Medicare and You
A Fond Farewell To Dr. Marcus
Kiss Those Varicose Veins Goodbye
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Dear Friends & Neighbors:

On page 18, we highlight the contributions of Dr. Elliot Marcus, local recently retired physician and backbone of the Huntsville medical community for four decades. I have had the pleasure of knowing Dr. Marcus during much of this time, and in a healthcare environment that is constantly evolving, Dr. Marcus has remained motivated by his responsibility to serve his patients. “Serve” is the important word here. Legislation may change, technology may change, and public expectations of health care may change, but the ideal so important to Dr. Marcus and to Crestwood is what we in the medical community are here to do - serve our patients.

Crestwood – Madison is now open. We have always seen a need for Madison to have healthcare services available closer to home, and we have opened our Madison facility because we realize that having a choice in convenient and quality healthcare is important to the residents of western Madison County. The new facility at 20 Hughes Road offers imaging services, digital mammography, laboratory services, and an adult and pediatric sleep disorder clinic. If you live or work in the Madison area, I encourage you to ask your physician to send you to Crestwood – Madison for your imaging and diagnostic services.

We are also continuing to grow at our main Huntsville facility. We have just completed the final stage of a surgery expansion plan designed to improve our efficiency and patient flow and to equip our surgical team with leading edge technology. We have added 3 new operating rooms, 10 pre-op rooms, and a newly constructed Pain Management area.

Our robotic surgery program continues to grow as well. Crestwood’s da Vinci Si is being used to perform gynecological, prostate, gallbladder, kidney and some ear/nose/throat procedures. Just this past month, Dr. Dennis Fernandez, general surgeon, has made history by being the first surgeon in Alabama to perform 100 robotic gallbladder surgeries – right here at Crestwood! You can read more on page 14 about how our entire robotics team has put Huntsville, Alabama “on the map” for advanced robotic surgery in Alabama.

Enjoy the beautiful Tennessee Valley spring weather, and remember to stay safe outdoors as the temperatures begin to rise!

Pam Hudson, CEO

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Advertising rates are available upon request. Contact Lori Light, Crestwood Director of Marketing.

For additional copies, call 256-429-4561.

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ON THE COVER: Crestwood Senior Circle members (Jamie Jones and her mother Margie Slayton) enjoy a recent spring day shopping and lunch at The Scene Restaurant and Lounge at Bridgestreet Towne Center. For more information about Senior Circle, see page 17.
Get the Most Out of Your Medicare Coverage

Medicare Wellness Visits

Have you taken advantage of the Medicare wellness benefit? Over the last couple of years, there have been changes to Medicare policy that have expanded coverage for preventive health care services including the addition of an annual wellness visit.

As a Medicare beneficiary, you are eligible for wellness visits that are intended to help you and your health care provider develop (or update) a personalized plan to prevent disease, improve your health, and help you stay well. Three specific wellness visits are offered at no cost to you (no copayment/coinsurance/or deductible).

Welcome to Medicare Visit

This one-time visit is available only within the first 12 months of eligibility for Medicare Part B coverage. It includes:

- Review of your medical/surgical/family history, medications, diet, and physical activities
- Review of your risk factors for depression and other mood disorders
- Review of your functional ability and level of safety (hearing, fall risk, activities of daily living, home safety)
- Measurement of height, weight, blood pressure, visual acuity, body mass index and other factors appropriate to your medical history
- Discussion of advance directives (upon your consent)
- Education, counseling, and referral based on the results of the visit

Initial Annual Wellness Visit

This one-time visit is available for those who have been eligible for Medicare Part B coverage for longer than 12 months. It includes:

- Self-reported Health Risk Assessment including activities of daily living
- Review of your medical/surgical/family history and medications
- Review of your risk factors for depression and other mood disorders
- Review of your functional ability and level of safety (hearing, fall risk, activities of daily living, home safety)
- Measurement of height, weight, blood pressure, body mass index and other factors appropriate to your medical history
- Establishment of a list of current providers and suppliers
- Detection of cognitive impairment
- Establishment of a written screenings schedule
- Listing of risk factors and conditions for which interventions are recommended or under way
- Personalized health advice and referral, as appropriate, based on the results of the visit

Subsequent Annual Wellness Visit

This visit is available once every 12 months, after the Initial Annual Wellness Visit. It includes updating the information you provided in the Initial Annual Wellness Visit, and providing health advice and referrals accordingly.
When scheduling a wellness visit, you will be asked to bring specific information with you to the visit. Please be sure to prepare for your visit by gathering all requested information and completing all pre-visit documents.

Depending on the results of your wellness visit, additional health services may be recommended for you. For example, a person at risk for diabetes may be referred for diabetes screening. Copayment, coinsurance and/or deductible may or may not apply to additional services.

### Other Medicare Preventive Services

In addition to the wellness visits, Medicare covers a variety of preventive screening services. Depending on the result of your wellness visit, referrals to specialty physicians may be indicated for these additional services.

- Abdominal Aortic Aneurysm Ultrasound Screening
- Alcohol Misuse Screening and Reduction Counseling
- Bone Mass Measurements (osteoporosis screening)
- Cardiovascular Disease Screening
- Colorectal Cancer Screening
- Depression Screening
- Diabetes Screening
- Diabetes Self-Management Training
- Glaucoma Screening
- Hepatitis B Vaccine
- HIV Screening
- Intensive Behavioral Therapy for Cardiovascular Disease
- Intensive Behavioral Therapy for Obesity
- Mammography Screening
- Medical Nutrition Therapy
- Pap Test Screening
- Pelvic Exam Screening
- Pneumococcal Vaccine
- Prostate Cancer Screening
- Seasonal Influenza Vaccine
- Sexually Transmitted Diseases Screening
- Preventive High Intensity Behavioral Counseling
- Smoking and Tobacco-Use Cessation Counseling

For more information, visit [www.medicare.gov](http://www.medicare.gov) or talk with your primary care physician.

To schedule your exam, contact your primary care physician. If you do not have a primary care physician and would like to develop a relationship with a Crestwood affiliated physician, please call 256-429-5000 or go to [www.CrestwoodMedCenter.com](http://www.CrestwoodMedCenter.com).
If you’ve been in the hospital recently, you probably noticed that the medical team who provided your care included many specialists other than your personal physician. At Crestwood Medical Center, in addition to the doctors, nurses, case managers, diagnosticians and other specialists, your regular physician may partner with a special type of physician known as a hospitalist.

A hospitalist – a physician who practices exclusively in the hospital setting – serves as your personal physician’s right hand and orchestrates your care while you are in the hospital. Hospitalists have been a part of the medical field for many years, and are one of the fastest-growing specialties because of their important role in coordinating care and providing continuity for patients during their hospital stay.

Like a primary care doctor, hospitalists are trained in general internal medicine, family practice, pediatrics, and other specialties. Some specialize in critical care medicine, cardiology, or other subspecialties.

Hospitalists are valuable liaisons for both patients and their physicians. The average primary care physician spends only 12 percent of his or her time seeing patients in the hospital, according to

Crestwood Hospitalist Team: Adeel Bodla, MD; Christina Voelkel, MD; Akram Haggag, MD; and Philip Akinsoto, MD. Not pictured: Tracy Pulliam, MD; and Sharon Mbuko, MD. (Independent members of the medical staff at Crestwood Medical Center).
A study by The Advisory Board Company, a Washington, D.C.-based health care consulting organization, hospitalists, on the other hand, are onsite 24 hours a day, seven days a week. They are available to see patients more frequently — sometimes more than once a day — to monitor patients’ progress, answer questions, and oversee the efforts of other health care professionals involved in patients’ care. Because hospitalists typically do not maintain medical practices outside the hospital, they can focus their attention exclusively on patients’ medical care while they are inside the hospital.

If you are admitted to the hospital for surgery, a hospitalist may coordinate your inpatient care after your procedure. During this time, the hospitalist, surgeon and your primary care physician are in continual communication.

Your physician will consult with the hospitalist to provide background information on your health history and diagnosis. The hospitalist then carries out the plan of care set up by your physician, coordinates your daily care with other members of the medical team, and communicates any changes in your condition to your physician. At discharge home, the hospitalist will communicate with your physician about further treatment needed, help arrange follow-up care or medications needed, and send your hospital records back to your primary care provider.

Hospitalists have a thorough understanding of inpatient medical care and are uniquely qualified to recognize and diagnose medical disorders, anticipate potential problems and rapidly respond to any sudden change in the patient’s condition.

Patients under the care of a medical team led by a hospitalist often have shorter hospital stays and quicker recoveries. A study at the University of California, San Francisco and Tufts University found that patients under hospitalists’ care had a 12 percent shorter length of stay in the hospital — nearly half a day — as well as better surgical outcomes and fewer return trips to the hospital.

Crestwood Medical Center has had a hospitalist program since 2008 and has six hospitalists. During 2012, these physicians provided care for more than 2,440 patients. “Having hospitalists on staff allows our patients to have more personalized attention while in the hospital,” says Mark Hagood, M.D., Chief of Medical Staff.

To learn more, visit www.CrestwoodMedCenter.com, click on the “Services” link and choose “Hospitalist.”

Sources: The Society of Hospital Medicine www.hospitalmedicine.org, Medical News Today www.medicalnewstoday.com

Medical Director of the Crestwood Hospitalist Team, Dr. Akram Haggag, evaluates a patient at Crestwood. During a patient's stay at the hospital, the hospitalist physician works with the patient's primary care physician to coordinate care.

---

Your health needs are as unique as you are, so why settle for one size fits all with your prescriptions?

Whatever you may experience, from hot flashes or difficulty losing weight to rectal pain or fungal nails, when you work together with your physician and our pharmacist you’ll find a solution right for you. We’re in Providence now, but we’ve been around 28 years so you know we’ll be here when you need us. Remember, we make medicines just for you. That’s what we do.

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By Amy Guckeen Tolson

Suffer in silence no more. This summer, ditch the unsightly veins and their painful side effects and don your bathing suit and shorts with pride.

Individuals dealing with the painful and at times unattractive symptoms of venous disease, including varicose veins, can find respite at the Crestwood Vein Center, where minimally invasive procedures are available to get patients back on their feet and doing the things they love in a matter of days.

“There are a lot of people who have undiagnosed venous disease and are suffering from symptoms that may be easily treated with minimally invasive techniques,” said Duane Randleman, MD, one of the physicians at Crestwood Vein Center. “We have an easy way to evaluate and treat them in a noninvasive manner.”

Just in time for shorts and bathing suit weather, free vein screenings are available at the Crestwood Vein Center. Patients that take advantage of the easy evaluation will fill out a questionnaire about the symptoms they are experiencing and discuss their concerns with a doctor.

“Patients come to these screenings and indicate they have chronic leg pain, swelling, aching and fatigue that is usually worse with prolonged standing or physical activity,” said Randleman. “Cramping or ‘restless legs’ may also be a common complaint. When examined by one of our physicians in the Vein Center, visible varicose veins and spider veins are present along with swelling of the affected leg(s). In more advanced cases, there can be discoloration of the skin typically starting around the ankles which can spread up the calf over time.”

If the situation warrants, a simple ultrasound is scheduled that takes only five to ten minutes to diagnose any significant venous disease. From there, an appropriate plan of treatment will be made, whether it’s wearing compression stockings, hitting the gym, or undergoing radiofrequency ablation.

*Individual results may vary.

Pre-treatment

3 months post-treatment*

*Photo courtesy of Vein Institute of the North Shore, Beverly, MA

CRESTWOOD MEDICAL CENTER

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at the Vein Center. Radiofrequency ablation (RFA) is a minimally invasive procedure that for many patients has replaced the process of vein stripping, a significant operation that requires general anesthesia and several incisions to remove the varicose veins.

Radiofrequency ablation allows the Vein Center team to accomplish similar outcomes as vein stripping previously did through just a single puncture and a procedure that usually takes no more than 15-20 minutes.

Radiofrequency ablation (RFA), an outpatient procedure performed with a topical anesthetic, allows patients to return to their normal activities in just a few days and helps to alleviate the aching, burning, heaviness, itching, swelling, numbness and visibility that frequently accompany varicose veins. While some people may view their varicose veins as something to be self-conscious about, often it’s more than just the unsightly appearance of the veins.

“A lot of people think of venous disease as simply a cosmetic problem,” Randleman said. “But a lot of times people are suffering with real symptoms that are preventing them from getting out and being able to enjoy normal, daily activities. They can be treated and get back to things they’ve been wanting to do, but just haven’t been able to.”

The first step to putting venous disease in the past is seeking help, and the physicians at the Crestwood Vein Center are ready to help patients move on with their lives, without the pain and suffering that accompanies venous disease.

(Dr. Randleman is an independent member of the medical staff at Crestwood Vein Center.)
Core Measures For Quality Care

Crestwood Medical Center is committed to continued process improvement to provide quality care and service excellence for our community. We strive for excellence in these areas by using proven therapies to treat our patients including those developed by The Joint Commission called Core Measures.

Core Measures are a set of care processes defined as being evidence-based for certain diseases or surgical procedures. When followed, research shows that patients have fewer complications (such as blood clots or infections) and are more likely to recover more quickly.

Crestwood Medical Center participates in four Core Measure categories: Acute Myocardial Infarction, Surgical Improvement Plan, Pneumonia, and Congestive Heart Failure. (More info on Core Measures can be found on the Hospital Compare website at www.hospitalcompare.hhs.gov)

Each patient’s individual care is guided by the attending physician. The core process described here is a guide only and may not be appropriate for every patient.

Acute Myocardial Infarction (Heart Attack)

When one of the heart’s arteries becomes blocked preventing or slowing the supply of blood and oxygen to part of the heart muscle, an acute myocardial infarction (AMI), better known as a heart attack, occurs.

When heart muscles do not get the oxygen and blood (nutrients) they need, the affected heart tissue will die.

All hospitals strive for 100% compliance of AMI core measures, including the following:

- Patients given aspirin upon arrival
- Patients receive percutaneous coronary interventions (PCI) within 90 minutes of arrival
- Patients given ace inhibitor or angiotensin II receptor blockers (ARBs) for left ventricular systolic dysfunction (LVSD)
- Patients given aspirin and beta blocker at discharge
- Patients given a prescription for a statin at discharge

Crestwood’s Acute Myocardial Infarction Composite Score

(Higher number is better)
Surgical Care Improvement Plan

Hospitals strive for 100% compliance with evidence-based treatments for surgical patients; this compliance increases healing and prevents infection and other serious complications. Core measures include the following:

- Making sure that certain prescription drugs are continued before, during, and after surgery
- Preventing blood clots by giving appropriate drugs or through other methods such as special stockings that increase the circulation of blood in the legs.

Infections after surgery can be reduced if hospitals adhere to the following measures:

- Give the recommended antibiotics at the right time before surgery
- Stop antibiotics at the right time after surgery
- Maintain normal levels of patient temperature
- Remove catheters that are used to drain the bladder in a timely manner
**Pneumonia**

Pneumonia is an inflammatory condition of the lung usually caused by infection with viruses or bacteria or more uncommonly by other microorganisms, certain drugs, and autoimmune diseases. Pneumonia causes cough, chest pain, difficulty breathing, fever, and fatigue.

When pneumonia patients receive the appropriate antibiotics at the right time after being admitted to the hospital, it increases the chance of a faster recovery and decreases the risk of death.

**Heart Failure**

Heart failure occurs when the heart is unable to provide sufficient pump action to distribute blood flow to meet the needs of the body. Without sufficient blood flow, the body does not get enough oxygen and nutrients. Heart failure can cause a number of symptoms including shortness of breath, leg swelling, and exercise intolerance.

When heart failure patients receive the appropriate core measure care, they have less severe symptoms, better quality of life, and fewer readmissions to the hospital.

Hospitals strive for 100% compliance of heart failure core measures including the following:

- Heart failure patients given an evaluation of left ventricular systolic (LVS) function
- Heart failure patients given ace inhibitor or angiotensin II receptor blockers (ARBs) for left ventricular systolic dysfunction (LVSD)
- Heart failure patients given smoking cessation counseling
- Heart failure patients given detailed discharge instructions

**Crestwood’s Pneumonia Composite Score**  
(Higher number is better)

**Crestwood’s Heart Failure Composite Score**  
(Higher number is better)
Are you or a loved one looking for a primary care physician?

New Members of the Crestwood Medical Staff
Accepting New Patients, Including New Medicare Patients

To view a complete list of our Medical Staff, please visit CrestwoodMedCenter.com

Russell D. Cole, M.D.
Bailey Cove Family Practice
10300 Bailey Cove Road; Suite 13
Huntsville, AL 35803
256.880.6138

Tiffany Hendricks, M.D.
Madison Blvd. Family Practice
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Madison, AL 35758
256.325.6499

Erik Henninger, D.O.
Tender Care Pediatrics
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Huntsville, AL 35801
256.429.4500

Shivani Malhotra, M.D.
County Line Family Practice
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Madison, Alabama 35756
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Michael Bosserman, M.D.
Meridianville Family Practice
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Meridianville, Alabama 35759
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Andrea B. Reynolds, M.D., Ph.D.
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Bhavna Sharma, M.D.
Madison Family Health Center
102 Essex Court; Suite C
Madison, AL 35758
256.325.8457

Carol Watts, M.D.
Whitesport Family Practice
333 Whitesport Circle; Suite 200
Huntsville, AL 35801
256.880.0450

* Please contact physician’s office for a complete list of accepted insurance plans. *Crestwood Medical Center is directly or indirectly owned by a partnership that proudly includes physician owners, including certain members of the hospital’s medical staff.
On April 8, 2013, Dr. Dennis Fernandez, General Surgeon, performed his 100th robotic cholecystectomy using Crestwood Medical Center’s da Vinci® Si™ robot. Dr. Fernandez is the first surgeon in Alabama to reach this milestone.

Gallbladder surgery is one of the most frequently required operations among patients in the U.S. Dr. Fernandez performs perhaps the most precise single-incision gallbladder surgery available today by doing minimally invasive cholecystectomies through a single small incision instead of multiple incisions as is done with the more traditional laparoscopic cholecystectomy. Crestwood was the first to have this surgical system in North Alabama, and the only system in Huntsville with the “single-site” technology that enables this leading edge gallbladder procedure to be performed.

“When I remove a gallbladder using the robot, I only need to make one incision, but I am able to visualize and manipulate tissue as if it were an open operation,” says Dr. Fernandez. “In over 15 years of removing gallbladders laparoscopically, I never had a patient ask me the day after surgery if he could go running. A few months ago, a patient I operated on using the robot asked me exactly that. Robotic surgery is certainly the wave of the future and it is a privilege to be on the forefront of offering this technology to Northern Alabama.” Pam Hudson, CEO of Crestwood, said, “We congratulate Dr. Fernandez and the entire surgical team for reaching this milestone.” Dr. Michael Conrad, Medical Director of Crestwood Robotic Services, added, “The surgeons involved in this program are proud of this accomplishment and we look forward to the continued advances of this technology that benefit patients who are often seeing less complications and shorter recovery times after robotic assisted surgery.”

Physicians from across the state have come to Crestwood to observe Dr. Fernandez’s procedures, and Dr. Fernandez is proctoring other Alabama surgeons to foster their development so they can begin offering robotic cholecystectomy at their hospitals. In doing so, the entire robotics team has put Huntsville, Alabama “on the map” for robotic surgery. Congratulations, Dr. Fernandez, on reaching your 100th Robotic Cholecystectomy case!

For more information about robotic surgery at Crestwood, call Susan Bryce, ACNO & Director of Surgical Services, at 256.429.5067.

Typical results depend on many factors. Consult your physician about the benefits and risks of robotic assisted surgery for your condition.
Colorectal cancer is the third most common cancer and the second leading cause of cancer deaths in men and women in the United States.

Colorectal cancer screening saves lives. If everyone who is 50 years old or older were screened regularly, as many as 60% of deaths from this cancer could be avoided.

FACT: When colon cancer is found early, there is a 90% chance for a cure.*

Schedule your screening at Crestwood by calling 256-429-4986.

Crestwood's Endoscopy Center is the only unit in North Alabama, and one of only two in the state to be recognized by The American Society of Gastrointestinal Endoscopy for its dedication to quality patient care.

Prevention is key. Colorectal cancer screening can find precancerous polyps so they can be removed before they turn into cancer. Screening can find colorectal cancer early, when there is a greater chance that treatment will be most effective and lead to a cure.

Risk factors include inflammatory bowel disease, a family history of colorectal cancer or colorectal polyps, some genetic syndromes, and lifestyle factors.

You should begin screening for colorectal cancer soon after turning 50, then continue getting screened at regular intervals.

However, you may need to be tested earlier than 50 or more often than other people if you have any of the risk factors listed above.

Consult with your physician about when you should begin screening and how often you should be tested.

*Information available at Centers for Disease Control - http://www.cdc.gov. • The American Cancer Society recommends both men and women at average risk of colorectal cancer should begin receiving a colonoscopy every 10 years at age 50. But you should talk with your doctor about your own health and your family history so that you can choose the best screening plan for you.

Crestwood Medical Center is directly or indirectly owned by a partnership that proudly includes physician owners, including certain members of the hospital’s medical staff.
The GMVFD receives a much needed donation

Representatives of the Green Mountain Volunteer Fire Department and Green Mountain Civic Association accept a donation from Crestwood Medical Center to purchase a defibrillator and needed medical equipment. The GMVFD is the only volunteer station within the city limits and this new equipment will be critical in supporting the emergency needs of the remote neighborhoods in south Huntsville and Madison County.

Pictured Above:
Dr. John Wisda (Crestwood ER Physician),
Russell Rawson (Chief, GMVFD),
Pam Hudson (CEO of Crestwood);
Vint Atchley (EMT, GMVFD),
Dr. Wes Bowman (Crestwood ER Physician),
Marcia Obermann (GMVFD Civic Association),
& Dr. Russ Simpson (Crestwood ER Physician).

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Hail and farewell for Dr. Marcus
Backbone of Huntsville medical community retires

By Amy Guckeen Tolson

Medicine will always be a part of Dr. Elliot Marcus’s life, but as of October 31, 2012, it doesn’t have to be his entire life.

“We never escape medicine,” Marcus said. “It’s a part of me.”

Marcus, an internist for more than forty years, retired from his practice on October 31, saying farewell to a career that spanned more than four decades in the Huntsville community, during which he witnessed many changes throughout the field of medicine, as well as the city of Huntsville itself, and touched countless patients’ lives.

“I don’t know how many lives I’ve taken care of, influenced or been a part of,” Marcus said. “It’s hard to put a number on it.”

Growing up in Tampa, Florida, Marcus always knew he would follow in his father’s footsteps and become a doctor. He graduated from Duke University in 1963 and completed his internship, residency and fellowship at the University of Alabama at Birmingham, the University of Virginia and University of Florida, taking two years off to serve in the Navy during the Vietnam era. Upon his completion of medical residency, he planned to relocate to Birmingham, but took the advice of a friend and drove up to Huntsville, just to see what it was all about. He never left.

When he arrived in Huntsville in 1969, “it was a very exciting time,” Marcus said. “Its rapid growth was really just beginning. President Kennedy had challenged NASA in 1963 to send men to the moon and return them safely before the end of the decade. Huntsville was then a small cotton farming town with a missile command military base that was being transformed by NASA to where it is today. Crestwood was simply a ‘revamped nursing home.’ No hospital in the community had ICU’s or CCU’s. Although there was only one emergency room in town, there were no ER doctors. There were virtually no medical specialists; only eleven internists including myself. In addition to seven general surgeons, there were three orthopedists, three urologists, and five radiologists – to name a few.”

At the same time Dr. Marcus came to the community, there was an influx of young, bright, energetic doctors who opened the door to a new period in medicine for the up and coming Rocket City. “It was a busy time,” Marcus said, “with not a moment to spare from the time I opened the door each morning to the time we locked up at night. It was exciting to see all the specialists coming to Huntsville. It meant we did not have to send patients to Birmingham or elsewhere to get care that was not available here.”

One thing that never changed, however, was Marcus’s dedication to his patients. Dr. Marcus practiced medicine with a focus on coordination of care for each individual patient. Ironically, his management of patient care is the same concept that is being considered as best practice now with the medical home model of the Affordable Health Care Act. Over the years, he’s watched young men and women grow into husbands and wives, parents and then grandparents, making them an extension of his own family in a way. Each year his wife makes Amish
friendship bread which they personally deliver to a handful of his older patients, bringing new meaning to the term “house call.”

“You’ve been through their ups, their downs, their teenage years to getting married, having children, and beginning to age,” Marcus said. “I tell them, ‘this is life; that’s what life is.’ My job is to help you get from this point in life here, to this point there. All along the way, life is uncertain, unpredictable, with no guarantees whatsoever. My role and my job are to act as your guide and tell you, ‘Here’s what you need to be doing here, here’s what we need to think about here, and here’s what we need to think about there.’ But there are no guarantees in life. If I’ve done my job right, you live a long life and you never have to see the cardiac surgeon or have any major events happen to you. It’s not a very sexy thing, but I’m all for that.”

He himself has seen ups and downs, as a survivor of the 1989 Airport Road tornado, in which he lost his left hand. Marcus was leaving the hospital that day when he made the fateful decision to make the drive home, despite the ominous weather. While sitting at the corner of Airport and Whitesburg, he turned to see a big, wide black curtain, which he realized a moment too late was a tornado.

“I looked to see, ‘where do you go’ and there was nothing. Nowhere to go,” Marcus said. “So I stopped and put my head down. I didn’t know what was going to happen. I thought I’d be killed.”

While there’s no way of knowing for sure, Marcus is almost certain his car was lifted up and thrown against a pole before it came crashing back down to the ground. When he realized he had survived, but with his left forearm broken and mangled, he scooted out of the car and hitched a ride to the hospital. More than 20 years after he lost his left forearm, he barely notices it’s no longer there. Rather, now that he is settling into retirement, it is the patients he is missing.

“If you’ve been in practice as long as this, your patients begin to become like extended family,” Marcus said. “You see your patients, very often, more than you see your own relatives. You see people three to four times a year and you know all about them. It’s a very, very satisfying feeling to know that you’ve been given the responsibility of helping them in their day to day life. That’s the rewards of medicine. It’s not the money. The real reward is having that closeness and being a part of that person’s life for many, many years.”

What retirement holds for him, he does not yet know. He still wakes up every morning at the same time, but now has nowhere he needs to be, except for his daily swimming date with his buddies at the natatorium, where he swims about a mile every day. Now Dr. Carol Watts, who has taken over his practice and patient load, takes care of the men and women he served dutifully for more than four decades.

“My time is right,” Marcus said. “You have to know when.”

---

Carol Watts, MD, has taken over the care of Dr. Marcus’s former patients. Dr. Watts is a member of the medical staff at Crestwood Medical Center.

Carol Watts, MD
333 Whitesport Drive, Suite 200
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