

What memorable events/changes have you witnessed during your tenure?

KG: Every natural disaster from flooding that left more than a foot of water over the entire first floor and no power at all to a hurricane that hit us while we had scaffolding on the side of the building. Lighting also struck a cooling tower, causing it to burn, even while water was cascading over it! I could see the flames from Rt. 460 on my way here. We had major pipes that burst and left craters at the ER canopy and 12th Street that would have swallowed a car if not for ultra-quick reaction from Security and Plant Operations staff. It is a running joke in the department about guys having floods from pipe ruptures, so there have been several of those incidents.

From a Security perspective, we had an ER active shooter, a man bring in a package we thought was a bomb, a behavioral health patient hold a nurse, and I jumped on the elevator with a man with a gun that had the intent to kill his estranged wife that was here with their child.

My first federal safety inspection (OHFLAC) resulted in a violations list that is literally a file six inches thick. PCH had to hire three employees to correct deficiencies. We haven't had a major cited violation for 25 years probably. Of course, the technology added for patient care has changed significantly. We have been involved in every improvement and project including MRI, da Vinci, cath lab, nuclear med, sleep lab, etc. It is interesting to see how they work and help improve patient care. The contractor that did the shielding for our MRI (to contain the magnetic energy) had just returned from shielding the US Embassy in Cambodia to prevent electronic eavesdropping. He was interesting to talk to.

It was also a huge honor to be selected by my peers as one of five hospital engineers in the nation to be recognized for leadership in healthcare engineering. We were recognized at the July 2018 American Society for Healthcare Engineering conference in Seattle, Washington.

It was fulfilling to give back to the community by sponsoring over 10 local youth to obtain engineering scholarships through our healthcare engineering society, two of which are PCH employees' children.

Are there certain individuals that had a positive or significant impact during your career?

KG: Absolutely. I have departments full of them. That's the most rewarding part. The complexity of the physical plant, medical equipment, and security systems is well beyond the comprehension of any single person. Just the engineering theory and application spans over six bachelor of science in engineering degree skill sets (mechanical, electrical, industrial, biomedical, construction, and multiple civil engineering). We have so many employees with varying backgrounds that have applied willingness and basic mechanical skills, and now computer application knowledge, to become second-to-none in the industry for their abilities. That confirmation comes from contractors, vendors, and regulators who work with those guys. It has been an honor to work for those folks who have been, and I am confident, will be so dedicated to the profession.



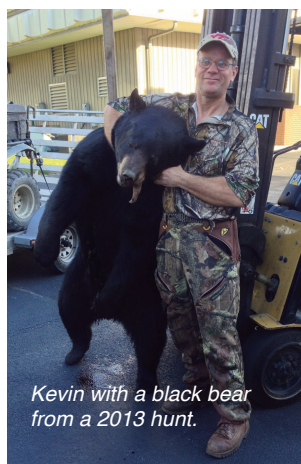
2018 • Kevin receiving the national American Society for Healthcare Engineering award.

What brought you the greatest joy during your years at PCH?

KG: The joy...the people. I love my coworkers. I understand our relative role to caregivers and departmental operations. It has been such a blessing, though, for all the employees to work with us to maintain a safe and regulatory compliant facility. They have always responded so positively to me when doing drills or making changes for compliance.

After thinking, though, my biggest consistent joy is the gift of a smile. I am intentional to get a smile from everyone I encounter here, when it is appropriate, within the first 30 seconds. I have a gift for goofy comments, so it is easy, but this business is too stressful not to relieve it with a smile. I cherish those smiles and will miss that the most. Another recent moment that brought joy was when I got to walk my daughter to work here at PCH on her first day.

I took a morning off to walk her to her first day of school and only had to take a few minutes out of my day to walk her to the ER where she now works.



Kevin with a black bear from a 2013 hunt.

When will you retire?

KG: May 31, 2023.

What are your interests/hobbies outside of work?

KG: I am pretty involved in our church. We have a "farm" near Camp Creek that I love to work on. Most everyone knows I am an avid hunter and love the outdoors. I know more hunting and side-by-side riding are in my future.

What are your plans for retirement?

KG: My family and I plan on taking some more extended trips that I couldn't afford before. I look forward to experiencing more of the world. We plan to complete the trip through the northeast to Maine that COVID halted.