

HOSPITALS & HEALTH CARE

VL 2018

On the next pages you will find our list of Virginia's top health care professionals. *Virginia Living's* editors conducted thorough research on the state's more than 200 hospitals and hospital systems, focusing on patient reviews, national and state rankings, and other factors that contribute to outstanding health care delivery. As a result of our research, we recognize more than 40 hospitals for excellence and innovation in patient care. *By Sandra Shelley Illustrations by Sean McCabe*



CANCER

Inova Schar Cancer Institute
p. 89

CARDIOLOGY

Carilion Clinic Aortic Center
p. 91

UVA p. 93

NEUROLOGY

HCA Johnston-Willis Hospital
p. 95

ORTHOPAEDICS

Bon Secours Mary
Immaculate Hospital p. 97

PREVENTION

Augusta Health p. 99

REHABILITATION

Lake Taylor Transitional
Care Hospital p. 101

SURGERY

Sentara Eastern Virginia
Medical School p. 103

TRANSPLANTATION

VCU Health p. 105

PEDIATRIC MEDICINE

p. 106

TRANSPLANTATION



UVA Medical Center
CHARLOTTESVILLE

Bon Secours St. Mary's
RICHMOND

Sentara Norfolk General
NORFOLK

Henrico Doctors'
RICHMOND

Inova Fairfax
FALLS CHURCH

TRANSPLANTATION NEWS

■ The **Bon Secours Liver Institute of Virginia** and UVA Health will collaboratively care for patients at Bon Secours' facilities in Richmond and Newport News who may need liver transplants at UVA. Under the partnership, care teams from Bon Secours and UVA will co-manage patients at the Bon Secours Liver Institute of Virginia with liver disease—including those with advanced cirrhosis and liver cancer—who will be evaluated for a liver transplant.

■ Doctors at the **University of Virginia Health System** have started testing the drug Regadenoson, typically used to image cardiac patients' hearts, as a way to prevent the rejection of lungs in patients after lung transplants. The rejection, called ischemia reperfusion injury, happens when blood flow is restored to tissue after it has been cut off. The drug will be tested in a phase 1 clinical trial with up to 21 patients.

■ The Smithfield Foundation is giving a \$75,000 challenge grant to the **United Network for Organ Sharing (UNOS)** for the start up of their Timely Donor Referral system pilot. This new technology will update the current manual system hospital staffs use for notifying potential donors, streamlining the process of organ matching and increasing the number of organs available for transplant. Based in Richmond, UNOS serves as the nation's organ transplant system.

after the surgery," he says. He returned to work three weeks post-op, and, within a month, was able to lift more than 10 pounds and resume all of his normal activities—including kayaking, fishing, and hanging out with friends.

"That's the biggest joy I have, that he is able to get back to his life as a 28-year-old," says Brown, who also experienced an easy recovery. "It's just amazing that something simple that I could do changed his life forever." VCUHealth.org

Dr. Chandra Bhati and team at VCU.



Robokid

VCU Health's Dr. Chandra Bhati first on East Coast to use robotic-assisted surgery for kidney transplants.

Stephen Robinson was having migraines and difficulty seeing. He went to the eye doctor. "He said I had a bunch of hemorrhaging behind my eyes, and I should go to the emergency room," recalls Robinson, 28. In the ER, he learned that he was in acute renal failure. More testing showed he suffered from Berger's disease, a rare condition that affects the kidneys' ability to filter waste from blood.

Within six months, the previously healthy young man was in stage 4 of kidney disease. He was on peritoneal dialysis and on the waiting list for a transplant at **VCU Health Hume-Lee Transplant Center**. "Most of the causes leading to kidney transplantation are diabetes and high blood pressure, and that's not common in this age," says Dr. Chandra Bhati, a transplant surgeon with Hume-Lee. "These younger people often have unusual genetic or immunology problems, and those probably cause damage to the kidneys."

Fortunately for Robinson, Terri Brown, an old family friend with matching O+ blood type, offered to donate one of her kidneys. Bhati planned to perform both the kidney removal and implantation with the assistance of da Vinci Surgical Systems. He was the first surgeon on the East Coast to successfully complete a minimally invasive kidney transplantation using the robotic system.

Robotic procedures use a smaller incision that can lead to a much smaller scar than with a tradi-

tional procedure. In addition, "Pain is less, recovery is faster, and the healing process is much quicker" with the da Vinci, says Bhati. "Patients usually go home by day three or four. The donor goes home in two days." With the robot, he is also able to perform transplants on obese individuals, including those for whom traditional surgery was not possible.

Surgeons at VCU, the largest transplant center in Virginia, performed 160 kidney transplants last year; 35 to 40 were kidneys from living donors like Brown, who have been pre-tested and determined to be healthy. Living-donor kidneys are usually implanted within a few hours, compared to a day or more from deceased donors. "Kidneys that have stayed in ice for a long period do worse in comparison to kidneys that are implanted right away," says Bhati, noting that VCU has a 98 percent success rate for living-donor kidney transplantation. The Hume-Lee Center performs many high-risk transplants with excellent patient and graft survival.

With living-donor transplants, "We always start in two rooms at the same time. In one room, we take the kidney out, and in the second room, we put the kidney in," says Bhati. He is grateful to donors like Brown, who bring hope to those on the kidney waiting list—currently 100,000 in the U.S.

Robinson's transplant took place July 23. "It went fine. I really had minimal pain almost a week