WAKE RADIOLOGY DIAGNOSTIC IMAGING WEB SITE

<www.wakeradiology.com>

MEDIA CONTACT

For assistance in arranging interviews with physicians, please contact Kim Parker at 919-303-4458 or email: kpparker@wakeradiology.com.

Note: High-resolution photography of each office interior/exterior is available as well as for each physician. Contact Alan Scott at 919-788-7896 or email: ascott@wakeradiology.com/ for all graphic materials.

OVERVIEW

Wake Radiology is the largest radiology group in the Triangle, with 57 radiologists performing more than 650,000 procedures each year at 15 free-standing outpatient imaging centers and area hospitals in four counties – Wake, Orange, Johnston and Vance counties. The practice provides a comprehensive approach to care that includes the most advanced technology administered by highly trained technologists. Radiologists, who interpret tests and treat patients, are certified by the American Board of Radiology. Their range of expertise encompasses eleven sub-specialties, offering patients and referring physicians the best in diagnostic and therapeutic radiology. The goal of the practice is to provide the highest quality service to all patients in the community.

Comprehensive Radiology Services, including:

- Digital mammography and women's imaging
- Advanced MRI
- Laser treatment for varicose and spider veins
- Cancer consultation and radiation treatment
- Bone densitometry
- Pediatric imaging
- Ultrasound
- Coronary calcium scoring and heart CT
- Orthopedic and sports imaging
- Brain and spinal cord imaging
- CT scan

WAKE RADIOLOGY LOCATIONS

North Hills
3821 Merton Drive
Raleigh, NC 27609

Cary Diagnostic Imaging
300 Ashville Avenue
Cary, NC 27518

West Raleigh Imaging
4301 Lake Boone Trail
Suite 103
Raleigh, NC 27607

West Raleigh Mammography
4301 Lake Boone Trail
Suite 100
Raleigh, NC 27607

Garner
300 Health Park Drive
Suite 100
Garner, NC 27529

Chapel Hill
110 S. Estes Drive
Chapel Hill, NC 27514

Northwest Raleigh
American Institute of Healthcare & Fitness
8300 Health Park
Suite 221
Raleigh, NC 27615

Apex
1031 W. Williams Street
Suite 102
Apex, NC 27502

MRI FACILITIES

Raleigh MRI
3811 Merton Drive
Raleigh, NC 27609

West Raleigh MRI
4301 Lake Boone Trail
Suite 104
Raleigh, NC 27607

Chapel Hill MRI
110 S. Estes Drive
Chapel Hill, NC 27514

Garner MRI
300 Health Park Drive
Suite 100
Garner, NC 27529

Northwest Raleigh MRI
8300 Health Park
Suite 221
Raleigh, NC 27615

INTERVENTIONAL SERVICES

300 Ashville Avenue
Cary, NC 27518

BREAST IMAGING SERVICES

300 Ashville Avenue
Cary, NC 27518

WAKE RADIOLOGY ONCOLOGY SERVICES

300 Ashville Avenue
Suite 110
Cary, NC 27518

HOSPITAL AFFILIATIONS

WakeMed – Raleigh Campus
WakeMed – Cary Hospital
WakeMed – North Healthplex
Maria Parham Medical Center – Henderson
Johnston Memorial Hospital – Smithfield
Dorothea Dix Hospital – Raleigh

HISTORY

1953	Albert Jenkins, MD established a private radiology practice in Raleigh's Cameron Village, where he provided x-rays, fluoroscopy and radiation therapy.
1961	Wake County Memorial Hospital (now WakeMed) opened and William Sprunt, III, MD joined Dr. Jenkins in practice. They served as consulting radiologists to the new hospital.
1961–1971	Over the decade, four radiologists joined the practice, broadening their expertise and capabilities.
1971	Wake Radiology Consultants, PA was formed and moved their office to North Hills in 1972.
1979	Cary office was established.
1988	First MRI opened at Raleigh office.
1990	West Raleigh office opened.
1993	Garner office opened.
1995	Chapel Hill office opened.
1998	Northwest Raleigh and Wake Radiology Oncology Services opened in Cary.
2001	Raleigh MRI expanded, adding a second magnet
2003	Apex office opened.
2006	Breast Imaging Services office opens in Cary. Interventional Radiology Office opens in Cary. Northwest Raleigh office relocates to American Institute of Healthcare & Fitness.
2007	Free-standing data center opens in early 2007.
2008	PET·CT through joint venture with WakeMed to open in Cary.

SERVICE/TECHNOLOGY HIGHLIGHTS

Bone Densitometry

Osteoporosis is a chronic condition that occurs when there is a depletion of bone calcium and protein. The results are loss of bone mass, increased bone fragility and increased risk of fracture. More than 25 million people in the United States have osteoporosis.

Detection is simple through the use of a DEXA – dual energy x-ray absorptiometry – scan. This 15- to 30-minute, painless scan is offered at five Wake Radiology locations and the West Raleigh Office's Musculoskeletal Center of Excellence. Exams are performed by the region's only dually certified ARRT (American Registry of Radiologic Technologists) and International Society of Clinical Densitometry (ISCD) radiologic technologists. Joseph Melamed, MD, a fellowship-trained musculoskeletal radiologist, who is also a certified clinical densitometrist, heads the program. He is joined by two musculoskeletal radiologists who interpret every DEXA exam.

This level of expertise, combining DEXA technologists and sub-specialty musculoskeletal radiologists, is not offered anywhere else in the North Carolina. The Musculoskeletal Center of Excellence is also home to the Triangle's first specialized iDEXA machines, the latest in DEXA technology that produces high-resolution images of all skeletal sites. This equipment reveals detail never seen before in the bones.

Wake Radiology Breast Imaging Services

Located in Cary, this service combines specially trained technologists and radiologists who have a special interest and expertise in mammography, ultrasound and interventional breast diagnostic procedures, and are certified by the American College of Radiology.

Exams include digital mammography with computer-aided detection, high-resolution ultrasound – used for further evaluation of a palpable or mammographic abnormality – and fine-needle biopsies to remove fluid from a cyst. Following mammography or ultrasound, women see a radiologist to review their exam results.

The program also offers the area's only Breast Specific Gamma Imaging (BSGI) program. This nuclear medicine study shows malignant cells very clearly. The procedure is performed by injecting a small amount of radioisotope tracer into the breast. This isotope tracer reacts positively with cancer cells, identifying the tumor and allowing them to be seen by the small gamma cameras designed for the breast.

Radiologists also perform ultrasound-guided core needle biopsy, which removes a small amount of tissue from a breast lesion, and galactography, which can detect defects within a single duct within the breast.

Note: All Wake Radiology offices offer digital mammography, which provides clearer, highly detailed images of the breast and is faster and is considered more comfortable for women.

Breast MRI

Available at the North Hills Office, breast MRI is a highly specialized study of the breast when an abnormality is detected during a mammogram. Using MRI technology, state-of-the-art three-dimensional imaging, along with computer-aided detection (CAD) looks deep into the breast to uncover abnormalities. It is useful in examining women with dense breast, determining the extent of a known cancer, differentiating between surgical scarring and recurrent cancer, identifying cancer in high-risk patients and evaluating response to cancer treatment.

SERVICE/TECHNOLOGY HIGHLIGHTS (Con'd)

CT Coronary Artery Calcium Scoring

Recognized as the single best predictor of heart disease by the American Heart Association, a cardiac CT scan is a non-invasive exam that shows the location and amount of calcified plaque in the coronary arteries. This build-up that is comprised of fat, calcium and other substances can eventually result in the narrowing or closing of the arteries.

Since calcium is a strong indicator of coronary artery disease, the amount of calcium seen in a CT scan can help physicians determine if a patient needs a medical, surgical or lifestyle intervention. The test is recommended by the American Heart Association for men older than age 45 and women older than 55 who are at intermediate risk for heart attack, meaning that they have one or more major risk factor for coronary heart disease: high blood pressure, high LDL (bad) cholesterol, low HDL (good) cholesterol, strong family history of heart attack, smokers and ex-smokers and diabetics.

Wake Radiology offers this examination at five locations in the Triangle: North Hills in Raleigh, North Raleigh, Cary, Garner and Chapel Hill.

CT Scan

X-ray, computed tomography (CT) produces images of the body in cross-sectional views. A computer helps process the information and provides clear images that are stored for viewing and interpretation by radiologists. Exams include head, neck, chest, abdomen and pelvis that are performed with or without intravenous contrast solutions. Spinal and extremity scans do not require IV contrast; however, CT angiography requires injection of a contrast agent.

CT Angiography (CTA)

This exam uses the most advanced CT scanners to produce images of the coronary arteries, which are similar to those produced by a traditional heart catheterization. CTA is very accurate in excluding coronary artery disease, is non-invasive and more cost effective than a heart catheterization. It is also considered the best test to evaluate for anomalous coronary artery, often associated with myocardial infarction and sudden death. A contrast agent, along with a medicine to slow the heart rate, is given prior to the procedure.

WAKE RADIOLOGY INTERVENTIONAL SERVICES

Wake Radiology Interventional Services is headquartered in Cary and is adjacent to Wake Radiology Oncology Services, Breast Imaging Services and the general medical imaging office. The outpatient location for interventional services offers:

Minimally invasive cancer therapies – *consultations for management of liver tumors, bone lesions, and biopsies, along with placement of catheters for chemotherapy delivery, fluoroscopic and ultrasound-guided biopsies and pleural effusion and ascites drainage.*

Dialysis access management – *placement and removal of dialysis access catheters and hemo dialysis access, angiography and angioplasty procedures.*

Vein ablation – *a minimally invasive procedure using imaging guidance and laser technology, provides relief from varicose vein discomfort by closing off the great saphenous vein in the thigh, which helps shrink the varicosed branch veins and allow healthier veins to take over to carry blood flow.*

Sclerotherapy – *used to treat smaller surface veins, this therapy injects saline into a vein causing it to close up, allowing other veins then take over its work.*

Ambulatory phlebectomy – *recommended for medium and large varicose veins, this treatment removes them through tiny, puncture holes in the skin. The vein is hooked through the small opening and pulled out of the leg one section at a time.*

Cosmetic laser technology – *is used to improve the appearance of spider veins and broken capillaries by infusing energy to the veins from the laser and then collapsing the vein, producing immediate results.*

More advanced interventional procedures are performed at WakeMed Raleigh Campus and include:

Uterine artery embolization – *a minimally invasive, non-surgical treatment for uterine fibroids, benign growths in the uterus. The interventional radiologist makes a small incision in the patient's groin and inserts a catheter into an artery that winds its way to the uterus, which is tracked using fluoroscopy. Tiny plastic particles are injected into the artery that supplies blood to the fibroid tumor, cutting off the blood flow and shrinking the fibroid.*

Kyphoplasty – *a technique that allows for the restoration of vertebral height. Using fluoroscopy guidance, a balloon is inserted into the affected vertebral site and is inflated to the height of the fractured bone. The balloon is removed and replaced with bone cement, which in injected into the site. This procedure stabilizes the vertebrae and usually brings immediately pain relief to the patient.*

Vertebroplasty – *a similar procedure to kyphoplasty as cement is injected directly into the vertebral space, but does not use a balloon to restore the height of the bone.*

MRI

Magnetic Resonance Imaging (MRI) creates images from the water in a patient's body. Giant magnets allow the body to receive radio waves and send images back to a computer. MRI is used to scan the brain and spine, bones and joints, chest, abdomen and pelvis, and blood vessels. MRI has the ability to image in any plane or orientation, so it is helpful in uncovering small tumors, those with complex anatomy and malignancies. It is also the best method for depicting the joints as it can clearly show ligaments, tendons and cartilage. Newer advances allow for detection of heart disease as MRI can show a beating heart and determine if a patient needs bypass surgery. MR Angiography (MRA) is newer technology that can show the major arteries and blood vessels throughout the body. The latest in MRI technology helps patients avoid more invasive conventional angiography.

NUCLEAR MEDICINE

Using radioisotope tracer induced into the body either by injection, inhalation or ingestion, a special camera can detect how certain organs function, and diagnose and determine the extent of disease in patients. Wake Radiology performs bone, thyroid, liver, kidney, chest and abdomen, and hepatobiliary (liver, gallbladder, common bile duct and small bowel) scans. SPECT imaging provides three-dimensional computer-reconstructed images of multiple views and function within organs to provide a higher degree of resolution and accuracy than traditional planar imaging.

ONCOLOGY SERVICES

Offering the Triangle's first freestanding, full-service outpatient radiation therapy center, Wake Radiology Oncology Services (WROS) in Cary combines the newest technology and three-dimensional radiation therapy with the expertise of specialty trained staff. A PRIMUS linear accelerator produces x-rays and electrons, offering optimal treatments for surface tumors and deep-seated tumors, such as lung or prostate cancers. The computer-controlled linear accelerator is connected to a network of monitors that verifies every aspect of each patient's treatment.

3-D conformal therapy (3DCRT) – *used to treat lung, breast, prostate, head and neck cancers, 3-D targets radiation directly to malignant tumors, while minimizing the risk to surrounding tissue. This CT-based system helps radiation oncologists determine the exact location of the cancer to deliver optimal radiation to the site.*

Intensity Modulated Radiation Therapy (IMRT) – *is a more advanced 3-D system that spares even more of the normal tissue. Wake Radiology Oncology Services is one of two facilities in the state offering this cutting-edge technology, under the guidance of WROS co-director, Scott Sailer, MD. IMRT is used to treat prostate, head and neck cancers and spinal tumors.*

Brachytherapy *is internally delivered radiation therapy. WROS is one of the few centers in the region that offers this medical specialty for liver, prostate and breast cancer.*

Liver microsphere therapy, *which was reintroduced by Andrew Kennedy, MD, WROS co-director, places radiation-filled microscopic spheres into the liver, destroying cancerous cells, while preserving adjacent healthy tissue. The radiated microspheres deliver a continuous radiation dosage over 14 days. Patients who have not had success with chemotherapy or are not able to have surgery are candidates for the therapy. The WROS site is one of only two facilities in North Carolina offering this treatment option.*

MammoSite® Radiation Therapy (RTS) *uses advanced technology to directly deliver radiation inside the breast close to the tissue most at-risk for tumor recurrence. This type of radiation therapy, which is administered in just five days, is appropriate for patients who have undergone a lumpectomy and need follow-up radiation.*

Ultrasound
Abdominal, pelvic, obstetrical and endovaginal, vascular color Doppler, musculoskeletal and abdominal exams are performed using high-frequency sound waves to produce images of soft tissue and internal organs. Ultrasound enables physicians to accurately diagnose conditions and diseases without the risk of surgery or radiation. During an exam, a technologist runs transducer over the skin of the exam site. This produces sound waves that bounce back and provide clear images for physicians to use for interpretation.

RADIOLOGY EXPERTS

The following radiologists are specialty trained in their area of expertise and are available for print, broadcast and radio interviews to discuss both general and sub-specialty radiology.

BREAST IMAGING/MAMMOGRAPHY

Kerry E. Chandler, MD

Appointments: *Director, Women's Imaging, Wake Radiology*

Special Clinical Interests: *Neuroradiology; Magnetic Resonance Imaging*

Member: *American College of Radiology and Radiological Society of North America*

Medical School: *Robert Wood Johnson Medical School in Camden, NJ*

Residency: *Morristown Memorial Hospital, NJ*

Fellowship: *MRI - Neuroradiology, Albany Medical Center*

BREAST MRI/BODY IMAGING

G. Glenn Coates, MD

Appointments: *Director, Body Magnetic Resonance Imaging and Angiography, Wake Radiology; Director, Orthopedic MRI, Wake Radiology; Co-Director, Cardiovascular CTA, Wake Radiology; Co-Director, Breast MRI Services, Wake Radiology; Siemens National Ambassador of Body MRI/MRA*

Special Clinical Interests: *Advanced applications of body MRI and MRA; Cross-sectional Imaging; Image Processing, Rendering, Computer Assisted Imaging; Cardiovascular CTA and MRI*

Member: *Board Certified, American Board of Radiology; National Board of Medical Examiners; Society of Magnetic Resonance; American Roentgen Ray Society; American College of Radiology; Society of Cardiovascular MRI*

Medical School: *University of California College of Medicine at Irvine*

Graduate Degree: *University of California College of Medicine at Irvine, Physiology and Biophysics*

Residency: *University of Washington Affiliated Hospitals; Virginia Mason Medical Center, Chief Resident*

Fellowship: *Body MRI and MRA, Mallinckrodt Radiological Institute, Washington University*

BREAST MRI/BODY IMAGING

Duncan P. Rougier-Chapman, MD

Appointments: *Co-Director, Breast MRI Services, Wake Radiology;*

Member: *American Roentgen Ray Society, American Medical Association*

Special Clinical Interests: *Breast MRI and Body Imaging*

Medical School: *Duke University School of Medicine*

Residency: *Radiology Residency, Duke University School of Medicine*

Fellowship: *Body Imaging Fellowship, Stanford University*

BONE DENSITY (DXA) SCANNING

Joseph W. Melamed, MD

Appointments: *Chairman, Department of Radiology, Maria Parham Hospital, Henderson, NC*

Special Clinical Interests: *Musculoskeletal Imaging*

Member: *Radiological Society of North America and American Roentgen Ray Society*

Medical School: *Yale University School of Medicine*

Residency: *Duke University Medical Center*

Fellowship: *Musculoskeletal Imaging, Duke University Medical Center*

CARDIAC IMAGING – CT CARDIAC CALCIUM SCORING AND CT ANGIOGRAPHY

M. Rans Douglas, MD

Appointments: *Vice Chairman, Department of Radiology, WakeMed Raleigh*

Special Clinical Interests: *Cardiovascular MRI*

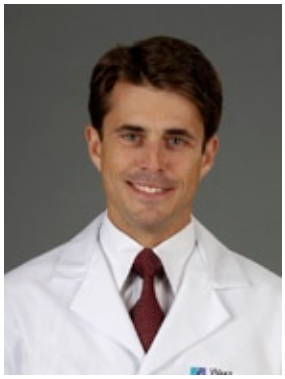
Member: *American Roentgen Ray Society, Radiological Society of North America and Society of Cardiovascular Magnetic Resonance*

Medical School: *University of Virginia School of Medicine*

Residency: *University of Colorado, Chief Resident*

Fellowship: *Magnetic Resonance Imaging, Long Beach Memorial Hospital, CA*

INTERVENTIONAL RADIOLOGY



Carroll C. Overton, MD

Appointments: *Director, Interventional Radiology Services, Wake Radiology*

Special Clinical Interests: *Vascular and Interventional Radiology*

Certificate of Additional Qualification: *Interventional Radiology*

Member: *Vascular Interventional Society*

Medical School: *University of North Carolina School of Medicine*

Residency: *General Surgery, Mercy Hospital of Pittsburgh; Diagnostic* Radiology, Mercy Hospital of Pittsburgh; Diagnostic Radiology, University of Pittsburgh; Angio-Interventional, Alexandria Hospital in Virginia

Susan M. Weeks, MD

Appointments: *Associate Professor and Section Chief, Vascular/Interventional Section, University of North Carolina School of Medicine*

Special Clinical Interests: *Vascular and Interventional Radiology*

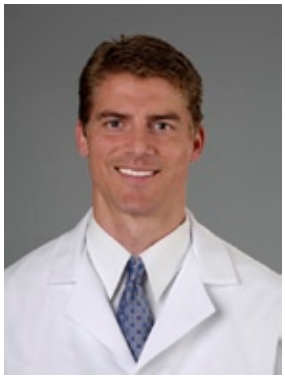
Member: *North Carolina Medical Society, Society of Interventional Radiology, Radiologic Society of North Carolina, American Roentgen Ray Society and American College of Radiology*

Medical School: *University of North Carolina School of Medicine*

Residency: *University of North Carolina Hospitals*

Fellowship: *Vascular/Interventional Radiology, University of North Carolina Hospitals*

MUSCULOSKELETAL IMAGING



Russell C. Wilson, MD

Appointments: *Director, Musculoskeletal Radiology, Wake Radiology*

Special Clinical Interests: *Musculoskeletal Sports Medicine*

Member: *American College of Radiology, American Roentgen Ray Society, North Carolina Medical Society, Radiological Society of North America, Society of Interventional Radiology*

Medical School: *Duke University School of Medicine*

Residency: *Brigham and Women's Hospital, Boston, Massachusetts*

Fellowship: *Musculoskeletal Imaging, University of California at San Francisco, San Francisco, California*

NEURORADIOLOGY

Philip R. Saba, MD

Special Clinical Interests: *Neuroradiology*

Member: *Senior Member, American Society of Neuroradiology; North American Spine Society; Radiological Society of North America; American Roentgen Ray Society*

Medical School: *University of Pittsburgh School of Medicine, Pittsburgh, PA*

Residency: *Child Psychiatry, University of Pittsburgh Medical Center*
Diagnostic Radiology, The Mercy Hospital of Pittsburgh

Fellowship: *Neuroradiology, The Barrow Neurological Institute, Phoenix, Arizona*

PEDIATRIC RADIOLOGY

Margaret R. Douglas, MD

Special Clinical Interests: *Pediatric Radiology*

Member: *Radiological Society of North America, Society for Pediatric Radiology and Southern Society of Pediatric Radiology*

Medical School: *University of Virginia School of Medicine*

Internship: *Pediatrics, University of Cincinnati Children's Medical Center*

Residency: *Pediatrics, University of Alabama Children's Hospital, Diagnostic Radiology, University of Virginia Hospital*

Fellowship: *Pediatric Radiology, University of Colorado Health Sciences Center*

RADIATION ONCOLOGY

Andrew S. Kennedy, MD

Appointments*: Co-director, Wake Radiology Oncology Services, Cary*

Special Clinical Interests: *3-dimensional treatment planning; pioneer in liver microsphere therapy; gastrointestinal, breast, lung and colorectal cancer therapy; brachytherapy*

Member*: American Society for Therapeutic Radiology and Oncology; American College of Radiation Oncology; American Society of Clinical Oncology; American Association for Cancer Research; Radiological Society of North America; American Hepato-Pancreato-Biliary Association and Radiation Therapy Oncology Group.*

Medical School: *Loma Linda University School of Medicine, Loma Linda, CA*

Internship: *Internal Medicine, Loma Linda University School of Medicine*

Residency*: University of North Carolina School of Medicine, Radiation Oncology; Chief Resident*

Fellowship: *University of North Carolina School of Medicine*

Scott L. Sailer, MD

Appointments: *Co-director, Wake Radiology Oncology Services, Cary*

Special Clinical Interests: *Head and neck cancer, genitourinary cancers, breast cancer, 3-dimensional therapy planning; instrumental in bringing Intensity Modulated Radiation Therapy (IMRT) for head and neck and prostate cancer and MammoSite® therapy for breast cancer to the region*

Member: *American Society for Therapeutic Radiology and Oncology; American College of Radiology; American College of Radiation Oncology; American Society for Clinical Oncology; American Brachytherapy Society; North Carolina Medical Society; North Carolina Chapter of the Council of Affiliated Regional Radiation Oncology Societies (former President and Vice-President); and Board Certified, American Board of Radiology.*

Medical School: *Harvard Medical School*

Internship: *Michael Reese Hospital, University of Chicago*

Residency: *Radiation Therapy, Massachusetts General Hospital, Harvard Medical School; Chief Resident in Radiation Therapy, Massachusetts General Hospital, Harvard Medical School*

POSITRON EMISSION TOMOGRAPHY • COMPUTED TOMOGRAPHY (PET•CT)

Holly Burge, MD

Appointments: *Director, Nuclear Medicine, Wake Radiology*

Special Clinical Interests: *Cross-sectional Imaging; Nuclear Medicine*

Member: *American College of Radiology, Radiological Society of North America, American Institute of Ultrasound in Medicine and North Carolina Ultrasound Society*

Medical School: *Ohio State University College of Medicine*

Residency: *University of North Carolina Hospitals*

Fellowship: *Abdominal Radiology, Mallinckrodt Institute of Radiology and Washington University School of Medicine*

WAKE RADIOLOGY AT A GLANCE

14 outpatient office locations and affiliations with five hospitals in the region offering digital mammography and women's imaging, advanced MRI, laser treatment for varicose and spider veins, cancer consultation and radiation treatment, bone densitometry, pediatric imaging, ultrasound, coronary calcium scoring and heart CT, orthopedic and sports imaging, brain and spinal cord imaging, and CT scan.

Specialty offices including Wake Radiology Oncology Services, Wake Radiology Breast Imaging Services, Wake Radiology Interventional Services and Wake Radiology Musculoskeletal Center.

57 Radiologists, two radiation oncologists and 300 radiology technologists/professional staff

More than 650,000 procedures a year at outpatient locations

Charitable Giving

Annual supporter of the American Heart Association Heart Ball and Heart Walk, American Cancer Society's Relay For Life and Raleigh Roundup; Pretty in Pink, a program that benefits uninsured and under insured breast cancer patients; Devil's Ridge Charity Golf Classic to benefit the Prostate Cancer Coalition of North Carolina; the Raleigh Junior League – A Shopping Spree!; Arthritis Foundation Walk, Resources for Seniors – Golden Jubilee; the Triangle Komen Race for the Cure and numerous health fairs in the Triangle area.