

WAYS & MEANS



TECHNOLOGY
TEAMWORK
& TENACITY

METHODIST REHABILITATION CENTER | 2024 EDITION



Now I can... celebrate with my son

As the wedding of her son Stephen fast approached, Bethany Baker of Raymond feared she wouldn't be ready. A stroke and difficulty using her legs had put her in the hospital for 10 days.

"I asked the doctors: Please, get me to the best place I can go to get back on my feet," she said.

They recommended Methodist Rehabilitation Center. And with MRC's help, Baker was able to walk down the aisle with just her son's support and enjoy their mother-son dance.

"With hard work, God's grace and the absolute best therapists, all that was possible," she said.

"This truly will be memories I will cherish! I will forever be grateful to the therapists that worked with me while I was at Methodist Rehab."



NATIONALLY RECOGNIZED FOR EXPERTISE IN REHABILITATION MEDICINE AFTER A STROKE, SPINAL CORD INJURY, BRAIN INJURY OR AMPUTATION.

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FROM THE CEO

When I visit our therapy floors, I often witness the happiness that breakthrough moments can bring.

It's no small thing to take a first step, utter a first word, or reclaim some semblance of independence after an illness or injury has you doubting your future. I enjoy watching patients, family and our staff celebrate such achievements.

Progress, after all, isn't always a given, as I've learned from working at a hospital in the wake of COVID.

As did most in the medical field, Methodist Rehab faced the challenge of staff shortages and inflated expenses in 2022. Like those taking their first tremulous steps between the parallel bars, we had to wonder if we'd fully recover. But, like our courageous patients, we decided to push on to the best of our abilities.

I'm happy to report that our efforts were not only successful, but exceeded our expectations as we've managed a tremendous turnaround. In Fiscal Year 2023, we transitioned to a position of stability, both operationally and financially. This has become the foundation for a new era of growth and expansion for MRC.

In response to a 12.5 percent increase in admissions in Fiscal Year 2023, we reopened our hospital's fourth floor. We also made room in our budget for additional patients to benefit from financial assistance.

More than ever, we want to provide answers to an important question: As servant leaders, how can we best serve our community and our state?

In our role as Mississippi's flagship provider of rehabilitation services, we believe that providing access to our expertise is paramount. Because of this, we've launched an ambitious plan that will allow us to be available in more places.

Methodist Outpatient Therapy recently brought its orthopedic experience to Gluckstadt, opening a clinic at 154 Calhoun Station Parkway, Suites G&H. Plans are under way in Clinton for another outpatient clinic, which will feature orthopedic, neurological and speech therapy. Methodist Orthotics & Prosthetics is adding a ninth outpatient clinic in Tupelo. And our Flowood campus has been enhanced by the full-time services of Dr. Edwin Dodd, an interventional pain management physician who is board certified in both pain management and anesthesiology.

By strengthening our affiliation with the University of Mississippi Medical Center, we will also enhance our mission to restore ability and hope.

At MRC, we are committed to providing health care that addresses the physical, mental and spiritual needs of those we serve. That's one reason we've added a chaplain to our staff. Learn more about Rev. Maxine Bolden on page 7.

This edition of Ways & Means focuses on what's possible when Technology, Teamwork and Tenacity combine to promote outstanding patient recoveries. I hope you'll be inspired by their stories, as I have been by watching them prevail.

I've learned there will always be challenges, but it is within us to rise to the occasion.



A handwritten signature in black ink that reads "David McMillin".

David McMillin
Chief Executive Officer
Methodist Rehabilitation Center

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MISSION STATEMENT

In response to the love of God, Methodist Rehabilitation Center is dedicated to the restoration and enhancement of the lives of those we serve. We are committed to excellence and leadership in the delivery of comprehensive rehabilitation services.



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WAYS & MEANS

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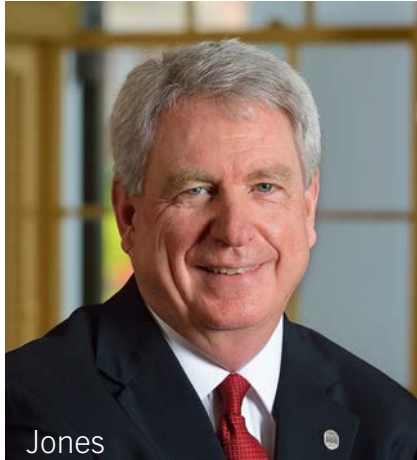
Methodist Rehabilitation Center provides comprehensive medical rehabilitation programs for people with spinal cord and brain injuries, stroke and other neurological and orthopedic disorders. The 124-bed, state-of-the-art hospital in Jackson has twice been designated a Traumatic Brain Injury (TBI) Model System site by the National Institute on Disability and Rehabilitation Research and is also the only hospital in Mississippi twice named one of America's best by U.S. News & World Report.

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NEWS BRIEFS

MRC BOARD WELCOMES NEW MEMBERS



Dan Jones, M.D.

Jones served as the 16th chancellor of the University of Mississippi from 2009-2015. Before serving as chancellor, he served the university as vice chancellor for Health Affairs and dean of the University of Mississippi School of Medicine. He has a long association with the university, first as a medical student beginning in 1971, a resident in internal medicine, then as a School of Medicine faculty member beginning in 1992.

His research activities have focused on prevention of cardiovascular disease and racial and economic disparities in health outcomes. He was the first principle investigator for the landmark Jackson Heart Study, which focused on identifying causes of disparate rates of heart disease in African Americans.

Active in the American Heart Association, Jones was the 2007-2008 national president and for years has served as a national spokesperson on high blood pressure. A master of the American College of Physicians, he is certified by the American Board of Internal Medicine and is designated as a specialist in clinical hypertension by the American Society of Hypertension Specialists. ¶

Marion Wofford, M.D.

Wofford is a retired professor of medicine at the University of Mississippi Medical Center and the daughter of Dr. Jesse Wofford, one of MRC's founders. She has served over 20 years on the board of the Wilson Research Foundation, the fund-raising arm of MRC, and is currently that board's vice chairwoman.

Following her 1978 graduation from Millsaps College, Dr. Wofford spent 10 years teaching Jackson Preparatory high school students and leading them on summer wilderness expeditions.

She then earned her medical degree from UMMC and a master's degree from the Harvard School of Public Health. She joined the UMMC Department of Medicine faculty in 1997.



As a practicing clinician and educator, Dr. Wofford worked with medical students and Internal Medicine residents in the Department of Medicine. Her research interests were the areas of obesity hypertension and lifestyle interventions to improve blood pressure control. Dr. Wofford is a Fellow of the American Heart Association, the American College of Physicians and the American Society of Hypertension. ¶

Ben Walton

Walton is a founder and principal with Solidus Capital Solutions-MS LLC and NT Capital Solutions LLC, both focusing on growth businesses in Mississippi. He was a founding partner and president and CEO of the Mississippi Angel Fund, L.P. The fund invested in a number of Mississippi companies and has extensive experience with the management and growth of private equity, venture capital and real estate investment trusts.

He is a founder of AutoZone Inc. and was an officer of AutoZone and Malone & Hyde Inc. during their successful privatization via a management buyout with KKR & Co. and the later sale of Malone & Hyde to focus on AutoZone's growth.

He then was senior vice president of the Eastover Group of Companies during their restructuring to become EastGroup Properties Inc. and Parkway Properties Inc. Walton later was chief financial officer of a family office with partnerships he co-originated. These included outside investors, with investments in private equity, venture capital and distressed investments in the United States and Europe. Direct investments in the office included the startup of Diversified Trust Company in Memphis. He is an organizer of First Commercial Bank in Jackson and a board member and chairman of the Investment and Finance Committee of the Methodist Foundation of Mississippi.

Walton received a bachelor's degree from Vanderbilt University, summa cum laude, and a master of business administration from Harvard Business School. ¶



REV. MAXINE BOLDEN NAMED METHODIST REHAB CHAPLAIN

Rev. Maxine Bolden has embraced the duties of Methodist Rehabilitation Center's new chaplain, bringing years of experience to the position.

An ordained elder in the United Methodist Church, Rev. Bolden serves as chaplain of Tougaloo College—the first female and only the second alumnus to serve in her alma mater's history. She leads the on-campus United Church of Christ as pastor and is also an adjunct assistant professor of Religion and Philosophy in the college's School of Humanities.

Bolden has a bachelor of arts in English from Tougaloo and a master of divinity in Psychology of Religion and Pastoral Care from Gammon Theological Seminary/ITC in Atlanta. She is currently a doctor of philosophy candidate in Urban Higher Education at Jackson State University.

NEW ADMINISTRATOR TAKES REINS AT MSCC

Registered nurse Christy Byrd is the new administrator at Methodist Specialty Care Center in Flowood.

Since 2018, Byrd has been assistant administrator for the 60-bed care facility, which is the first in Mississippi designed especially for younger, severely disabled residents.

Byrd's degrees include a bachelor of science in biological sciences and a bachelor of science in nursing. Before earning a Nursing Home Administrator's license in 2018, she completed an Administrator in Training Program via the Mississippi State Board of Nursing Home Administrators.

She is also a certified Legal Nurse Consultant and a member of the American and Mississippi Nurses' Associations and the Mississippi Health Care Association. 🌿

THERAPISTS RECEIVE STROKE RECOVERY CERTIFICATION

Congratulations to physical therapist Roseann Crucillo and occupational therapist Anna Leigh Whitney. They've have been accredited as Certified Stroke Recovery Specialists, which further elevates their expertise in treating stroke patients.

The designation is the only stroke certification for physical and occupational therapists and offers the opportunity to acquire in-depth, hands-on training in stroke rehabilitation from an expert team of instructors. 🌿

ARMSTRONG EXPANDS NATIONAL LEADERSHIP ROLE

Gary Armstrong, president and CFO of Methodist Rehabilitation Center, has been elected to the board of directors for the American Medical Rehabilitation Providers Association. AMRPA's mission is to advance the field of medical rehabilitation through advocacy, education and the promotion of access to care.

"I've been attending AMRPA conference for several years," Armstrong said. "It is a great way to communicate with your peers around the country and work together to be an advocate for inpatient rehabilitation."

As an employee of MRC almost 46 years, Armstrong is well acquainted with the issues facing rehab hospitals. For AMRPA, he'll serve on the Data Committee and the Review Choice Committee.

Armstrong also is the president for the FAIR Fund (Fund for Access to Inpatient Rehabilitation). The FAIR Fund's mission is to raise awareness of, and build support for, policies that will preserve and increase access to inpatient hospital rehabilitation. 🌿

MRC MOURNS LOSS OF DR. MONTESI

Dr. Michael Montesi's strength carried him through COVID and cancer, but he did not survive a Sept. 16 car accident. That leaves many mourning the Delta family physician, who treated patients with what one called "a servant's heart."

Dr. Montesi came to MRC in 2020 to recover from a life-threatening case of COVID. He went on to become the physician for MRC's Recovery after COVID Clinic, where he was a fierce advocate for all who suffered the ongoing aftermath of the disease. He took what might have been a devastating turn of events for most doctors and used his experience to understand the predicament of his patients.

He was a source of hope to many who were relieved to see someone who had come through to the other side. "It feels good to contribute," he once said. "I've always wondered why I made it and somebody else didn't. To me, there's a reason God put me here."

Thoughts and prayers go out to his mother, Jean Moore Montesi; his brother, Josh Montesi; his fiancée, Ryan Schiefer, and his daughters Anna Peyton Montesi, Hayden Elizabeth Montesi and Maggie Claire Montesi. 🌿

WHERE ARE THEY NOW?

What MRC alumni have done since they left the therapy gym



Adam Malone visits the William J. Clinton Presidential Library in Little Rock, Ark.

Adam Malone

Growing up with muscular dystrophy, Malone, 22, was all too familiar with the challenges that arise with navigating accessibility for one of his favorite hobbies – travel. With the support of his Methodist Rehabilitation Center therapy team, family, and own determination, he is now proudly helping others go on their own expeditions as a Travel Advisor for Adventures by Jamie, a top-rated, special needs certified travel agency.

"I've always enjoyed traveling throughout my life," Malone said. "It dawned on me that if I do it frequently and love planning, I might as well help others with it."

A regular visitor to MRC since 2014, Malone has benefitted from both the physical therapy program and the Assistive Technology Clinic, MRC's outpatient wing that offers seating and wheeled mobility solutions.

"Oh, it's great," Malone said. "Heather Maloney does an amazing job coordinating all the stuff with wheelchairs. I go occasionally to get adjustments to make me more comfortable in the chair because I'm in it all day. The things they do, like trying different cushions and ordering specialty equipment to add on, have really improved my quality of life."

A core memory in Malone's care journey happened in 2017 when his family lost their home to a fire. The rental house they moved into didn't have an accessible shower, and the MRC team stepped in to coordinate the installation of a new ramp and shower chair.

"One of the physical therapists knew someone who could build a ramp for me," Malone said. "That way, I not only had a chair to sit in, but I could actually get over any bumps and into the shower comfortably."

Malone's empathy and experience have helped him relate to others trying to see a world that's typically not built to accommodate those with accessibility needs.

"Being in a wheelchair, whether it's a power chair or manual, involves a lot of different factors," Malone said. "There can be additional needs such as Hoyer Lifts (patient

lifts) and accessible bathrooms. Also, the ability to transfer oneself, like scooting from a chair to a bed, plays a role. Finding the right hotel rooms with the ability to fit a lift under the bed is important. The challenges to meet vary based on the specific disability. It's good for me to know at the end of the day that I've helped plan a trip for someone that they can enjoy."

His two favorite spots to visit? Disney World and Washington, D.C.

"Disney World is one of my favorite places because it's incredibly accessible, especially for a theme park," Malone said. "You can enjoy many rides in your wheelchair without needing to get out. It's my all-time favorite travel destination, and I love Orlando in general. As a travel agent, planning those trips is a lot of fun. I'm also a huge Disney fan, so it's a special place for me. Another favorite city of mine is Washington D.C. I'm a transit enthusiast, despite the metro system being subpar. The streets are great, and they have wheelchair-accessible Ubers, which I really appreciate. It's accessible in terms of transportation, unlike many other cities."

Kala Harvey

During a recent visit to Methodist Rehabilitation Center, Kala Harvey had plenty of accomplishments to report.

She's begun driving, now lives independently and stays busy doing ACT tutoring for local teens.

It's hardly what Memphis doctors predicted after she was hit by a car while walking near her Sledge home on Nov. 24, 2008.

The impact injured several areas of her brain. So when scans showed little brain activity, her mother, Alma, was told her daughter belonged in a nursing home.

Instead, Alma insisted on a transfer to Methodist Rehabilitation Center's nationally recognized brain injury program. It was the beginning of an unbelievable comeback for the baby of the Harvey family.

During two different recovery stages, Kala underwent inpatient stays at MRC. Then she moved to Methodist



Kala Harvey, left, reunites with Clea Evans, Ph.D., director of MRC's neuropsychology department.



Liver transplant recipient B.J. Raynal, right, now loves fitness pursuits, like doing a 10-K race.

Outpatient Therapy in Flowood, followed by a stint at MRC's Quest program.

Quest helps patients make a successful return to work, school or community life. And by the time Kala graduated from the program in 2012, she'd impressed everyone with her tenacity.

"I've been amazed by her emotional resilience," said Clea Evans, Ph.D., the director of Methodist Rehab's neuropsychology department who has been monitoring Kala's progress for years. "She's an inspiration to survivors of very severe traumatic brain injuries (TBI). Kala can do things at over 10 years out from her injury that she couldn't do at five years post-injury. Her story is a testament to the potential for progress and improvement over very long intervals after TBI."

Kala also continues to see K.K. Ramsey, a nurse practitioner for MRC's hospital-based outpatient clinic and spasticity management program. "She has utilized a lot of our interventions," Ramsey said. "Whenever I would suggest something, her mother would say: 'Whatever it takes.'"

It's Kala's attitude, as well, as she is known for her willingness to be what she jokingly calls "a test dummy." But the truth is, she's come to trust her MRC team.

"I loved my time there," she said. "They made me feel like family. I think it helped me want to be more independent." ❧

B.J. Raynal

Four years after a liver transplant, B.J. Raynal IV of Brookhaven calls himself "a living testament to resilience, an embodiment of the fact that setbacks are not the end, but rather the beginning of a breathtaking journey."

After life-saving surgery at the University of Mississippi Medical Center, Raynal came to Methodist Rehabilitation Center so weak he struggled to stand up or even put his socks on. So he was greeted with great fanfare when he recently visited the therapy gym looking buff enough to lead a boot camp class.

"My physical and occupational therapists, the ones who guided me through those arduous first steps of recovery, were beaming with pride at my progress," he said.

"I found myself immersed in gratitude, reflecting upon the

multitude of hands that worked tirelessly not only to preserve my life but to bestow upon me a chance at life anew. The doctors, the nurses, the unsung heroes behind the scenes — they are the ones who rewrote my story."

Today, Raynal said his life overflows with opportunities he could only dream of before.

"Every day, I meet the dawn with a workout, a testament to the strength I've regained. And yes, I even conquered a 10-kilometer run, every step echoing with the rhythm of triumph," he said.

In a sense, Raynal says every activity is a testament to "the dedicated souls who stitched hope into my healing journey."

"Their unwavering patience, their unyielding belief in my potential — it changed me forever. My story, once shadowed by illness, now shines as a beacon of hope and a celebration of second chances. When I consider the relentless dedication that has shaped these last few years, how could I settle for anything less than making this transformation a permanent fixture of my being?" ❧

Employees of the Year



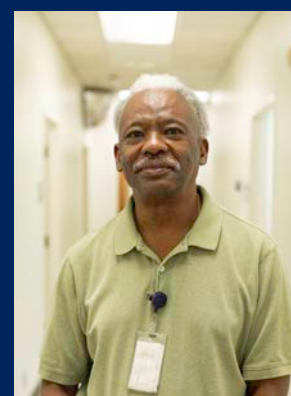
Misty Ferguson
Clinical Services / Inpatient



Bob Clark
Support Services / Inpatient



Virgie Jackson
Support Services / Outpatient Informatics



Willie Spann
Clinical Services / Outpatient

Misty Ferguson

Misty Ferguson has been part of the Methodist Rehabilitation Center team since her husband's job brought them to the Jackson area in September 2010.

"I started as an occupational therapist and was within that program until about three years ago when I was asked to help build our Electronic Health Records System," Ferguson said.

She is now a Prospective Payment System Coordinator, ensuring patient information is logged and accurate. Ferguson also assists with pairing therapists with local and national college students, which keeps her tied to her original roots.

Ferguson's flexibility and her strong work ethic make her a logical choice when MRC needs someone who can assume a new position and get up to speed quickly.

"She has never shied away from taking on a challenge or accepting additional responsibilities," said Arash Sepehri, director of Quality Management & Medical Informatics. "She is willing to put in the extra hours to make sure that her work is not only done, but done to the best of her abilities."

An example of that commitment is her role as a handler for Nauvoo, MRC's facility dog. The black Labrador and Golden Retriever mix has been assisting and inspiring MRC patients since he was trained by Canine Companions, the largest, non-profit provider of service dogs.

Ferguson underwent two weeks of intensive training at its Orlando facility before she began using Nauvoo in therapy sessions. While her new job means she has less time for that role, she works it in whenever she can.

"She is always willing to give patients the pleasure of interacting with Nauvoo, even if that means she has to work late to accomplish her other responsibilities" Sepehri said. "Nauvoo is a beloved member of our team,

and patients, staff and visitors adore the opportunity to interact with him."

"Nauvoo's name is Hebrew for 'a beautiful place,'" Ferguson said. "I usually tell people he's one of the best therapists we have."

As she has acclimated to her current role, Ferguson finds she enjoys the investigative side of ensuring proper documentation on patients. She said she's honored and grateful to receive Employee of the Year recognition and feels it's another stepping stone in the work she still wants to accomplish at MRC.

"I'm so proud of the work that we do to aid in improving people's lives, and everyone I've worked with here is so kind," Misty said. "Everyone genuinely cares about seeing their patients progress, and it's a joy to see them start to thrive again." 🙌

Bob Clark

Originally from Florida, Bob Clark began his career path as a Navy Hull Technician before transitioning into a fabricator in his civilian life.

Around the same time, computer science and programming caught his interest, and he started pursuing it professionally as a full-time college student.

After relocating to Mississippi, he joined MRC as a Network Administrator in 2012. He's been a vital part of the organization ever since.

Clark said he enjoyed welding and building projects in his former occupation and those talents are applicable to his work today. "At MRC, it's rewarding to use some of those same skills to try and make things easier for everyone to get through their day," he said.

Considering the number of computers present in a busy hospital, Clark's position can be demanding. But he enjoys the autonomy and is dedicated to making sure MRC's technology runs smoothly. He knows it's important that staff and patients don't experience delays

related to network problems.

"Bob is loyal and reliable—someone you can count on," Network Engineer Bruce Breithaupt said. "He consistently arrives at work early and is willing to stay late when needed. He always seems eager to help. He's also a well-rounded person—easy to get along with, very personable, and well-liked by all the staff. His availability, hard work, commitment and dedication to doing the best job possible certainly contributed to his nomination.

"I've known Bob to call in on weekends when necessary to assist users and stuff like that. He's even given out his cell phone number to call him if they need something. Being a small IT department, we all pitch in, and Bob has been integral in assisting with and helping our main and satellite offices." 🌿

Virgie Jackson

Virgie Jackson has been an administrative assistant at Methodist Specialty Care Center for 16 years and praises the positive work environment as one of the main reasons she loves her job. "I get to work with some amazing people every day. It feels like a family," she said.

"Virgie's work here is invaluable," said MSCC Administrator Christy Byrd. "As the administrative assistant in the business office, she plays an integral and vital role in the success of that department."

A self-professed people-person, Jackson comes from a large family herself and was the third oldest of nine siblings. Growing up looking after her younger brothers and sisters, and later her parents, instilled a love of helping others reach their full potential.

"When I first came to MRC, I wasn't sure I was strong enough to work here, in seeing what some of our residents had had to go through," she said. "But once I started to get to know them and their story, and got to see the technology and support they have at their fingertips, it floored and inspired me."

"She's always maintained a friendly and professional demeanor in her work," Byrd said. "Without fail, she goes above and beyond every day. If there's a resident in need of assistance in the front lobby, even though it's not her direct responsibility, she consistently puts down her tasks and attends to their needs."

Helping residents and staff figure out their daily administrative needs, as well as providing comfort and conversation to everyone she meets, Jackson said she sees how both short and long-term patients are changed for the better when they leave. It also warms her heart when their family and friends call with their appreciation for the care provided.

"It takes a special type of person to do what our therapy staff does," Jackson said. "I think everybody has a calling. My mom always told me, 'No matter what your calling is in life, be the best you can be.' I'm thankful and blessed to have received this recognition, and I believe everyone here is so deserving to be recognized for the attention they provide to our patients."

"Our purpose here is to enhance the quality of life for every patient in this building, whether it's answering the phones or attending to their personal needs," Byrd said. "In

Virgie's role, she consistently emphasizes this in everything she does for our residents." 🌿

Willie Spann

As a certified orthotist at MRC for over 40 years, Willie Spann provides a wealth of knowledge to his team and patients. "I love what I do because I get to work directly with patients, assess their needs and problem-solve," he said.

Spann was first drawn to the field when a representative at MRC talked to him about orthotics and prosthetics, later hiring him as a tech. From those initial observations to his degree in the field and current hands-on involvement, Spann finds helping patients on their road back to a more normal, independent life an incredibly gratifying part of his job.

"Seeing patients be able to get back into their communities and fitting them with what they need, I love that," Spann said. "Seeing a smile on their faces again after they've been through something life-changing. You don't think things can happen to you, but they can. When you get these people back to doing something they're passionate about, that's really rewarding."

Now director of Methodist Orthotics & Prosthetics and Spann's boss, Chris Wallace remembers when Spann had an early impact on his own career.

"One of his key attributes, to me, is not only his clinical knowledge, but also his willingness to share that knowledge," Wallace said.

"I started at MRC as a technician, and Willie was already here and served as my mentor. He and I have known each other for about 35 years now. Willie has been very influential in ensuring that I could learn, grow and develop a passion for pursuing this profession. I gained a lot of confidence under his mentorship.

"Willie has been a constant presence in our department, a guiding force whom I heavily rely on clinically. I can always count on him for a deep level of knowledge on any subject matter within O&P. I truly respect his talent and skills."

Willie said he's humbled by his Employee of the Year recognition and hopes to use the earnings that come with the honor to take his family on a vacation.

It will be a well-deserved break for a man who Wallace says has hardly missed a day in all the time he's known him. "He's exceptional in his work ethic and in educating upcoming clinical professionals," Wallace said. "He's a true leader." 🌿



Amanda Wells does side lifts under the watchful eye of Methodist Outpatient Therapy physical therapist Amy Burge.

‘ALL THE GEAR HERE BLOWS MY MIND’

Jackson businesswoman benefits from specialized equipment after disabling car crash **by Susan Christensen**

Fourteen years ago, Amanda Dove Wells watched her father-in-law fight back from a near fatal helicopter crash.

Larry Wells broke 12 ribs, his right femur, his sternum, pelvis, tailbone, wrists and upper arms, vertebra in his back and right shoulder blade.

Yet by the time he finished therapy at Methodist Rehabilitation Center in Jackson, he could even climb stairs. “We were talking about putting a ramp on the house, and the need went away,” said his wife, Donna.

Amanda’s father, John Dove, also recovered at MRC after suffering a spinal cord injury in 2014. So when she broke her pelvis and femur in a Dec. 14 car crash, there was no doubt where Amanda would do her therapy.

“I always knew I’d come to Methodist because both had such a great experience,” she said.

Amanda and her husband, Nathan, were heading home to Jackson after a trip to Memphis when their Yukon hydroplaned into a pine tree. Amanda’s right side bore the brunt of the impact, and her lower half was “beaten the hell up,” she said.

Thankfully, we had a lot of people stop,” she said. “One was an off-duty EMT and another was a retired Air Force medic. She got in and stabilized my neck.”

Rescuers worked almost an hour to get her out of the crumpled vehicle using the Jaws of Life. Then, she was taken to Jackson via ambulance because bad weather had grounded helicopter transport.

She and Nathan were both sent to the University of Mississippi Medical Center in Jackson. They were separated in the ER, so Amanda was fearful about facing her treatment alone.

She needn’t have worried. Three of her best friends work at UMMC and were soon taking care of business. Meanwhile, her mother and mother-in-law arrived at her home to be with her three children.

Still, she had to overcome some scary moments on her own. “They had to put my leg in traction, and the surgeon got out what looked like a Home Depot drill and drilled into my knee,” she said. “I knew I could suck it up and get it over with or freak out.”

After surgery to repair her broken bones, Amanda stayed a week at UMMC. She spent another eight weeks letting her pelvis heal before hitting the gym at Methodist Outpatient Therapy in Flowood.

“I came first in a wheelchair, and I was hardly able to stand up,” she said. “I walked 20 feet on a walker, and it took 40 seconds.”

By spring, she could do it in 16 seconds, but not everything healed as quickly as she hoped.

Complicating her recovery was femoral nerve damage that prevented her from activating her right quadriceps muscle. “Telling your body to do something and it doesn’t do it—that’s new,” she said.

Nerve injuries are notoriously slow to recover. “Nerves heal at about a millimeter a day,” said Methodist physical therapist Amy Burge. But Amanda was able to make progress with the aid of electrical stimulation therapy.

An example was the use of a wearable device known as the Bioness L300. Its low level electrical pulses helped activate weakened nerves that control muscles in Amanda’s upper leg.

She used the Bioness while walking on an AlterG Anti-Gravity treadmill, which employs NASA-inspired technology to off-load as much as 80 percent of a user’s body weight.

“All the gear here blows my mind—the Bioness and the AlterG,” Amanda said.

During an AlterG session, Amanda’s lower body was encased in a waist-high plastic chamber filled with load-lifting, pressurized air. Treadmill controls adjust the pressure, creating a low-impact, workout zone where she could walk or run forward, backward or at an incline.

It was a welcome activity for someone as fitness-minded as Amanda. Burge said when she first began doing electrical stimulation on Amanda’s quadriceps, she couldn’t see any contraction. But Amanda was soon able to initiate movement herself.

“I was sitting in church just trying to contract the muscle, and it did kind of jump,” she said.

Until she could bend her knee again, Amanda’s walking ability was enhanced by a brace called the Icarus. Relatively new to the market, it’s 3D-printed and extremely lightweight.

But what truly sets it apart is it provides up to 40 pounds of adjustable knee extension assistance, said Bret Lee, a certified orthotist/prosthetist at Methodist Orthotics & Prosthetics in Flowood who fit Amanda’s brace.

“She fit the profile for exactly what the brace is for,” Lee said. “Since she couldn’t extend her knee, she had nothing to help her get to a standing position.”

The brace also provided support to keep her knee from buckling while she was walking, promoting a more natural gait.

It’s also helped her gain the confidence to embrace yet another challenge—driving again. For that she turned to Lisa Rials, an occupational therapist who is part of Methodist’s Driving Rehabilitation Program.

The program provides an evaluation of cognition, perception and motor response, as well as an in-vehicle assessment in various traffic situations. And Amanda passed the test on April 14.

“It was like getting my driver’s license again at 16. It’s freedom,” she said.

The founder of The Tell Agency, a full service communications firm, Amanda began working from home in January—with a few modifications. “Sitting up all day was still hard on my pelvis,” she said. “By late afternoon, I’d have to lay flat with my laptop on my stomach.”

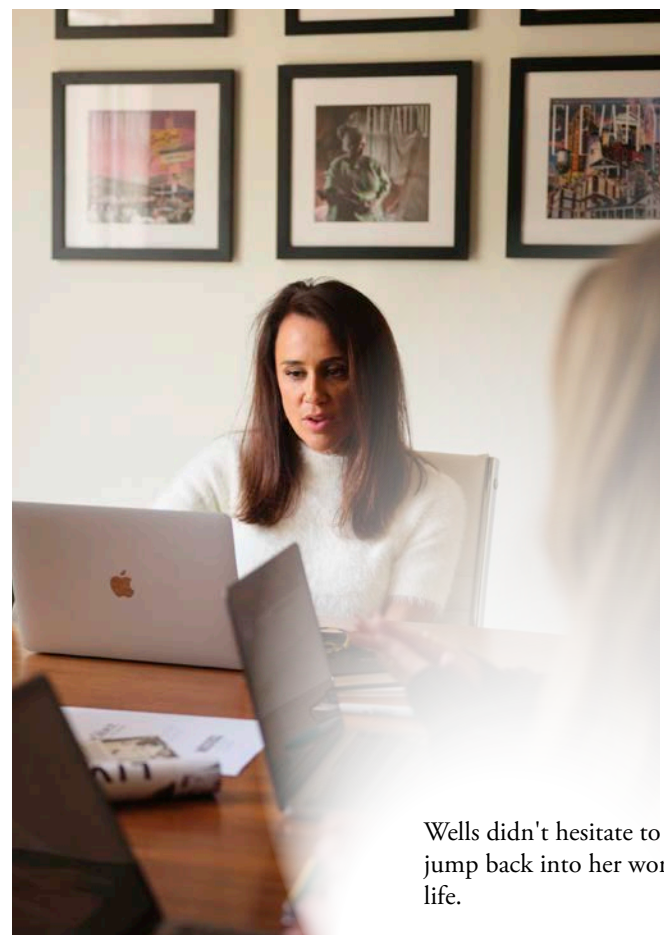
She said she’s fortunate to have a staff of eight who kept things running at the office. And her family and friends have provided support, as well. Her father-in-law, in particular, used his knowledge of rehab to anticipate her needs.

Even before she left the hospital, he had rounded up equipment to ease her transition home.

“He had found all this home health stuff I didn’t even know I needed,” she said. And he’s also been a wise counsel on the topic of pain management and the body’s ability to heal.

“I broke a couple of bones, and he broke most of the bones in his body,” she said. “That’s putting things in perspective for me.”

And lest she get discouraged, she has his outcome to inspire her. Despite the odds, he’s back in the air piloting fixed-wing planes for fun. ✈



Wells didn't hesitate to jump back into her work life.



Eva Jackson enjoys a Methodist Rehabilitation Center yoga class for people with multiple sclerosis.

'I AM IN SUCH A BETTER PLACE, NOW I WANT TO HELP OTHERS'

Patients and health care advocates unite to meet unique challenges of minorities with multiple sclerosis

by Susan Christensen

Before she knew she had multiple sclerosis, Eva Jackson hid her shaky limbs for fear it would compromise her career.

Now, she boldly embraces all things MS, even bedazzling her first cane.

"I am in such a better place, and now I want to help others," said the National MS Society peer support leader in central Mississippi.

Jackson struggled seven long years before being properly diagnosed, likely linked to an outdated notion about who gets MS.

"When I started practicing 30 years ago, MS was typically thought of as a Caucasian woman's disease, usually after childbirth," said Lisa Indest, the neurological therapy manager at Methodist Outpatient Therapy in Flowood and Jackson's physical therapist.

As a result, minorities often face delays in treatment at considerable cost, said Jackson's neurologist Dr. Mary Willis.

"The longer it takes to get a diagnosis, the longer they will live their lives with significant disability," said Willis, an associate professor and chair of neurology at the University of Mississippi Medical Center (UMMC) in Jackson and a physician dedicated to MS care. "We have medicines to delay disability, but not yet any to repair damage."

"We need education for the community, so they recognize they have symptoms. And we need better education for medical providers to recognize symptoms and make referrals."

A 2014 affiliation between UMMC and MRC helped the entities collaborate on projects to help MS patients. Both are Partners in Care, a National MS Society designation that recognizes UMMC's expertise in neurology and MRC's

in rehabilitation. Patients from both entities benefit by receiving streamlined access to the MS Society's programs, services and resources.

Willis said people with MS often experience a multitude of symptoms, which is why they need both a neurologist and rehab team experienced in treating the disease.

For instance, Willis said she can access MRC services to help her patients with therapy for balance and walking, management of spasticity, the need for braces and strategies for energy consumption. And when her patients need wheelchairs, she can access an expert fitting from MRC physical therapist Heather Maloney, a certified Assistive Technology Professional.

Jackson says the dynamic has made a difference in her life. "I am in a different place health-wise because of Methodist Rehab Center and my doctors," said the 49-year-old Jackson resident. "I've told others: 'If you are diagnosed with MS and you're having trouble, go see MRC. They'll help you resolve the issue.'"

"They not only help you physically, but mentally," she added, pointing to a MRC yoga class especially for people with MS. "They put people like us in the same environment so we can help each other."

At MRC, the MS Society recently offered a Black MS Community Program, where Jackson shared her arduous path to a diagnosis.

When her arms started jerking in 2017, Jackson said it wasn't seen as the myoclonic movements that can come with MS. Instead, she said her doctor at the time diagnosed dystonia, a muscle disorder that causes involuntary muscle contractions.

Soon, Jackson was falling because she was unable to lift her feet properly or stay balanced—another MS symptom.

Yet when she reported the problem to a nurse practitioner, she says she was accused of faking it.

“It was put it in my medical records that my walking seemed exaggerated,” Jackson said. “And this is something Black people experience—not being taken seriously when they go in with the same symptoms as others.”

According to the MS Society, research indicates Black people with MS may have more aggressive disease progression and greater disability. This includes more walking, balance and coordination problems, more cognitive and visual symptoms, more frequent relapses with poorer recovery and earlier disability onset. Yet many brush off early symptoms until they are too serious to ignore.

Yolanda Pannell, a part-time administrative assistant at Methodist Rehab, said she kept making excuses for when she’d fall. “I’d think, I must have hit a pebble on the ground,” Pannell said. “Or maybe I shouldn’t have worn those heels. I stopped wearing the heels, but I was still falling.”

She also had vision problems, sleep disturbances, heat sensitivity and something called an MS hug—a feeling of tightness or pressure around the chest or stomach. In her 50s then, Pannell figured maybe menopause was to blame. “Then my doctor said: ‘I think maybe you have MS.’”

A spinal tap confirmed the diagnosis, and Pannell began seeing Jackson neurologist Ruth Fredericks. “She literally saved me,” Pannell said. “I started taking Rebif and that has made a world of difference.”

Compared to many, Pannell was fortunate to find an experienced MS physician in a state with few neurologists and fewer still who want to treat MS patients. “Right now, we have 70 neurologists in a state with a population of 2.9 million,” Willis said. “Many hesitate to see MS patients because of the number of symptoms that need to be managed and the rapid changes in medications and treatment approaches.”

In the early days, MS medications were so scarce, people were put in lotteries to determine who got a dose. Today,

the National MS Society website lists 25 FDA-approved medications that are used to modify the course of the disease, treat relapses and manage symptoms.

Therapeutic resources have also expanded. And as an MS partner, MRC has stayed abreast of the latest innovations.

At Methodist Outpatient Therapy in Flowood, Jackson got to use the clinic’s ZeroG Gait and Balance System as she worked on being able to lift her feet up and step over objects. The ZeroG protects patients from falls via dynamic body-weight support as they practice walking, balance tasks, sit-to-stand maneuvers and even climbing stairs. “I almost fell one time, and it caught me,” Jackson said. And that gave her confidence to keep progressing.

“When I first started, I couldn’t go down a hallway and back without needing a rest,” she said. Next thing she knew, she was walking around the outside of the building and back—albeit at a modified pace and with a cane.

“I knew that was my new narrative, and I’m OK with it,” she said. “My focus now is to help others understand we didn’t do anything to have MS. We did not choose MS, it chose us. And we need to make a way to make things OK for us so we are not depressed, and we can have a good life.”

As someone who has a doctorate of Management-Organizational Development and Change, Jackson is excited to have a project like peer support to manage.

She’s scheduling two meetings a month for the group—one in person and one online. And it’s likely Jackson will lead each meeting with her signature positivity and flair. This is a woman, after all, who decorates her canes to match her outfits.

To learn more about the MS services available at Methodist Outpatient Therapy, call Heather Maloney at 601-936-8889. To learn about upcoming meetings of the Central Mississippi MS Peer Support group, call 601-272-5625 or email cmmsgroup1@gmail.com.



Eva Jackson’s daughter Arie Jackson joined her mom for the Black MS Community Program.



Celebrating Methodist Rehab’s role as a MS Partner in Care are, from left, MRC Director of Outpatient Services Joe Jacobson, physical therapist Heather Maloney, MS Society Manager of Health Care Stakeholder Engagement Jeanna D. Fleming and MRC physical therapists Lisa Indest and Molli Sorrels.

‘When you come here, they get to know you’

Benton farmer overcomes brain bleed with help from Methodist Rehab’s Quest program.

by Lee Catherine Hodges

Amy DeGrado’s Benton farm is home to piglets, dogs, cats, goats, cows, ducks, bees, chickens and rabbits. It’s her happy place, and she enjoys the work it takes to tend to her animals.

“That’s my me time,” DeGrado said.

In January, a milking mishap interrupted her peaceful farm work. DeGrado bent to check a cow’s udder, which accidentally spooked her. A kick to DeGrado’s head caused a massive hemorrhage in her brain.

After a short stint at Methodist Rehabilitation Center, DeGrado made good progress from a medical standpoint. But by her own standards, her physical condition was unbearable because it threatened her independence.

“I couldn’t bear the thought of going 20 or 30 more years like I was,” said DeGrado. “I am not ready for ‘Oh, I need my husband to be able to do that.’”

With goals to return to her farm and handle chores on her own, DeGrado was an ideal candidate for Methodist Outpatient Therapy’s Quest program. Quest is a unique and specialized program designed for patients with specific goals to return to work, school and community life. Known for their creativity and dedication, Methodist’s Quest team developed exercises and activities to challenge DeGrado in therapy.

The neurological damage DeGrado suffered weakened her mouth and face muscles. Speech therapist Cassie Means had her exercise those muscles using several oral motor exercises. DeGrado felt that she made the most progress with a balloon-like device called an IOPI (Iowa Oral Performance Instrument.) The IOPI provides resistance to the tongue, and its bio-feedback component allows therapists to track muscle strength and progress. To practice facial control and strengthening at home, DeGrado followed Means’ advice and enjoyed the occasional Tootsie Pop.

“We always knew she would follow through,” said Means.

When it came to farm chores, physical therapist Luke Kimmel prioritized DeGrado’s balance and endurance at first. Later, he started incorporating more advanced movements like bending, lifting and pitchforking. Kimmel made a makeshift shovel out of a bar with a weight attached so that DeGrado could practice filling a wheelbarrow. Kimmel had her simulate leading a sheep by pulling a heavy box with cords attached.

Amy DeGrado feeding the cow that kicked her.



DeGrado tending to livestock on her farm.

“It was the exact movement,” DeGrado said.

DeGrado appreciated bouncing ideas off of occupational therapist Allison Harris and her student in the University of Mississippi Medical Center’s OT program, Lilly Roberts.

“It’s not really the neurologist who gets you through,” said DeGrado. “You can’t tell him ‘I can’t grip my coffee cup, and I am spilling coffee everywhere,’ but I told Lilly that.”

When they weren’t helping her solve problems and identify strategies, Harris and Roberts created activities to challenge DeGrado’s fine motor skills.

“One day, they had me digging for cones in a planter, and I said, ‘I can’t find them,’” said DeGrado. “Lilly laughed and said, ‘They’re in there.’”

Harris was particularly impressed with DeGrado’s dedication to her home exercise program.

“She was determined to get back to 100 percent,” said Harris.

DeGrado’s team was committed to helping her get there, which meant they’d need an in-depth look at her farm to ensure they’d helped her meet her goals. Kimmel, Roberts and Harris took a trip to the farm to identify specific tasks to practice before DeGrado’s time in Quest ended.

“They made me aware of my body and muscles again,” said DeGrado. “I found a group of people who knew I wanted to get back to normal. They’ve been this route a thousand times. When you come here, they get to know you.”

DeGrado graduated from the Quest program in April, thrilled to be tending to her farm and having met her personal and therapy goals. ♡



DeGrado standing confidently in her barn in Benton, Miss.



Taylor Hankins, a certified prosthetist for Methodist Orthotics and Prosthetics, talks with Chris Williams about the fit and function of his newest limb.

‘Once you get infection in your foot, it goes beserk’

Mississippi's high rate of diabetes makes state a breeding ground for foot and leg amputation

by Susan Christensen

The first time Chris Williams donned a prosthetic leg, “I walked out with it,” he said.

The Byram resident had spent months fighting a diabetes-related foot infection, only to endure the disappointment of a below-the-knee amputation.

So he was more than ready to move on—whatever it took.

“My mentality was I’m going to beat this. I pushed the envelope, and I was back to normal pretty fast,” he said. “A lot of people didn’t know anything was wrong with me.”

But like many people with diabetes, Williams’ foot woes weren’t over. Five years after his first amputation, surgeons took off his right leg at mid-thigh.

Such scenarios are sadly familiar to Chris Wallace, director of Methodist Orthotics & Prosthetics, an eight-clinic division of Methodist Rehabilitation Center in Jackson.

“About 75 percent of the lower limb patients we deal with are the result of diabetes, peripheral vascular disease or other circulation problems,” Wallace said. “Following an initial amputation, the incidence of amputations on the opposite side are about 50 percent within five years.”

It’s no secret why Methodist O&P sees so many diabetes-related amputations. Mississippi is the only U.S. state where every county is in the Centers for Disease Control’s “diabetes

belt.” The term describes areas where at least 11 percent of residents have been diagnosed with diabetes.

The disease often causes nerve damage and poor blood flow to the feet, which raises the risk of foot ulcers and the ability to feel them. Wallace said he had one patient with feet so numb, he walked around never noticing a child’s toy in his shoe.

People of color are particularly vulnerable to diabetes complications. The American Diabetes Association says Black Americans have amputation rates up to four times higher than non-Hispanic white Americans. Hispanic communities are 50 percent more likely, and indigenous communities face a risk two times higher.

Yet a recent survey of people living with diabetes found 65 percent of participants believed they were not at risk for amputation. Just one in four understood the symptoms or conditions that can lead to amputations.

Now 47, Williams admits he was in denial when he was diagnosed with the disease at age 20.

At the time, he’d gone to the ER for back pain. “I thought I’d pulled a muscle,” he said. But after they did blood work, his caregivers came running. “They said: ‘Anyone tell you that you are diabetic? Your blood sugar is 400.’” (A fasting blood sugar level of 99 or lower is considered normal.)

Williams’ foot problems began in 2017, while he was working as an EKG technician at St. Dominic Hospital. The

job required lots of walking, so he first blamed his painful feet on overuse. Turns out he had a pinhole size wound under the skin of his left sole. It caused an infection that led to his initial amputation.

“When I first found out, I was very distraught,” he said. “It’s hard someone telling you that you have to have a body part cut off. But they said once you get that removed, you can live a normal life—which is true.”

Williams said his family and friends rallied to help him. And to make the most of his recovery, he chose to do post-surgery therapy at Methodist Rehab’s Jackson hospital. “Working in the medical field, you always heard it was the best place to go,” he said.

Next, Williams went to Methodist O&P’s Flowood clinic for a prosthesis. Taylor Hankins, a certified prosthetist, built and custom fit the leg, and Williams quickly adapted.

He started working as a home health aide and picked up traveling again. In the summer of 2022, he was in Cabo St. Lucas when another foot infection went from bad to life threatening.

Before the trip, Williams had fallen asleep during a pedicure. He’d only wanted his feet washed, but awoke to the pedicurist scraping his foot with a blade. “She cut me, and I went to the store and got antibiotic cream. I thought it would be healed,” he said. “But it seems like once you get infection in your foot, it goes berserk.”

Even though Williams took antibiotics and used a wound vac while away, he got sicker by the day. “The whole time, I was sleeping and exhausted. I missed out on excursions, and I’d have to make myself eat,” he said. He headed to the ER as soon as he arrived home. Within days, he underwent an above-the-knee amputation, followed by a month in acute care.

After another stint in inpatient therapy at Methodist Rehab, Williams once again turned to Hankins for a new leg. To compensate for Williams’ missing knee, Hankins chose a prosthesis known as a C-Leg. It is equipped with a mini-computer that automatically adjusts the prosthetic knee joint to different terrain.

Still, Williams found it “a mental struggle” to get used to a new type of leg. And it was also a challenge physically. “It takes a lot of energy, strength, balance and endurance to learn how to walk with a prosthetic knee,” Hankins said. “That’s why having physical therapists next door is so great.”

Methodist Outpatient Therapy is across the hall from Methodist O&P. And that’s where Williams began working with physical therapist Karen Klein.

“She knows prosthetics, and that made me want to be with her,” Williams said. “And she has been a go-getter. She will say, ‘Let’s try this’ or ‘Are you ready for this or that?’ She is on 100 all day long.”

Klein’s style is to mix a lot of trial and error with constant reassurance. “I’m a perfectionist, and she keeps me calm when I get frustrated with myself. She is really good at her job,” Williams said.

Klein said people like Williams are easy to treat because they work hard to get better. “But they are also among the hardest patients because you have to be prepared with ideas,”

she said. “They come in and say: ‘What do you have for me today?’”

Methodist Outpatient Therapy embraces new technology. And Williams has made great strides using its ZeroG Gait and Balance System, one of only three such systems in the state.

The equipment features a supportive harness attached to an overhead track system. It allows patients to practice walking, balance tasks, sit-to-stand maneuvers and even stairs without fear of falling. That was important to Williams, as he has the doubly difficult challenge of dealing with both above- and below-the-knee prostheses.

“Chris used it a lot in the beginning because he did not trust the new leg,” Klein said. All the while, she kept watch, looking for areas to address to make his walking as smooth as possible. “The beauty of Chris is he has been a prosthetic user for a long time,” she said. “He’s also detail-oriented. So if something goes wrong, he catches it.”

So far, he’s gone from wheelchair to walker to two crutches to one. He also returned to working, as a receptionist for New Jerusalem Church in Jackson. And he is also back singing with the Mississippi Mass Choir.

“I’m just adjusting to life,” he said. “My goal right now is to get to the point I don’t need anything to walk with. I want to get back to normal life and seeing the world.”



Armed with the controller for Methodist Outpatient Therapy’s ZeroG Gait and Balance System, physical Therapist Karen Klein monitors Chris Williams as he practices walking.

Adrienne Brumfield, an occupational therapist with Methodist Outpatient Therapy in Flowood, helps Kalisa Conley get ready to do hand exercises with a SaeboFlex rehabilitation glove.



Methodist Rehab researchers identify rare genetic disease behind Vicksburg woman's paralysis

by Susan Christensen

After two long years of hospital stays, doctor visits, therapy appointments and soul-crushing setbacks, 36-year-old Kalisa Conley of Vicksburg is on the comeback trail.

She's mostly overcome a mysterious disease that paralyzed and nearly killed her. So she was all smiles as she recently celebrated her graduation from Methodist Rehabilitation Center's outpatient Quest program.

Located in MRC's Ridgeland clinic, Quest helps brain and spinal injury patients successfully return to school, work or community life. And Conley has all three goals in her sights. She wants to study cyber security, get a job in the field and salvage a social life put on hold by years of disabling symptoms.

"She'll be starting school in January, and I'm so proud," said her Quest occupational therapist Kari Richeson. "She showed up, worked hard, followed through and advocated for herself."

Conley had to be proactive in a world where her symptoms were often second-guessed and her illness continually misdiagnosed. Over the course of several years, doctors credited her severe abdominal cramps to pancreatitis. Attributed her altered mental status to psychological problems. And blamed

her oddly colored urine on dehydration.

Noting extreme weakness in all four limbs, doctors thought she might have Guillain-Barre' Syndrome. So Conley was sent to Dr. Art Leis for studies to gauge electrical activity in her muscles and nerves.

"She was so profoundly weak, including shortness of breath, that I expected her to die," said Leis, a neurologist and physician-scientist at MRC.

After determining she didn't have GBS, Leis and certified nerve conduction technologist Dr. Ispan Alvarez Herrera dove deeper into Conley's case. Their detective work changed the direction of her treatment. "What we noticed was a trend of recurrent abdominal pain attributed to pancreatitis and amber or burgundy urines over the years," Leis said. "Credit goes to Ispan who recognized this pattern as possible porphyria."

Porphyria afflicts fewer than 200,000 people in the United States. So it wasn't surprising that Conley and her mom, Konola Conley, had never heard of it. It's hardly top of mind with doctors, either.

"Most everybody misses it, and the patient can die because of interventions of the doctors," Herrera said. That's because

they sometimes prescribe the same medications that porphyria patients are taught to avoid, such as certain pain relievers, antibiotics and seizure medications.

According to the American Porphyria Foundation, the inherited genetic disorder is linked to a malfunction in the body's production of heme. The complex molecule transports oxygen to the body's cells. If any step in the synthesis is blocked, chemicals known as porphyrins accumulate in the cells. This causes a variety of problems. Indeed, porphyria is not one single disease, but a sub-group of eight related conditions that manifest differently.

In Herrera, Conley was fortunate to find someone who had long been fascinated by the rare disease. He first heard of it while in medical school in his native Cuba. Later, he would read a book by Chilean writer Isabel Allende, whose daughter, Paula, died from suspected porphyria.

"Here, you have a lot of serendipity," he said. "I could have spent my whole life without seeing one, and a case came to me."

Herrera not only recognized porphyria symptoms, he also knew an easy means to test the diagnosis. During an attack, a porphyria patient's urine may be red to brown in natural light and pink to reddish purple in fluorescent light. The diagnosis can be confirmed via blood, urine, stool and genetic testing.

Sure enough, Conley tested positive. "I was glad to know what it was because I was scared," she said.

Looking back, Konola suspects her daughter's first symptoms showed up at age 8 or 9 when she'd stumble getting up from her desk. "I had her checked out, but we couldn't figure out what it could have been."

In her late teens, Conley began suffering from stomach pain, vomiting and altered mental status. "But I didn't let it stop me," she said. "You just have to lay down sometime and let it do what it is going to do."

Between attacks, Conley went at life full-tilt. She moved to Texas in 2017, where she worked overtime at her security job, fixed hair on her days off and opened a boutique with a friend. In November of 2021, she had her worst episode ever. "It just put a halt on everything," she said.

"New Year's Eve, I brought her home," said her mom. "She was walking, and by night she couldn't get out of her chair. My

son, Kenneth, is an EMT, and he said, 'We are going to have to take her to the hospital.'" Three months later, Conley rolled out, dependent on a wheelchair.

Once Conley was correctly diagnosed with porphyria, she began treatment at the University of Mississippi Medical Center with the IV drug Hemin. At discharge, she was considered too weak for inpatient rehab. "They said she needed to be a patient in a nursing home, and I said it's not up to you," Konola said. "I took her home in March 2022."

Leis believes it was Konola's strong advocacy early on that kept her daughter from dying. But the mama bear had to stand down a bit once Conley started rehab. "I was that mom that did everything, and the therapists had to move me back," she said. "They said she needs to learn how."

While Conley was eager to reclaim her life, she arrived at Methodist Outpatient Therapy in Flowood with limbs as flaccid as a quadriplegic. "She needed the assistance of two people just to get from her wheelchair to a mat," said physical therapist Cameron Huff. "She was unable to roll over or go from sitting to lying down or vice versa without total assistance."

Because Conley had no strength against gravity, she was fortunate that MRC has two of the three ZeroG Gait and Balance Systems in Mississippi. The device allows therapists to adjust the amount of weight born by patient. So Conley started out carrying just 70 percent of her weight as she paced across the therapy gym, supported by the ZeroG and a platform walker.

Today, she uses no assistive devices other than lower leg braces to bolster her ankles. "I don't think anybody dreamed she'd progress to the point she has now," Huff said. "She was a hard worker. She'll try anything you ask her to do."

During her work with occupational therapist Adrienne Brumfield, Conley wore a futuristic looking Saebotex glove while doing exercises to make her grasp and release more functional. "She could grasp and open her hand, but she couldn't straighten her fingers all the way because the small muscles in her hand were very weak," Brumfield said. "The glove helped her extend her fingers and helped her wrist stay neutral."



From left, Dr. Art Leis and Dr. Isvan Alvarez Herrera were able to identify the mysterious disease that paralyzed Kalisa Conley and threatened her life.

In occupational therapy sessions with Richeson, Conley worked on grip strength and fine motor skills to prepare for school work and driving.

At Quest, physical therapist Luke Kimmel focused on improving her balance and coordination. She did sessions with the Bioness L300, a device that uses low level electrical stimulation to help activate weakened nerves that control muscles in the lower and or upper leg.

Tired of needing her mom to chauffeur her everywhere, Conley dove into driver training with occupational therapist Allison Harrison and was soon behind the wheel again. The accomplishment gave Conley some much-needed autonomy, which was good for mother and daughter. After months of sharing the same bedroom, her mother jokes: “We are about to kill each other now that she has gotten better.”

Konola says she’s proud of her daughter’s resilience. “I never saw her crying, mad or upset,” she said.

The Conleys were bolstered by the support of family, friends and the congregation of New Zion Missionary Baptist Church. “The deacons and preacher would run out of the door to get her in the building,” her mom said. “And my brother Ronald Turner, who just retired, came to stay every day with her in the hospital.”

The Conleys are also grateful for the health care workers who guided Kalisa’s recovery, as well as the diagnostic skills of Leis and Herrera.

Herrera presented a case study about Conley at the annual American Association of Neuromuscular and Electrodiagnostic Medicine meeting in Nashville, where he earned Technologist Best Abstract Award. Titled “A Nerve-Wrecking Journey to Porphyrria,” the abstract makes an important point. Conley could have escaped years of misery if only someone had suspected porphyria and did a simple urine test.

According to recent studies, more than 70 percent of attacks are accompanied by darkening of the urine. Yet diagnoses remain delayed, a mean of 15 years in one study. Herrera’s long-term goal is to promote random urine testing for porphyria in patients admitted with GBS.

Going forward, Conley will have to be careful to avoid porphyria triggers, including drinking alcohol, smoking, taking hormones and going on low-carb diets or fasting. She’ll also need to seek timely treatments when symptoms appear.

It may not be easy, but her plan is to focus on the positives in her life. “I just want to start working again and mingling again,” she said. ♡



Conley of Vicksburg got back on her feet with the help of Methodist Outpatient Therapy’s ZeroG Gait and Balance System.

Now I can...

be a family man

Someday, Peyton James Stevens will likely marvel at all her daddy, Michael, went through to be ready for her birth.

Six months before her due date, Michael had risky brain surgery to repair a mass of abnormal arteries and veins. He'd hoped to avoid a third stroke caused by the vessels bleeding into his skull.

But when nothing went as planned, Michael faced his most critical comeback yet with stubborn resolve. "When you have a baby on the way, you can't afford to sit back and feel sorry for yourself," he said.

For the third time, Michael turned to the staff "that are like family" at Methodist Rehab. He needed help overcoming everything from vision and balance problems to his ability to walk and use his arms. He even worked with the hospital's research scientists to help develop protocols for its robotic rehabilitation equipment.

Peyton arrived on Dec. 21st and eventually went to therapy sessions so Michael could practice compensatory strategies for her care. "I want to take as much stress off my wife, Brooke, as possible, because she really does so much for me," he said. And he says there is a silver lining to his situation. "I've gotten to be home for this part of Peyton's life. And I can see why some people say this is their favorite time. It's been wonderful and crazy."



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'I AM USED TO TOUGH LOVE'

South Alabama athlete beats the odds after spinal cord injury

by Lee Catherine Hodges

Beads of sweat glisten on Marvin “M.J.” Martin’s face. The 19-year-old is no stranger to an intense workout. He’s played football since he was a child, practiced in scorching heat and pushed his body to the limit time after time.

“I love football, and I’ve put a lot of work into it throughout my life,” Martin said.

This workout is a little different. Instead of his coach, Martin is taking orders from a physical therapist at Methodist Rehabilitation Center. She’s urging him, “faster,” and taking every shaky step with him. No pads, just a neck brace. The sixth-floor therapy gym is lined with patients and their therapists. Martin’s struggle is evident, but so is his surprising speed. It’s no stadium, but it will do—athletes attract an audience.

On Oct. 25, Martin suffered a spinal cord injury after a tackle in football practice. At that moment, the University of South Alabama safety said his “body went limp.” Face first on the ground, Martin realized he couldn’t move. His neck injury had damaged his C3 and C4 vertebrae, which can lead to paralysis from the neck down. In the ambulance, a lack of sensation changed to painful burning and tingling in his legs. Martin called his mom, Dorothy, to ask her to pray.

For two weeks in the ICU in Alabama, Martin could not sit up in bed. Hours from his hometown of Vicksburg, he dealt with intense pain and grew increasingly concerned that he couldn’t move his left leg or right arm. When it was time to decide where to recover, Dorothy knew he needed the best choice for spinal cord injury rehab, as close to home as possible.

“I knew that M.J. needed his family to get over this,” she said. “There needed to be somebody there with him all the time.”



M.J. Martin walks on the overhead body weight support treadmill unassisted.

From Day One in the therapy gym, Martin's audience consisted not only of amazed therapists and other patients, but of aunts, uncles, cousins, siblings, his parents and girlfriend. They filled his room on Thanksgiving and celebrated their holiday in the hospital. They coached him alongside physical therapist Lauren Russell, who rallied behind Martin's goal to walk out of Methodist Rehab on his discharge date.

Russell's customized approach to Martin's therapy was familiar to him—tough love. A college athlete herself, Russell didn't coddle. Early in his recovery, she put Martin on a treadmill that uses a harness, pulleys and a pneumatic system to support his weight. This allowed Russell to place each of Martin's steps, while therapy technician Melaina Megues held him in place.

Not many spinal cord injury patients at MRC can tolerate that much exertion that quickly. But Russell felt that because of Martin's age and athleticism, it was best to get him walking as soon as possible.

"There is research to support high-intensity gait training," she said. "I wanted his body to naturally adjust. We walked fast so he didn't have time to pick apart every moment and movement."

With a plan to steady his steps decided, occupational therapists Stephanie Lynchard and Reagan Hall focused on

Martin's upper body. Initially unable to lift his arms or use his hands, Martin could not complete his own self-care.

Martin's occupational therapy team identified which skills he had retained through his injury and which skills he would need help to restore. Lynchard prioritized strengthening and self-care training to ensure Martin could meet the basic needs of feeding himself and getting dressed. As his strength progressed, Lynchard guided Martin through increasingly complex tasks.

"Even with some limitations of his hand function, he was eventually able to complete all of his self-care tasks with very little assistance," said Lynchard.

With the whole hospital as his audience, Martin made unparalleled progress. He arrived with his arms hanging limply at his sides and left MRC able to text. He went from having Russell place his steps on the treadmill to running on it.

It's a noteworthy recovery considering the plight of many others injured playing sports. According to 2021 data from the National Center for Catastrophic Sport Injury Research, 59 percent of the patients injured in football did not recover from their injuries. Of those with a spinal cord injury like Martin's, only two of five recovered.



Martin rang the end-of-treatment bell surrounded by occupational therapists Stephanie Lynchard and Reagan Hall, registered nurse LaCrystal Evans and physical therapist Lauren Russell.



Martin practices walking by making laps around the therapy gym.

Given the location of Martin's injury, the damage could have been life-changing. Losing control of those muscles doesn't just mean limitations on walking and gripping—it usually means being unable to breathe without assistance. With so much on the line, Martin had every reason to lean into fear. Instead, he handled his injury with determination.

Martin was grateful to his therapy team for pushing him through his journey at MRC. He's also thankful for their expertise and for understanding how he performs best.

"I am used to tough love," he said. "I grew up in a home like that—no babying. I grew up tough."

Of course, Martin also thanked his family for the support they've shown him. "They are what got me through this," he said. "They always brought me laughter and joy."

Martin's family is also grateful to their church, Greater Grove Street Missionary Baptist Church and Reverend Dr. Casey Fisher, who Dorothy immediately called to pray after Martin's injury.

Surrounded by new friends and his family, Martin rang the end-of-treatment bell at MRC and walked out its front doors unassisted on his discharge day, reaching his goal and then some. Today, the now 20-year-old is back at college, pursuing his goal to become a coach.

Martin leaves a lasting impact on his audience back at the hospital. With his "never back down" attitude and quick wit, he thrilled his therapists and charmed his whole team.

"The discipline he has as an athlete—it's impressive," said Russell. "But the trust he has had in me through this whole process—man, that is what means the world to me." 🙌

Martin's occupational therapy largely focused on restoring his hands and perfecting his balance. Throwing a football was the perfect task to practice both simultaneously.



STROKE RECOVERY PROGRAM



The ZeroG Gait and Balance System gives Methodist Rehab patients like Darryl Blakely the chance to use technology not available at most rehab centers.

‘HE’S BOUND AND DETERMINED TO GET BACK’

Technology, teamwork and tenacity put Darryl Blakely on the fast track to recovery

by Susan Christensen

No offense, but I don’t want to be here,” says stroke patient Darryl Blakely of Raymond.

He’s in the middle of a strenuous workout session, so Methodist Outpatient Therapy physical therapist Molli Sorrels could take the comment as a complaint.

But she understands the deeper meaning and says: “I don’t want you to be here, either.”

HERE is the middle ground between fighting for your life and reclaiming your lifestyle.

“My lowest point is when I dream at night of all the things I could do, and I get up in the morning and am reminded I have limitations,” Blakely said.

To his credit, 55-year-old Blakely treats those moments as a wake-up call to keep pushing. He’s determined to overcome one-sided paralysis common to stroke survivors. And in Methodist Rehabilitation Center, he believes he’s found the best partner for his rehab journey.

As the state’s premier rehabilitation and research hospital, MRC is a sought-after rehab setting for stroke survivors. Blakely is among 471 stroke patients served in fiscal year 2023.

A major reason is MRC is on the forefront of technology targeted to the needs of patients like Blakely. Its research center has a 4,500 square-foot space filled with more than \$700,000 worth of robotic therapy devices. And MRC is also home to two of the three ZeroG Gait and Balance Systems in the state—one on the hospital’s stroke floor and another in the neuro-centric therapy gym in Flowood.

It’s the latter ZeroG that has Blakely sweating this morning. “I tell them all the time they test my deodorant,” he said.

Strapped into a ZeroG harness that prevents him from falling, Blakely is working hard to improve his balance. As he walks through an obstacle course created by Sorrels, she uses the system’s harness controls to jerk him forward and backward without warning.

“With stroke, you have weakness on one side. And that weakness causes decreased ankle strength and can affect balance,” Sorrels explained. “We’re working on his catching balance ... training in harder ways so in real life he has those skills. A big reason he’s come so far is his dedication and drive to work on things to get better.”

Blakely said it certainly helps that the ZeroG harness won’t let him fall. “It gives me confidence,” he said

It’s a long way from the uncertainty he felt in the days after an April 27 stroke paralyzed his right side. “I learned how you can go from running four miles a day to not being able to take two steps the next day,” he said.

“For weeks, he needed total care,” said his wife, Heidi. “Now, he probably does 95 percent of everything on his own.”

That percentage includes some things she wishes he’d wait for her to do.

“One day he said: ‘I’m tired of this shower chair,’” Heidi remembers. “I went outside and said I’d take care of it later. Then I heard a terrible noise from the bathroom. He’d taken the chair out of the bathroom, and he threw it in the closet.”

Blakely’s stubborn pursuit of independence was evident the moment he began inpatient therapy at MRC.

“One thing about him was he was willing to try anything,” said physical therapist’s assistant Tanya Rogers. “Between his prior strength and motivation, nothing is going to stop him. He’s bound and determined to get back.”

A veteran of 10 half-marathons and a duathlon, Blakely said his current state is humbling. But he’s more apt to count his blessings than to throw a pity party. “I haven’t got upset or mad and haven’t really cried,” he said. “I set my goals high, but I will accept if I don’t meet them.”

Having learned “life can change on you in just a second,” he’s set on embracing the here and now. These days, he’s focused on what’s still ahead in his recovery. “If I could open my hand, I’d feel like I’ve come full circle,” he said.

With that goal in mind, he's turned to another high-tech tool at MRC—the Armeo Spring therapy system.

Located in MRC's Center for Neuroscience and Neurologic Recovery, the robotic exoskeleton aids in restoring movement to the upper arm and shoulder by pairing an assistive movement device with a virtual reality training program.

MRC introduced the innovative system to Mississippi. And after treating some 100 patients with the device, occupational therapist Adrienne Brumfield said: "I've never had a patient say they didn't like it."

Brumfield said patients benefit because the adjustable arm support allows them to do high repetitions and high intensity exercises. The system also comes preloaded with 20 game-like movement exercises, which can be adjusted to address problems related to a patient's range of motion, strength or gross motor coordination. "It keeps them engaged because they are reaching for targets, and they get competitive," she said.

Brumfield said the Armeo is helping Blakely with his biggest issue—the ability to pick his arm up in front of him. "That's common for stroke patients because their arm is heavy. The Armeo takes away gravity resistance and gives you arm support to move more freely. It also helps form muscle memory and endurance."

Another plus is it isolates muscle movement, keeping users from compensating with muscles that haven't been damaged by their stroke. And the advantage for therapists is it provides an objective measure of a patient's progress,

allowing them to grade the treatment so they can be successful.

"Without the Armeo, Darryl would probably be able to reach two times and be tired. With the Armeo, he's able to reach farther up without support and do it for five minutes with way more repetitions," Brumfield said. "He's been very positive throughout the entire process, which is probably why he's come so far."

"I'm a big believer in if you don't go one step past what you think you can do, you don't get stronger," he said. "If you don't try, you don't know if you can do it."

Brumfield and Sorrels hope to take Blakely even farther with the addition of therapy using the Bioness Hand Rehabilitation System and the Bioness L300. Both devices employ low level electrical impulses to activate and retrain muscles and nerves.

The hand system will target his hand and wrist, while versions of the L300 will focus on aiding the lifting of his knee and foot.

Unless he's in therapy, Blakely refuses to use his cane. "I've gone 23 weeks without falling," he said.

Blakely does about 20 hours of work each week as a property manager. He's also proving to be useful on the home front, checking the mail, taking the garbage out, doing dishes and laundry and feeding the dogs.

Throughout her husband's recovery, Heidi has been diligently keeping track of his medical history. And she said his Methodist team was on board from the beginning.



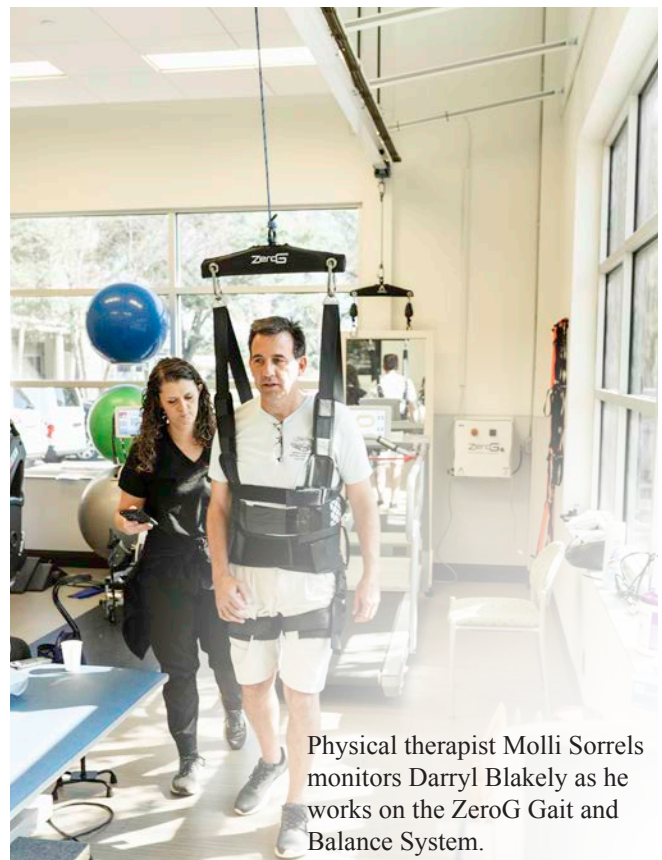
Occupational therapist Adrienne Brumfield focuses Darryl Blakely's therapy on exercises to help restore strength and movement to his weakened right arm while using the Bioness Hand Rehabilitation System.

Darryl Blakely plays games on the Armeo Spring therapy system, a device that pairs an assistive movement device with a virtual training program.



"I kept every vital sign, every medicine and everybody knew and would stop and tell me what was happening so I could write it down. Not once did they act like it was imposition. We've been very, very pleased with our care, with our nurses and all the rehab staff. Everyone is so friendly."

"This place is just great," Blakely added. "They motivate me and let me challenge myself. Everyone truly cares about what they're doing." ♡



Physical therapist Molli Sorrels monitors Darryl Blakely as he works on the ZeroG Gait and Balance System.



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RESEARCH PUBLICATIONS

MRC researchers are denoted in bold type

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Chris Blount
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David Gillison, Jr.
 Given by
 Kitty Kossman
Matt Gray Family
 Given by
 Ann and Henry Holifield
Doug Harkins, M.D.
 Given by
 Lyn and David McMillin

Minor and Bubba Hawkins

Given by
Kitty Kossman
Charlotte Helton
Given by
Kennith Helton
Ann and Henry Holifield
Given by
Katelyn and Lyles
Holifield
Jennifer and Wilson
Holifield
Martha Grace Gray
Photography
Virginia Wilson Mounger
Amy Lyles Wilson

Lyles Holifield Family

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Ann and Henry Holifield
Wilson Holifield Family
Given by
Ann and Henry Holifield
Hank Holman

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Gerry Ann Houston and Abe Malouf

Given by
Linda and Wirt Yerger, III
Bridgett and Thomas Iupe

Given by
Linda and Wirt Yerger, III
Beverly Janoush

Given by
Kitty Kossman
Paul Janoush

Given by
Kitty Kossman
Peggy and Robbin Jeter

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Henry J. Jones

Given by
Jan Jones Shultz
Suzi and Barry Kaplan

Given by
Kitty Kossman
Rita and Bruce Kelly

Given by
Linda and Wirt Yerger, III
Juliet and Jerry Klein

Given by
Kitty Kossman
Jan Klein

Given by
Kitty Kossman
Carol Kossman, M.D.

Given by
Kitty Kossman
Marcia and Chuck Kossman, M.D.

Given by
Kitty Kossman
Sam Lane

Given by
Laura Walters
Cal Wells

Sam Lane II
Given by
Patricia Bush Heslop

Pam and Jon Turner
Becky and John Wooley

Randy Lavender

Given by
Cynthia and Wiley Clark
Cheryl Line

Given by
Kitty Kossman
Kay and Buddy Long

Given by
Kitty Kossman
Jane Lord

Given by
Kitty Kossman
Hayley and John Lundy

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Linda and Wirt Yerger, III
Parker, Halston, and Mary Lyles Holifield

Given by
Lyles and Katelyn Holifield
Janie and Steve Maloney

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Linda and Wirt Yerger, III
Marty and Bill May

Given by
Linda and Wirt Yerger, III
Alice McDaniel

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Linda and Wirt Yerger, III
Katherine and David McRae

Given by
Linda and Wirt Yerger, III
Tracy Millsaps

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Kitty Kossman
Bettye and Ned Mitchell

Given by
Kitty Kossman
Rev. Dr. Julia Moore

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Kitty Kossman
Virginia Wilson Mounger

Given by
Si Bondurant
Ann and Henry Holifield
Cal Wells

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Jane Woosley
Charlotte and Harry Noble

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Tom Papa

Given by
Kathy Eure
Susan and Joel Payne

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Hilda and Kirk Povall

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Marietta and Jeff Pride

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Kitty Kossman
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Linda and Wirt Yerger, III
Sally Rogers

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Kitty Kossman
Nan and Mike Sanders

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Kitty Kossman
Ann Myers Schimmel, M.D.

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Susan Hart
Jane Hildebrand

Elizabeth Lyle
Sally Nash
Barbara Plunkett
Karen Redhead

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Shug and Doe Signa
Given by
Kitty Kossman

Karen Skeen
Given by
Terry Thomas

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Kitty Kossman

Joyce and Homer Sledge, Jr.
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Pearman Smith
Given by
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Roger Smith
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Wootton

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Given by
Sherryl Wilburn
Webb Thompson

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Paul Watson

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Kitty Kossman
Ethel and Ricky Wayne

Given by
Kitty Kossman
Cheryl and Cal Wells

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Linda and Wirt Yerger, III
Wilma Wilbanks

Given by
Kitty Kossman
Amy Lyles Wilson

Given by
Karen Fortress
Nancy Fruetel
Ellen Gabardi
Tina and Curtis Goode, Jr.
Karen Grant

Ann and Henry Holifield
Morgan Lee
Melora Love

Judith Malman
Kimberly Matthews
Lee Ann Mayo

John and Melissa
McEachin
Nancy Rodgers

Carrie Stallings
Thomas Tomkins
Terry Warren

Stacy and Kevin Wolff
Given by
Kitty Kossman

Janice and Kent Wyatt
Given by
Kitty Kossman

Iris and Marvin Wynne
Given by
Kitty Kossman

MEMORIALS**Kay Abney**

Given by
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Cora Akers and John W. Hardesty

Given by
Michael John Boyd
Peggy and Clyde Ballard

Given by
Sylvia and Sonny Steel

Kathleen “Katy” Blake

Given by
Amanda Campbell
Janie and Joel Ferrer
Jenny and James
Heidelberg
Brenda and Rus Malcolm
Solberger & Smith
Martha and Richard
Watjus
Sarah Wood

**Marilyn and Rev. Dr.
Henry Blount**

Given by
Lori and Chris Blount

Melissa Bondurant

Given by
Si M. Bondurant

Steve Brown

Given by
Ann and Scott Catington

**Frederick “Butch”
Chamberlain**

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Nancy and Donald Krecker
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Johnny Chappell

Given by
Terri Meadows

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Lindsay
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M.D.

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Sharon and Leslie
Southwick

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Winniford

Penny Danforth

Given by
TempStaff

Judy Claire Leech Dobbs

Given by
Lyn and David McMillin

Dean Gerber

Given by
Carrie and Philip Blount
M.D.

Jacob Anthony Greer

Given by
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Marie Wilson Heard

Given by
Lyn and David McMillin

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Given by
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Given by
Sylvia and Sonny Steel

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Given by
Kitty Kossman

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Given by
Lori and Chris Blount
Crisler and Doug Boone
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Tish and Haden Hughes
Paula and Randy James
Jim Merritt
Kelly and Frank Riley
Melanie and Brian Sartain
Dee and Lee White

Elsie Wootton

Given by
Amanda and Mark Wootton

Jack Winover

Given by
Kay and Ken Clark

Bennie Lyles, Jr.

Given by
Arretta Lyles

Shellye Stanley McCarty

Given by
H.F. McCarty, Jr. Family
Foundation

Dean Miller

Given by
Jeff Miller
Peggy Prenshaw
Cal Wells

Harbour Mounger

Given by
Virginia Wilson Mounger
John Neill, M.D.

Michael W. Montesi, M.D.

Given by
Aldersgate Class, First
Methodist Indianola
Angela and Wade Dowell
Louise and Tom Gresham

Deven and Mitchell Hill
Joy Class, First Baptist
Winona

Rhonda Meadows

Josephine Mutzi

Planters Bank

Faye and Linzie Vance

Camelia Noblin

Given by
Sylvia and Sonny Steel

Spencer O’Brien

Given by
Open Doors Class, Christ
UMC

W.L. Phillips, Jr.

Given by
MelvinJean Phillips

Joe Sarkin

Given by
Mr. and Mrs. Frank
Montgomery

Flo and Howard Stover

Given by
Barbara and Bob England

John Wesley and Mary**Frances Thompson**

Given by
The Thompson Charitable
Endowment Fund

Johnnie and Marvin**Thompson**

Given by
The Thompson Charitable
Endowment Fund

Frederick Allen Waits

Given by
The Frederick Allen Waits
Endowment

Marsha McCarty Wells

Given by
Terry Wells

**Earl R. and Martha Lyles
Wilson**

Given by
Maralyn B. Bullion
John Lange
Ralph Owens
Sara and Bill Ray
Cal Wells

***Honorary Gifts to the
Walk & Roll Teams*****HeaRts and Soles Team
(Karen Reeves, Captain)**

Given By
Ascensus (Newport)
Ballew Wealth
Management
Marshall Esler
First Stop Health
Guardian Life
LaborChex

Live Oaks Country Club
Danny Luckett
Helen and Red Moffat
Staffers

TempStaff

Tammy Voynik

Wise Carter Child &
Caraway

Wound Management
Specialists

Ross & Yerger

**Team Kappa Sigma (Trent
Burns, Captain)**

Given by
Trent Burns
Patrick Davis
Tish and Haden Hughes
Sandy Isbell
Mike Turello
John Zupko

**Team Karen, honoring
Karen Skeen (Keith
Ferguson, Captain)**

Given by
Brenda Ferguson
LogoStore USA
Karen Skeen
Skeen Plumbing
Elton Wright

**Team McClaskey, honoring
Wyatt McClaskey**

Given by
Angie Brinkley
Kaylee Brinkley

**Team McMillin (David
McMillin, Captain)**

Given by
Carr, Riggs & Ingram
Gerber Taylor
Great Scott
Harper, Rains & Knight
McMains Family
Harry McMillin
Lyn and David McMillin
Harry McMillin
Virginia Wilson Mounger
NewSouth Neurospine
(NS2)

Amy and Jim Streetman
Suzan and Tommy
Thames
Torrico & Garden Wealth
Management

**Outpatient Olympians
(Adrienne Brumfield,
Captain)**

Given by
Heather and Charles
Bailey
Biggs, Pettis, Ingram &
Solop
Brian Chambers
J's Mobility Unlimited
Krilakis Restaurant
Kristos Amerigreek
Legacy Vans
Janna and Randy
McIntosh
Ottobock HealthCare
Southern Bancorp

**Rally for Research
(Bonnie Perry, Captain)**

Given by
Bev and Chuck Dunn
Boba Stokic
Steven Szabo

**Record Team (Mary
Collins, Captain)**

Given by
Business
Communications Inc
(BCI)
Ciox Health
Craft Croswell
Custom Medical
Solutions
Finesse Filing Systems
Hollister Continence Care
Dianne Lovelady
National Seating &
Mobility
Robert Wood
Finesse Filing Systems

**Rehab Rockstars (Valerie
Massey, Captain)**

Given by
Amneal Pharmaceuticals
Dulaney Dental
Marshall Esler
ZA Construction

**Rowdy Rehabbers
(Kaitlin Snyder, Captain)**

Given by
A & A Home Health
CUPS - an espresso café
Fleet Feet

Hometown Medical
Ki Mobility
Permobil Foundation
Sunrise Medical
**Specialty Care Rockin'
Rollers (Courtney Jones,
Captain)**
Given by
Accessibility Services
Gina and Mark Adams
Christian Barnes
Heath Baumhor
Gib Bowden
Paul Bowden
Baxter Cannada
Haley and Harry Goldman
Bo Graham
Merrin Graham Fairly
Deborah and Kyle
Hairston
Keith Kinkade
Krilakis
Angie Osburn
Henry Paris
Lee Paris
Dorothy Stevens
Michael Stevens
Pat and Mike Stevens
John Wofford, M.D.
Eli Zimmerman

**Team Sam, honoring
Sam Lane, II (Katy
Houston and Kelley
Walton Fenelon,
Captains)**

Given by
Ben Allen
Ruth and Lewis Bell
Jane and Tony Brannan,
M.D.
Holly and Brooks
Buchanan
Joy and Don Cannada
Century Club Charities
Bess and Steve Corbitt
Meredith and Jimmy
Creekmore
Allen Cunningham
Judy Douglass
Tammy Dyess
Mona and John Evans
Kelley Walton Fenelon

Lanelle and Murray
Fincher
First Commercial Bank
Tina Fortenberry
Darlene and Jay Gore
Larry Houchins, Jr.
Katy and Jamie Houston
Paula and Randy James
Jane and Ken Jones
Renee and Jimmy Jones
Walton and Ben Lane
Leila and Sam Lane
Joe Lutz
Lelia and Michael
Manning
Patsy and David Marsh
Cathy and George May,
Jr.
Ann and Woodie
McDuffie
Mac McGehee
Nora Frances and
Vaughan McRae
Ashley and Hu Meena
Jeff Miller
Kay and Charles Mortimer
Virginia Wilson Mounger
Robert Murphree
The Northside Sun
Virginia O'Connell
Lee Paris
Don Parsons
Mae and George Patton,
M.D.
Paul Moak Subaru
Primos Cafe
Marie and Jeff Rickels
Judy and Cy Rosenblatt
Cathey and David Russell
Debbie and Mark Saxon
Norwood Smith
Pat and Mike Stevens
Jan and Mike Sturdivant,
III
Laura and Sam Taylor
Pam and Jon Turner
Rose Marie Walden
Tricia and Alan Walters
Susan and Walter Weems
Wendy's Flowood
Becky and John Wooley,
M.D.
Linda and Wirt Yerger, III

Ann and Jimmy Young
**Team Wilson (Virginia
Wilson Mounger,
Captain)**
Given by
Steven Ball
Homer Best
Benefits Administration
Services
Lori and Chris Blount
Si Bondurant
Scott Catington
Ebony Cornelius (Noir
Network)
Scott M. Crawford
Karen Fentress
Tina Fortenberry
Nancy Fruetel
Ellen Gabardi
Tina and Curtis Goode, Jr.
Karen Grant
Martha Grace and Matt
Gray
Charlotte Henley
Ann and Henry Holifield
Jennifer and Wilson
Holifield
Katelyn and Lyles
Holifield
Tish and Haden Hughes
Eve Hutcherson
Morgan Lee
Melora Love
Sheri Malman
Judith Malman
Kimberly Matthews
Lee Ann Mayo
Harry McCall
Melissa and John
McEachin
Don A. Mitchell
Virginia Wilson Mounger
Roben & Dalton Mounger
Lydia Quarles
Nancy Rodgers
Martha J. Rogers
Carrie Ann Stallings
Huiming Sun
Kathryn Tompkins
Terry Warren
Amy Lyles Wilson
Marion Wofford, M.D.



WALK & ROLL

The May 20, 2023 Walk & Roll raised over \$135,000 thanks to our 54 sponsors, teams, musicians, volunteers and donors.

Top overall team: Team Sam \$22,525.

Top employee team: **HeaRts & Soles** \$12,225.

Visit wilsonfoundation.org to view our sponsors and all the team results.

Join us on May 4, 2024 for our next event!



Earl R. Wilson, Founding Chairman

METHODIST
REHABILITATION CENTER

MRC OUTCOME MEASURES FISCAL

Average Age: 61.7

Average Self-Care Change: 9.53

Average Mobility Change: 12.42

Average Therapy Hours Per Day: 3.16

Total Number of Patients Served: 1643

STROKE

471 patients | 28.67%

ORTHOPEDICS

358 patients | 21.79%

GENERAL

240 patients | 14.61%

BRAIN INJURY

259 patients | 15.76%

SPINAL CORD INJURY

202 patients | 12.29%

NEUROLOGICAL

113 patients | 6.88%



Male: 909 - 55.33%

Female: 734 - 44.67%

Age Range: 14-102

Destination After Discharge

HOME | 44.40%

HOME + HOME HEALTH | 31.71%

SNF | 13.45%

ACUTE | 8.03%

Overall Satisfaction

EXCELLENT | 78.20%

VERY GOOD | 13.90%

GOOD | 7.00%

FAIR | 0.70%

POOR | 0.20%

Adolescents Only

BRAIN INJURY | 50%

SCI | 31.82%

ORTHO | 18.18%

Age Range: 14-17 | Total Served: 22

Male: 10 | Female: 5



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