

# Horizons

A NEWSLETTER OF WILKES-BARRE VA MEDICAL CENTER // JUNE 2023



*Pictured above L to R: Chief of Staff Dr. Mirza Ali, SSG Thomas Reimann, WBVA Curator, Ron Skamanich*

## BATTLE FLOWN FLAG DONATED TO THE WILKES-BARRE VA

At the Wilkes-Barre VA Medical Center, there are quite a few employees who are still actively serving their country in a reserve capacity. One soldier who has made that commitment is registered nurse SSG Thomas Reimann. He's worked in our Wilkes-Barre VA's inpatient psychiatric unit since 2019. When he is not serving our Veterans clinically, he is serving our country as a member of the United States Army Reserve in support of the Global War on Terror and Operation Inherent Resolve in Iraq.

When deployed, SSG Reimann takes great pride in carrying and flying our United States Flag. In fact, a special US flag has accompanied him on every mission since 2021. This special flag has been flown in combat missions over the skies of Syria and Iraq, been carried over 5,000 miles in hostile territory by over 100 convoys, flown in Iraq on the 20th anniversary of 9/11, has accompanied SSG Reimann on several helicopter flights evacuating civilians under fire and has been onboard a Special Operations Helicopter during combat missions in support of Operation Inherent Resolve. What this flag represents for SSG Reimann is true patriotism, a job well done, and now that its mission is complete. He has donated this special flag to be displayed at the Wilkes-Barre VA Medical Center.

The displaying of this flag and the story behind it will serve as a constant reminder of what our military soldiers encounter daily to ensure our freedom as Americans. Thank You SSG Thomas Reimann for your generous gift.

## A Message from the Director



There are quite a few welcome additions coming soon to the Wilkes-Barre VA Medical Center. We are in the final stages of

completion of our three-level parking garage that has been in the works for the better part of 10 years. Construction completion is anticipated for some time in the next month. The new parking garage is primarily intended for Veteran patient parking. The new structure will have an elevator that will drop Veterans off at the northern entrance of the hospital, which will alleviate the need for some Veterans to climb several flights of steps to enter the facility. It will also free up additional parking for staff.

Another addition that goes hand in hand with the parking garage is the replacement of paving and the inclusion of new sidewalks to improve safety throughout the Medical Center grounds.

A third exciting addition, which should be online sometime in the fall, is our new mammography suite. The Wilkes-Barre VA has been expanding services for our women Veterans for many years now and this investment in our women's program will mean that they don't have to be referred to the community to get this type of specialty care.

Sincerely,

Russell E Lloyd, Director



## DR. SAMIR PANCHOLY Honored by the Society of Cardiovascular Angiography & Interventions

Wilkes-Barre VA Medical Services is proud to announce that interventional cardiologist and Director of Cardiac Catheterization services at the medical center, Dr. Samir Pancholy, MD, FAHA, FACC, FSCAI has been honored with the recognition of Master Fellow of the Society for Cardiovascular Angiography and Interventions (MSCAI).

Master Interventionalists are recognized by their peers as having demonstrated excellence in the field over a career, manifested by a commitment to the highest levels of clinical care, innovation, publication, and teaching. No more than 5% of the Society's active fellowship can have this designation at any point in time.

We are honored to have Dr. Samir Pancholy on staff serving our Veterans and we congratulate him on this distinctive honor.



## Wilkes-Barre VA to Take Part in Groundbreaking Cancer Screening Program

Cancer does not discriminate, just about everyone knows someone who has or did have cancer. Past national cancer studies have shown that Veterans have a slightly higher cancer rate 1.4% than the general public. Regardless, cancer is one of the leading causes of death throughout the world, right up there with cardiovascular diseases.



Local Veterans may soon have a chance to test a new cancer screening tool — all through a blood draw. The Department of Veterans Affairs and the Veterans Health Foundation have partnered with GRAIL, LLC, to provide Veterans access to GRAIL's groundbreaking multi-cancer early detection (MCED) blood test. During this trial, GRAIL will make its Galleri MCED test available to 10,000 Veterans across approximately 10 sites over the next three years. The Wilkes-Barre VA Medical Center (WBVAMC) will be one of those sites.

The goal of the blood-screening test, which is part of the REFLECTION clinical real-world evidence study, is to find multiple types of cancer at an early stage when treatment is most likely to be successful.

The Galleri test demonstrated the ability to detect more than 50 types of cancer, over 45 of which lack recommended screening tests today. The test, which has a low false positive rate of less than 1%, also determines the origin of the cancer with high accuracy.

Breast, cervical, colon, lung, prostate, liver, and kidney cancer are among the 50 types of cancer detected by the blood draw test.

**"We have made tremendous progress in the treatment of cancer. Early detection is important in improving overall outcomes and reducing cancer burden in our Veteran population. The Galleri® Test aims to complement standard cancer screening tests by extending cancer early detection to other cancers that do not currently have a standard screening test."**

**— Dr. Si-yuen Moy, Staff Hematologist-Oncologist at the WBVAMC**

The Galleri test is recommended for use in adults with an elevated risk for cancer, such as those age 50 or older. The Galleri test may not detect a cancer signal across all cancers and should be used in addition to routine cancer screening tests recommended by a health care provider. Use of Galleri is not recommended for individuals who are pregnant, 21 years old or younger, or are actively undergoing cancer treatment.

Results should be interpreted by a health care provider in the context of their medical history, clinical signs, and symptoms. A test result of "Cancer Signal Not Detected" does not rule out cancer. A test result of "Cancer Signal Detected" requires confirmatory diagnostic evaluation by medically established procedures (e.g., imaging) to confirm cancer.

False-positive (a cancer signal detected when cancer is not present) and false-negative (a cancer signal not detected when cancer is present) test results do occur. The Galleri test has not been cleared or approved by the U.S. Food and Drug Administration. GRAIL's clinical laboratory is regulated under CLIA to perform high-complexity testing. The Galleri test is intended for clinical purposes.

By offering the Galleri MCED test to the Veterans at the Wilkes-Barre VA Medical Center, our hope is that it will lead to more cancer diagnoses at an earlier stage, when treatment is more likely to be successful. Saving lives through early detection is the goal. Having this type of test available to our local Veterans at the Wilkes-Barre VA is very encouraging, especially since 45 of the cancers it detects lack regular recommended screening tests today.





*Pictured L to R: Physician Assistant Lynn Eckrote, Sergeant Major Kevin Bittenbender, Dr. Hameed Butt*

*Inset: Sergeant Major Kevin Bittenbender at the Pittsburgh Marathon*

## GOALS, DEDICATION AND FRIENDSHIP, One Soldier's Relentless Recovery from Burn Pit Exposure

Having a goal and reaching it has always been in Kevin Bittenbender's DNA. So, it comes as no surprise that Kevin was able to overcome his latest challenge and accomplish his mission.

Army Sergeant Major Kevin Bittenbender had served his country for over 34 years. He was deployed three times during Operation Enduring Freedom, serving 18 months in Afghanistan. That's when he was subject to burn pit exposure. For the last seven plus years, Kevin has seen his health become compromised due to neuropathy from burn pit exposure. This was not easy for him to endure, because part of his duty was to stay physically fit. With pain in his left leg becoming more and more prominent, he ended up losing first some, then all, of his left foot.

**"I initially began to have a class of neuropathy in my lower extremities and that eventually exasperated to my fingers and feet. I had no feeling in my fingertips and no feeling in my one foot. The neuropathy led to the amputation of first my big toe, soon after my whole left foot.**

**— Sergeant Major Kevin Bittenbender**

Kevin was determined to stay active. He made plans to hand cycle the Pittsburgh Marathon. His plans started to dim after he developed cellulitis and a staph infection in his left leg.

In the fall of 2021, during the tail end of his community care treatment, Kevin scheduled an initial Tele-Health visit with Dr. Hameed Butt and Physician Assistant (PA) Lynn Eckrote at the

Wilkes-Barre VA Medical Center. Once they saw the extent of his injury via video, Kevin was told he needed to come in for a full examination of his left leg.

**"When I came in for my examination and review of my condition, we were all in agreement that something had to be done immediately to curb the infection that started running through my body. They said, you know; the best-case scenario would be to amputate your leg just below the knee. We all agreed that would be the best option to stop the pain and improve my quality of life."**

**— Sergeant Major Kevin Bittenbender**

In the meantime, his fellow Veterans with the organization "Hope for the Warriors" donated a new hand cycle to him which he planned to use just six weeks after his successful amputation. Kevin is very involved in this organization because they bring awareness to mental health and PTSD for Veterans.

During Kevin's recovery, PA Lynn said, I know you plan to cycle the Pittsburgh Marathon in a few weeks, but what is your long-term goal? Kevin, without hesitation, told her that he would like to run it next year. Lynn said, if you run it, I'll run it with you.

So, 444 days post-surgery, team "Hope for the Warriors" which included Kevin, Lynn, and his support dog Kirby, lined up at the start line of the Pittsburgh Marathon.

Kevin said his functionality increased tremendously. He had so much more pain in his left leg before the surgery, he now has no pain in his left leg, not even phantom pain experienced by many others. Kevin said that he can actually sleep without being awoken by neuropathic pain.

**"I'm so appreciative of the VA. I'm very appreciative of Doctor Butt and the whole surgical team. You know the VA gets a lot of bad raps. I can honestly say that I don't have one bad thing to say about the VA, especially the Wilkes-Barre VA. The personnel there, they are the most caring and most considerate folks, they put your health and you before their own needs. I'm very blessed to have those folks in my life and continue to be in my life. They're more than just my providers, they're my friends."**

**— Sergeant Major Kevin Bittenbender**

What's next for Kevin? He said his next major goal is to hand cycle the Boston Marathon. He knows he would never be able to make the qualifying time as a runner. So, look out Boston, next year Kevin plans to be there and accomplish his goal. With that kind of determination, I would never bet against him.

**"Kevin is one of the most positive people I've ever met my entire life. He takes it all in stride, willing to help others, willing to get his story out to inspire others, and that's exactly what he does. All of us who ran with him were motivated and inspired by him."**

**— PHYSICIAN ASSISTANT LYNN ECKROTE WBVAMC**





# STROKE IDENTIFICATION AND TREATMENT

is a High Priority at The Wilkes-Barre VA



When a health care provider strives to be the very best, such as the VA, it takes knowledge, diligence, and training for any and all emergency situations. One of the most critical emergencies they face is that of a possible stroke. Rapidly identifying, diagnosing, and treating a stroke is very critical. Nowhere is that more evident than in the Wilkes-Barre VA's emergency department.

Training for this type of emergency happens on a regular basis at the Wilkes-Barre VA. Wilkes-Barre takes part in a Semi-Annual mock stroke code drill, set up by the VA's National Telestroke Program (NTSP).

The drill, which is simulated in real time, puts to the test the emergency response of our emergency department team, when a patient come in with stroke like symptoms. A nurse driven protocol is used to initiate what's called a "Code Stroke." This facilitates a time guided blueprint. Speed and accuracy are of utmost importance since the clot busting stroke medication (TPA) needs to be administered within 4 1/2 hours of the patients' last known well time. The team knows the door to needle time critically impacts the patient's outcome. Every 15-minute delay is linked to possible disabilities after a stroke.

The staff in the Wilkes-Barre VA emergency department take pride in their work, and the practicing of stroke drills ensures a timely response for stroke patients.

Once the nurse initiates the code stroke and the time restrictions are determined, the patient is seen by an on-call physician, who orders one of the most important tests, a CAT Scan. The goal for completing the CAT scan is within 20 minutes. The goal for the results to be read and back to the emergency room physician or provider

is within 30 minutes. The speed of the response is needed to determine if the patient is a candidate for the clot-busting drug TPA (Alteplase).

**"The nurse protocol helps us measure objectively our performance to meet the stroke benchmarks and goals. Time restrictions are in place to insure the most positive outcome for our Veterans. The Tele-stroke program is basically a nurse driven protocol. The first nurse to evaluate the patient makes the decision to call the Code Stroke. The directive is written in our policy and procedures to energize our teamwork. Concurrently, we bring our doctors on board and ultimately optimize our potential stroke patient's outcome."**

—Rachel Frankelli – RN, Manager WBVA ED

Part of the protocol is to monitor the patient's blood pressure. The stroke patient must have their blood pressure under 185 (the top number). Pressure lowering medication can be used to bring their level under the threshold, since pressures higher than 185, eliminate the ability to administer the TPA medication due to adverse risks to the patient.

New Technology utilized during the Telestroke process helps the caregiver obtain the patient's health history in real time. A recent surgery, head trauma, head bleed, or current use of anti-coagulant is important to know. As is, the recording of a recent stroke and recent administration of the clot busting TPA medication. The presence of these factors would eliminate the re-dosing of TPA.

Stroke readiness is a high priority, and the Wilkes-Barre VA puts great emphasis on meeting our stroke response and treatment goals. Practice makes perfect and taking part in the VA's National Telestroke Program only makes our team better. Veterans can be assured that the Wilkes-Barre VA is at the forefront of stroke identification and care.

## NINE CONVENIENT LOCATIONS TO SERVE YOU

### Wilkes-Barre VA Medical Center

1111 East End Blvd., Wilkes-Barre, PA 18711  
507-824-3521 / 877-928-2621

### Allentown Community Based Outpatient Clinic

3110 Hamilton Blvd., Allentown, PA 18103  
610-599-0127

### Cedar Crest Boulevard VA Clinic

1605 North Cedar Crest Boulevard  
Roma Corporate Center, Suite 410  
Allentown, PA 18104  
610-599-0127

### Columbia County Community Based Outpatient Clinic

226 Columbia Mall Drive, Bloomsburg, PA 17815  
570-316-4116

### Northampton County Community Based Outpatient Clinic

701 Slate Belt Blvd., Bangor, PA 18013-9341  
610-599-0127

### Sayre Community Based Outpatient Clinic

1537 Elmira Street, Sayre, PA 18840  
570-888-6803

### Tobyhanna Community Based Outpatient Clinic

Tobyhanna Army Depot, Bldg. 220  
Tobyhanna, PA 18466  
570-615-8341

### Wayne County Community Based Outpatient Clinic

600 Maple Avenue, Honesdale, PA 18431  
570-251-6543

### Williamsport Community Based Outpatient Clinic

1705 Warren Avenue, 3rd Fl., Ste. 304  
Williamsport, PA 17701  
570-322-4791

Call Center

1-877-928-2621

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