


Carolinas Health

www.cmc-university.org • Spring 2011

A photograph of a man and a woman embracing. The man is on the right, wearing a light purple polo shirt, and the woman is on the left, wearing a pink top. They are both smiling warmly at the camera. The background is a bright, slightly blurred outdoor setting with greenery.

↓
Urgent Care
wait times
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Page 3

**Meet
Dr. Raghavan**
New President of
Levine Cancer Institute

**Does your
stomach ache?**
Some common
ailments explained

**Bringing
emergency care
to Huntersville**



Carolinas Medical Center
University

Sun protection 101

Justin M. Haught, MD, a Mecklenburg Medical Group dermatologist, talks about sunscreens

Choosing from the array of sun protectants available can make a simple thing like sun protection feel like a chemistry lesson. Experts urge wearing a waterproof, broad-spectrum sunscreen or sunblock with an SPF (sun protection factor) of at least 30. But what does that mean? Here's what you need to know about sunscreens.

Q: WHAT DOES BROAD-SPECTRUM MEAN?

► **A:** Sunlight consists of two types of damaging rays. Ultraviolet B (UVB) rays are the primary cause of sunburns and skin cancer. Ultraviolet A (UVA) rays penetrate the skin and contribute to skin damage, aging, tanning, sunburns and cancer. The term "broad-spectrum" means that the product protects against these rays.

Q: ARE HIGHER SPFS BETTER?

► **A:** Yes. The SPF is a rating of the sunscreen's ability to prevent sunburn. Although some may downplay the advantage of sunscreens with SPFs higher than 15 or 30, research shows that at higher SPFs the sunscreen is more



Justin M. Haught, MD

effective. A recent study in Colorado showed SPF 85 sunscreen to be superior to SPF 50.

Q: WHICH SKIN TYPES NEED TO WEAR SUNSCREEN EVERY DAY?

► **A:** Sunscreen use depends on two factors: the amount of sun exposure and your skin type. If you're very fair, wear sunscreen every day, especially on the face and neck. If your skin is very dark, you should only need sunscreen if you're going to be in the sun longer than 10 or 15 minutes. Midday summer sunlight has the most UV radiation for a given location. If you're taking a medication that makes you more sensitive to UV rays, wear sunscreen every day. Additionally, use sunscreen daily if your goal is to prevent sun damage and aging to your skin.

Q: WHAT ABOUT VITAMIN D?

► **A:** Vitamin D production depends on many variables, and using the sun as a source of vitamin D can be difficult. Sunscreen use doesn't seem to have a major impact on serum vitamin D levels. Ask your doctor about taking a vitamin D supplement. 🌿



FDA APPROVES NEW SKIN CANCER DRUG


After successful clinical trials, including eight at Carolinas Medical Center, the Food and Drug Administration approved the drug ipilimumab (Yervoy™) on March 25. It's used to treat adults who have metastatic melanoma (a form of skin cancer that has spread to other parts of the body). Ipilimumab helps the body develop a stronger immune response against cancer cells.

Melanoma is the leading cause of death from skin disease. According to the National Cancer Institute, about 68,000 new cases of melanoma were diagnosed in the United States in 2010.

For more information, visit www.carolinasmedicalcenter.org.



Urgent Care wait times, at your convenience

Experiencing cold or flu symptoms or suffering from an unexpected illness can be frustrating, especially if you're unable to get a same-day appointment with your personal physician or have to sit in a waiting room for hours. That's why all 17 Carolinas HealthCare Urgent Care locations are now posting wait times. Check times to choose the one that best fits your schedule, with no appointment necessary. Visit www.chsurgentcare.org from your smart phone and link to our mobile site, which offers access to wait times at all of our urgent care locations. 

CARE WHEN YOU NEED IT!

Carolinas HealthCare Urgent Care locations are open from 8 a.m. to 8 p.m., every day except Thanksgiving and Christmas. Our Children's Urgent Care hours are noon to midnight. Scan this QR code* with your smart phone to check wait times. Don't have a smart phone? Visit us online or call **704-355-8000**.



*To download a QR code reader, visit your preferred app store.

Meet our doctors

JOIN US IN WELCOMING OUR NEWEST PHYSICIANS



To find a physician near you, call **704-512-6963** or visit www.cmc-university.org.

- ▶ **Thomas A. Griffin, MD**
Levine Children's Specialty Center
- ▶ **Phaniraj Iyengar, MD**
CMC Neurology
- ▶ **Jenny Chen, MD**
Mint Hill Primary Care

- ▶ **Mark Harvey, MD**
Mint Hill Primary Care
- ▶ **Mark J. Heitbrink, MD**
Mint Hill Primary Care
- ▶ **Kenneth Morcos, MD**
Mint Hill Primary Care
- ▶ **Joseph Whalen, MD**
Mint Hill Primary Care

Turning a vision into reality

Dr. Raghavan speaks about his new role as President of Levine Cancer Institute

Derek Raghavan, MD, PhD, a world-renowned cancer expert, started his new position as President of Levine Cancer Institute in early April. Levine Cancer Institute was established in October 2010 with a \$20 million grant from the Leon Levine Foundation. For the past six years, Dr. Raghavan has been Chairman and Director of the Cleveland Clinic Taussig Cancer Institute in Ohio. He served a concurrent appointment as the M. Frank and Margaret Domiter Rudy Institute Distinguished Chair in Translational Cancer Research. 🌐



Q Carolinas HealthCare System (CHS) is honored to have you join the family. What attracted you to Levine Cancer Institute?

A Several things. I respect strong and effective leadership. I think what Michael Tarwater, Joseph Piemont, Paul Franz and their teams have achieved in the past two decades is spectacular. I also like their vision of returning something to the community and focusing on community-based cancer prevention, diagnosis, care and research. The fact that CHS is prepared to invest half a billion dollars in this system, while creating a new six-story center that will link to more than 30 community hospitals, is a superb opportunity for defining a new cancer-care model. CHS facilities care for more than 10,000 new patients a year, which provides a wonderful opportunity to make significant contributions to the national cancer treatment and trials effort. Generally speaking, we don't have enough patients involved in high-quality clinical trials in the United States.

Q What will be the first item on your agenda?

A I'll engage the outstanding CHS medical community to identify common interests and areas of cooperation and collaboration. Our team will be planning and implementing the new building; we'll be recruiting key physicians to complement the established clinical strengths in Charlotte and beyond; and we'll be developing our portfolio of laboratory, translational* and clinical research projects. **Translational research converts scientific discoveries into real-life clinical applications to help cure cancer.*

Q Your accomplished career spans more than 30 years. What are you most proud of?

A I've been very fortunate to work in outstanding centers with some extraordinary colleagues. When I started in oncology, I wanted to make a difference—to provide new treatments that would improve cure and survival rates, to train superb and empathetic doctors and leaders in medicine, to be involved in research, to develop effective medical business models that make sense and aren't wasteful and to give something back to the community, especially in the area of cancer-care disparities. I've been extraordinarily lucky to achieve some of my goals in each of these areas.

Q What advances do you expect to see in cancer research and technology in the next five to 10 years?

A With our new understanding of molecular biology and the relationship between the lab and the clinic, we will improve our ability to design and carry out important clinical trials: We're making progress faster than ever.

Twenty-five years ago, I was part of the large team that participated in changing the natural history of metastatic testicular cancer from a real killer to a reliably curable disease, and I've watched colleagues do similar things for other tumors. Ultimately, before I retire, I expect to see further improvements in cure rates and survival, reduction in treatment toxicity and improvements in preventing cancer and supporting our patients.

Q What one thing do you suggest an individual start doing today to prevent cancer?

A Stop smoking! Stop smoking! Stop smoking! Eating a heart-healthy diet, exercising, keeping your level of sun exposure sensible and being cautious about industrial pollution are important lifestyle changes.



BREAKING GROUND: Guests of honor at the Levine Cancer Institute groundbreaking included (l-r): Michael Tarwater, CEO, CHS; Derek Raghavan, MD, PhD, President, Levine Cancer Institute; Leon Levine; Sandra Levine; Jeffrey Kneisl, MD, Medical Director, Blumenthal Cancer Center; and Joseph Piemont, President and Chief Operating Officer, CHS.

Q During your tenure at the Taussig Cancer Institute, its ranking as one of the top cancer centers in U.S. News & World Report's ratings jumped dramatically from No. 46 to No. 9. To what do you attribute this success?

A A superb team of committed and caring doctors, nurses, support staff, front-line personnel and administrators in the cancer center, who provide the best care possible. This can only work in a system that enables interaction between clinical management and leading-edge research programs. My focus was to set that structure into place. The motto, "patients first," guided our treatment philosophy at the Taussig Cancer Institute. This approach will translate perfectly at Levine Cancer Institute.

Q Why is it important for patients to receive care locally?

A It minimizes disruption during a critical time in patients' lives. Patients need fine medical care and support and a defined medical plan and expectations. When these are close to a patient's environment, healing is easier. For more complex procedures, we may have to arrange care at our Charlotte facility, but we'll always try to get patients back home as soon as possible. We must be prudent about high-end expenditures and can't place every piece of sophisticated equipment in every center. Quality care directly relates to a provider's experience in using complex equipment and the number of patients seen.

Your guide to stomach ailments

Although generally hardy, your stomach can be the source of many uncomfortable symptoms, including heartburn, diarrhea, nausea, vomiting, abdominal pain or burning, some of which can be serious.

“Think of your stomach as a holding tank,” says Charlotte gastroenterologist Glenn Portwood, MD. “Everything you eat or drink arrives there via the esophagus after you swallow it.” Your stomach breaks down food into smaller pieces, but sometimes there can be problems. Here, some common stomach ailments are explained.

► **Gastritis** is inflammation of the stomach lining, which may be caused by infection, injury or irritation. Acid-induced damage to the stomach lining can also cause gastritis, as can smoking, heavy alcohol consumption and certain medications (like aspirin). Symptoms include upper-abdominal discomfort, nausea, vomiting and diarrhea. In most cases, symptoms are mild, pass quickly and have no long-term effects. Antacids usually ease symptoms.

► **Indigestion**, also called dyspepsia, describes a variety of abdominal symptoms, including heartburn (see below), nausea, bloating and fullness. Some people experience indigestion only when they eat certain foods or when they overeat. Others have symptoms daily. Quitting smoking and avoiding alcoholic drinks can reduce the incidence of indigestion. Over-the-counter medications may provide relief. If you suffer from frequent discomfort, your physician may suggest testing to find out whether a serious disease, such as peptic ulcer, gastric cancer or gallbladder disease is responsible.

► **Heartburn** describes a burning sensation in the chest accompanied by regurgitation of sour or bitter-tasting material into your throat and mouth. Normally, a valve called the esophageal sphincter keeps food from moving back up (refluxing) into the esophagus upon entering the stomach. The valve can become slack, allowing some acidic stomach contents to travel back up into the esophagus. It's the acidity of this refluxed material that irritates the esophagus.

Liquid antacids can reduce symptoms, and simple lifestyle changes can help you avoid heartburn altogether. “If lifestyle changes don't bring relief, your physician might prescribe medicine that blocks acid production in the stomach or increases the strength of the esophageal sphincter. Surgery is an option for people who continue to suffer despite medication and lifestyle changes,” says Dr. Portwood. 🌿



Glenn Portwood, MD



➔ DON'T SUFFER!

CMC-University's award-winning endoscopy department offers state-of-the-art technology to help physicians diagnose and treat digestive disorders. Visit www.cmc-university.org for more information.

If you're experiencing stomach problems, stop by *LiveWELL Carolinas!* at NorthLake Mall for a free consultation with a nurse practitioner or nutritionist.

Need a physician? Call **704-512-6963**.



Easier access to emergency care

Carolinas Medical Center-University is building a freestanding emergency department (ED) at the newly named CMC-Huntersville, formerly CMC-NorthCross, to meet the growing healthcare needs of our area. With this new facility, residents of Huntersville, Lake Norman and north Charlotte will be able to receive the comprehensive emergency care they deserve, right in their community. The new ED is scheduled to open in fall 2011 and will operate 24 hours a day, seven days a week. Staffed by board-certified emergency physicians, the ED will have nine exam/treatment areas and two observation rooms.


AWARD-WINNING CARE

J.D. Power and Associates designated CMC-University as a Distinguished Hospital (along with five other Carolinas HealthCare hospitals), for providing excellent Emergency Department services. Other J.D. Power and Associates distinctions at CMC-University include Inpatient Care and Maternity Service Excellence. We bring together people, technology and compassionate care for a lifetime, which is why our high marks exceeded the national benchmark study score for overall satisfaction with Emergency Department services.

CONVENIENT SERVICES

CMC-Huntersville is a state-of-the-art healthcare pavilion that's conveniently located at 16455 Statesville Road in Huntersville, just off exit 25 (Gilead Road) of I-77. Several advanced and innovative services that go far beyond what a traditional physician's office provides are already being offered at CMC-Huntersville, including:

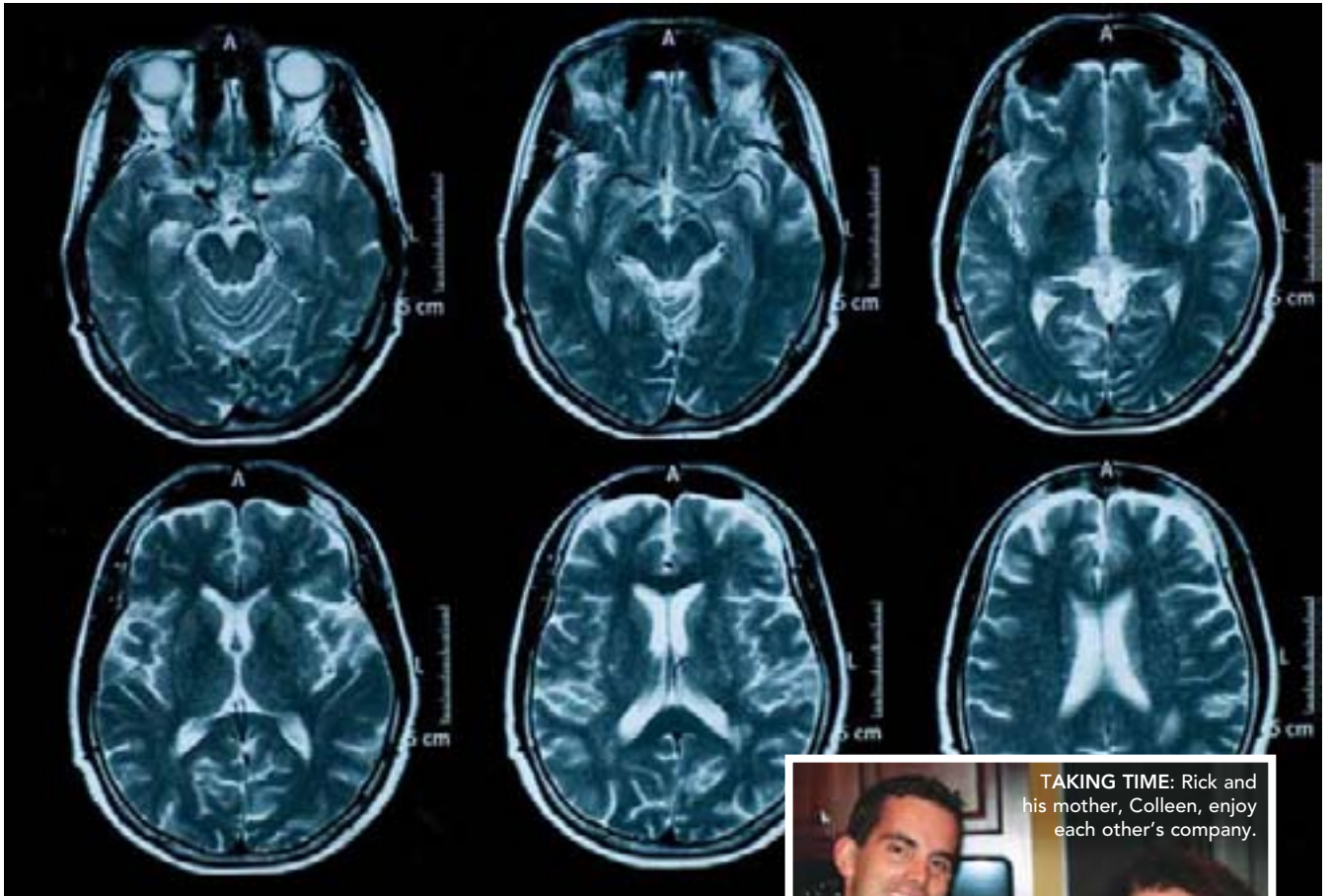
- ▶ Outpatient Surgery Center
- ▶ Endoscopy Center
- ▶ Diagnostic Imaging Center, complete with a 64-slice CT scanner, X-ray/fluoroscopy, ultrasound and mobile MRI service capability
- ▶ Sleep Center
- ▶ full-service laboratory, providing diagnostic blood work and complete urinalysis
- ▶ rehabilitation services
- ▶ Pain Management Center
- ▶ medical office building for primary care and specialty physicians
- ▶ retail pharmacy

At CMC-University, our goal is a healthier you, and CMC-Huntersville is just one more way we're delivering excellent care. 

▶ WHAT YOU NEED FOR THE ED

Visit www.cmc-huntersville.org to download tips on preparing for an emergency room visit.





TAKING TIME: Rick and his mother, Colleen, enjoy each other's company.

A silent epidemic

Traumatic brain injury

For Rick Volker, surviving was only half the battle.

At the age of 22, Rick was driving home with friends when he fell asleep at the wheel, hitting a ditch at 70 miles per hour and flipping his car several times.

“I got the call at 2:30 in the morning,” recalls Rick’s mom, Colleen Burgess. “We didn’t think he would live. If he did survive, there would be little chance of him being able to walk again.” Rick suffered what’s called a traumatic brain injury, or TBI. His mom—a registered nurse and former neurology nurse—knew the odds were stacked against him.

Luckily for Rick and his passengers, emergency services quickly transported them to Carolinas Medical Center (CMC), a Level 1 trauma center. Colleen says

the quick response time played a huge role in everyone’s survival. She then put her son’s life in the hands of the physicians at CMC, including neurosurgeon Martin M. Henegar, MD, who took care of Rick in the days right after the accident, and physical medicine rehabilitation specialist David R. Wiercisiewski, MD, who’s been following Rick since rehab. Their level of expertise and attentive care impressed Colleen. “Without these doctors, Rick wouldn’t be alive today.”

AN OVERLOOKED INJURY

Rick was one of the 1.4 million Americans who suffer a TBI every year. TBI occurs when sudden trauma—such as a blow or jolt to the head; or an object, such as a bullet—damages the brain temporarily or permanently. Many experts have called it a silent epidemic because it

affects millions, isn't well known by the public and often goes undiagnosed.

The severity of TBI can vary, from mild to severe. Someone may be knocked unconscious for a few seconds, and symptoms (feeling dazed, having problems concentrating, suffering from headaches or confusion) may not surface until days or weeks later. Other cases, such as Rick's, are immediately apparent.

Rick spent several months in a coma, and received physical therapy twice a day just to retrain his neck muscles to support his head. The right side of his body was paralyzed, and when he could speak again, he would use words inappropriately, referring to everything either as "pineapple" or "pencil."

"Years of recovery are involved," Colleen says, "and that doesn't get a lot of attention."

STARTING FROM SCRATCH

Speech and physical therapy are two key components of a TBI patient's rehabilitation. But post-rehabilitation therapy can be just as important. "Many of the pathways in the brain are lost and you need to get it stimulated again," Colleen says.

She found resources for Rick through Carolinas Rehabilitation's Project Star, a program that helps TBI patients and their families following rehabilitation.

Rick took classes that helped him learn how to socialize, as well as plan and organize activities. He also attended Hinds' Feet Farm, a local program that offers therapeutic horseback riding and exercise, and teaches skills for everyday living.

HELP FOR TRAUMATIC BRAIN INJURY

- ▶ **Project STAR at Carolinas Rehabilitation:** Call 704-355-1502 or visit www.carolinasrehabilitation.org.
- ▶ **Hinds' Feet Farm:** 704-992-1424 (Huntersville), 828-274-0570 (Asheville), www.hindsfeetfarm.org.
- ▶ **Heads Up:** The Centers for Disease Control and Prevention runs an informational Facebook page for those with traumatic brain injury (TBI) and their loved ones to connect with others affected by TBI. Visit www.facebook.com/cdcheadsup.

DID YOU KNOW?

According to the National Highway Traffic Safety Administration, about 20 percent of all crashes in 2009 involved some type of distraction. In those crashes, almost 5,500 people died and nearly 450,000 were injured. Distractions can range from taking your eyes off the road (grooming, reading a map or changing the radio station) to taking your hands off the wheel (using a cell phone or PDA, or eating and drinking) and taking your mind off of what you're doing. Texting is the most alarming because it involves all three types of distractions.



AN EXTRAORDINARY RECOVERY

Rick has come a long way. Today, he walks with a limp and uses a cane. "I really have to make an effort to remember names," he admits. Rick is even back in college, getting straight As and contemplating a career in Internet technology. He also speaks to nursing students and professional organizations about his experience.

Colleen's advocacy for her son inspired her to form a support group for families of TBI patients at Hinds' Feet Farm and to become an ombudsman for the Brain Injury Association of North Carolina. Recognizing the role that driving distractions play in automobile-related TBIs, she also launched a "No Phone Zone" event in March at Queens University, where drivers pledged to not text or talk on their cell phones while driving.

But one of Colleen's main missions remains making sure that families can find the post-rehabilitation resources they need. "I just want everyone to get the best care they can," she says. 🌱



Reaching out to our neighbors

Faith Community Health Ministry

As healthcare recognizes the union of body, mind and spirit, so does the practice of faith community nursing. Providing healthcare in a religious atmosphere joins two sources of health and healing: the faith community and the medical environment.

Recent research indicates that your state of well-being influences your immune system, affecting your overall quality of life. Prayer, grief and forgiveness also have measurable effects on your immune system.

Faith community nursing came to Charlotte in 1988 and spread to Concord in 1997. A group of chaplains began the Parish Nursing program at NorthEast Medical Center, now Carolinas Medical Center-NorthEast. Today, this program includes more than 55 faith communities in Cabarrus, Rowan and Stanly counties and is expanding to include faith communities in Mecklenburg County.

CARING FOR ALL

The Faith Community Health Ministry teams affiliated with Carolinas HealthCare System (CHS) serve these faith communities to promote health, wellness and healing through education and spiritual support.

Led by trained faith community nurses or faith community health promoters, patients learn that self-care and helping others are parts of responsible stewardship. In this role, nurses help them communicate with their doctors, other healthcare providers, religious leaders and their families.

Patients are encouraged to learn how to manage chronic medical conditions, prevent illness and enjoy a healthier lifestyle. Since many people regularly attend meetings within their faith community to seek a better life through fellowship, these meetings are also natural missions for wellness.

“Our healthcare system faces many challenges, including caring for an aging population with growing medical demands on top of a struggling economy, so healthcare dollars are in short supply,” says Sheila Robinson, RN, coordinator of CHS’s Faith Community Health Ministry. “We provide a way for people to connect with the resources they need along the continuum of care.”

HELPING THOSE IN NEED

Faith community nurses have several roles: health educator, advocate, referral source and integrator of faith and health. They train volunteers to take on various roles with the health ministry team. Every faith community with a health ministry has unique programs that address its particular needs. “It’s an idea that makes a lot of sense,” Robinson says. “Prevention has to take place outside of the hospital. The hospital doesn’t usually have the long-term relationship with patients that a faith community has with its members.” 🌱



LEND A HAND

For information about creating a health ministry in your faith community, call 704-446-4922 or visit www.carolinasmedicalcenter.org/faith to watch a video about the program.

Mark your calendar

SPRING 2011

To view a complete list of upcoming events and classes, visit www.carolinasmedicalcenter.org for more information.

ACTIVE WOMEN

Want the best discounts and 24/7 access to a nurse for free? Join *Active Women* and take advantage of an extensive list of discounts at local restaurants, hotels and retail shops. Members receive advance registration for special events and free 24-hour access to a registered nurse by phone. Any woman age 21 or older can join, and membership is free. Sign up at www.carolinasmedicalcenter.org/active.

MALL WALKERS

Join us each month in the food court to hear about health and wellness topics. Membership in our mall walkers group is free, so bring a friend or family member with you to an upcoming meeting.

- ▶ **WHEN:** 8:30 a.m., last Wednesday of each month
- ▶ **WHERE:** Carolinas Place Mall

HEART OF A CHAMPION

Participating students will receive sport-specific screenings that include a vision test, a general medical exam, an orthopaedic exam and a cardiology exam.

- ▶ **WHEN:** Saturday, May 14
- ▶ **WHERE:** CMC-Fort Mill Medical Plaza, 704 Gold Hill Road, Fort Mill
- ▶ **WHEN:** Saturday, June 4
- ▶ **WHERE:** Carolinas College of Health Sciences (CMC Campus) 1200 Blythe Blvd., Charlotte
- ▶ **COST:** Free
- ▶ **CALL:** 877-CMC-SPORTS for more information, to volunteer or to register a student, visit www.heartofachampionday.org

LIFESTYLE MANAGEMENT AND MEDICAL REFERRAL PROGRAM

Have you thought about getting fit and healthier but don't know where to begin? We have the program for you! Carolinas Medical Center and the Greater Charlotte YMCAs have joined forces to offer an eight-week program led by a registered nurse. We'll help you build a healthier lifestyle through

exercise, weight management and medical guidance.

- ▶ **WHEN:** Ongoing
- ▶ **WHERE:** Dowd and Harris YMCAs
- ▶ **CALL:** 704-512-3820 for more information and to register

CAROLINAS CANCER WELLNESS PROGRAM

This eight-week program helps patients manage the physical side effects of cancer treatment and increase their stamina during treatment and recovery. There's no cost to participate, thanks to the generous support of 24 Hours of Booty.

- ▶ **WHEN:** Ongoing
- ▶ **WHERE:** Dowd and Harris YMCAs
- ▶ **CALL:** 704-716-6150 for more information and to register

AREA BLOOD DRIVES

Your donation of lifesaving blood can help as many as three local lives!

- ▶ **WHEN:** Ongoing
- ▶ **WHERE:** Area CMC hospitals
- ▶ **CALL:** 704-972-4700 or visit www.cbcc.us to confirm locations, dates and times. Walk-ins are welcome.

Carolinas HealthCare recognized for diversity in the workplace

Carolinas HealthCare System (CHS) is the proud recipient of the Charlotte Chamber's 2010 Belk Innovation in Diversity Award, which recognizes local businesses that are leaders in the community and demonstrate a commitment to creating programs that foster diversity and inclusion in the workplace, as well as making sure

their programs generate measurable results.

A few of the ways CHS promotes diversity and inclusion include:

- ▶ hosting an annual regional diversity and inclusion symposium
- ▶ establishing a Physician Diversity Advisory Committee
- ▶ setting up a Diversity Hotline to address employee concerns
- ▶ creating a supplier program, which directed nearly \$113 million to minority or women-owned businesses



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UNC School of Medicine: Expansion to Charlotte

There is a broad consensus that North Carolina could see a physician shortage by the year 2015. To meet this need, the University of North Carolina's Board of Governors approved a large expansion of the state's public medical schools. Last fall, the UNC School of Medicine formally announced the establishment of a regional clinical campus coming to Carolinas Medical Center (CMC).

CMC has played an active role in providing clinical education for third- and fourth-year UNC medical students for more than 40 years. Those students have completed rotations at CMC in a wide variety of medical specialties as part of their overall training.

"The establishment of a medical school campus here in Charlotte recognizes the importance of Charlotte, Mecklenburg County and surrounding regions to the University of

North Carolina and the state," says William Roper, MD, MPH, dean, School of Medicine, vice chancellor for Medical Affairs and CEO of the UNC Health Care System. "This city has experienced vibrant growth recently and includes a strong community of support, which features many healthcare providers, a growing patient population and a strong interest in local health education."

According to the Association of American Medical Colleges, the estimated physician shortages beginning in 2015 may be 50 percent worse than originally anticipated. Projections before healthcare reform showed a shortage of around 40,000 doctors in 2015; however, current estimates bring that number to more than 60,000, with worsening shortages foreseen through 2025.

The expansion plan will also include a regional campus in Asheville, NC, at Mission Health System.



New signage was unveiled at Carolinas Medical Center (CMC) last fall. CMC will spend \$4 million to renovate its Medical Education Building.



Carolinas Medical Center

Uncompromising Excellence. Commitment to Care.