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Coaltrain has been satisfying its customers for 32 years, and it's still growing. **7**



Photo by Cameron Moix

**CUTTING-EDGE SURGERY**

With a team of nationally renowned surgeons, Penrose-St. Francis is attracting patients locally and from across the nation.

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Three years after being shut down by a fire, the popular martini and cigar bar is close to reopening.

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**UCCS arts center plans emerging**

By **Cameron Moix**  
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Plans are taking shape for the \$58 million UCCS Visual and Performing Arts Center, with roughly a quarter of the funding already raised, design scheduled to be done in early 2014 and the project on track to begin construction in 2015, according to university officials.

UCCS Chancellor Pam Shockley-Zalabak said that nearly \$15 million — \$4.7 via state grant money and \$10 million from the University of Colorado system president's Initiative Fund — of the estimated \$58 million budget has been approved.

"We have right now a considerable amount of money raised," Shockley-Zalabak said, adding that UCCS anticipates comple-

tion of the facility in 2017. "We're spreading all over creation."

According to the UCCS 2020 Strategic Plan, the VaPA Center will house the Gallery of Contemporary Art (GOCA 1420), Osborne Studio Theatre, classroom space and a performance stage that Shockley-Zalabak said will seat 750 people.

Vice Chancellor for University Advancement Martin Wood said that the facility will be roomy enough to house public-accessible space and a few other partners.

"[The center will] first and foremost house the UCCS Department of Visual and Performing Arts, TheatreWorks and GOCA," Wood said.

"We're currently talking to community and regional partners who might want to be a part of that complex, and the

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Photo by Cameron Mox



As machines keep blood pumping and the patient alive, Dr. John Mehall (right) goes to work on completing the bypass surgery.

# Penrose builds reputation for high-tech surgery

By Amy Gillentine  
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The operating room at Penrose-St. Francis Health Services is filled with doctors and nurses who surround the patient, checking vital signs, prepping instruments and getting ready for the main event.

When Dr. John Mehall enters, everything is in place. Nothing is rushed; no one hurries. There's no wasted motion; this isn't an emergency. Mehall performs about eight of these surgeries a week, every day but Tuesday. It's clear he's comfortable with the work — and it's obvious he's in charge. He doesn't bark out commands, instead requesting assistance, and the team complies.

On this particular morning, he's performing coronary bypass surgery, or a "cabbage," as it's called at the hospital. It's not the most complicated surgery he does — that would be the minimally invasive, valve-replacement surgeries for which he's gained a national reputation.

Mehall opens the chest cavity with what looks like a Skilsaw, and begins to tease out the tiny vein behind the chest to use as part of the bypass.

Another doctor already is removing a vein from the leg for the surgery. The sternum is held open by forceps, and the pink tissue of the lungs is on display.

"It looks painful," said Ray Pruitt, the team's perfusionist. He's in charge of the patient's blood supply, monitoring it as it leaves the body, into the heart and lung machine, and back into the body, bypassing the heart and lungs. "But there's no muscle between the skin and the sternum. People complain more about the incision on the leg."

Operating team members monitor Mehall's progress on three flat-screen, closed-circuit televisions in the room. "I'm just taking this vein out," Mehall explains, working on a small vein in the chest wall. "Then we'll use it and the one from the leg to bypass the other veins, and then we'll be finished."

Mehall makes it sound easy — but bypass surgery involves stopping the heart and lungs while the delicate procedure is performed.

"You can't stop it indefinitely," he said. "The clock's kind of ticking now."

Mehall loves his job, and the 42-year-old surgeon points out that the Penrose OR has the best view in the city — the wide picture-window shows Pikes Peak and the greening mountains.

"I have visiting cardiologists come, and they can't believe I have this view," he says. "It's great."

## By design

But visiting cardiologists and the patients don't come from other states for the view of Pikes Peak. They come because Mehall and his colleagues have a national reputation for performing some rare, complicated surgeries. It's all part of a plan coming together, says Jamie Smith, COO of Penrose-St. Francis Health Services.

"We did this very intentionally," Smith said. "Our goal was to create a program with such good outcomes, it would attract people from outside Colorado Springs."

Mehall was one of the first physicians recruited by Penrose to create a nationally recognized program. When he moved here from Texas seven years ago, he was the only surgeon in Colorado performing minimally invasive surgical procedures for heart-valve replacements. He's still the only doctor in Southern Colorado doing catheter heart-valve replacement surgery. He performs about 80 heart-valve surgeries a year — most doctors only perform two or three of the elective heart surgeries.



Mehall

**"We're probably in the top 10 programs in the nation in terms of doing this procedure."**

— Dr. John Mehall

"It's not super-common," Mehall said. "I guess we're probably in the top 10 programs in the nation in terms of doing this procedure. And people come from Durango, Salida, Trinidad. We have a doctor referring patients from Albuquerque."

To bolster the program, Penrose has recruited doctors from prestigious institutions like the Mayo Clinic, University of Pennsylvania and Cleveland Clinic. During surgery, Mehall introduces Dr. Theolyn Price, the newest addition.

"She's the only doctor in the state doing some of the robotics work," he said, still focused on the surgical patient.

Price says she works on removing cancer from lung nodules using robotics. It's a procedure that's widely done on the East Coast, but hasn't yet made it to Colorado. Trained at the Mayo Clinic, she was recruited from M.D. Anderson Cancer Center in Florida. Price also performs surgical work for other lung and esophageal cancers. She's been at Penrose a week.

"Colorado is awesome, and Colorado Springs has such great culture," she said. "And Penrose is a happy place to work. With financial constraints and health care reform, you can't say that about a lot of hospitals."

Mehall said Price was recruited because of her experience with robotic surgery.

"They're training people across the street (at Memorial Hospital on Boulder Street)," he says. "There's a difference between training and experience."

Mehall and his team conduct clinics in other cities in Colorado, as well as neighboring states, to let people and their doctors get to know them before heart surgery.

"There needs to be some trust," Mehall said. "You have to build relationships, so their doctors trust you and they send patients here."

It's been successful, to say the least.

When Mehall started, Penrose's cardiovascular sur-

gery program was performing only 200 procedures a year. Smith says they've doubled that, thanks in part to recruiting new doctors, marketing the program outside the region and investing in high-tech operating rooms and surgical equipment.

"Cardiac surgery is at the top of the food chain," Smith said. "And we've worked to be able to bring this vascular surgery program to people around the Rocky Mountains. We have patients come from Wyoming, from Kansas, from New Mexico."

But it's not just about marketing. "It's about outcomes," Smith said. "And I'd put our outcomes for vascular surgery right up there with anyone in the nation."

## Other programs

Out-of-state patients don't come just for heart-valve replacements. Many are treated by electrophysiologist Dr. Michael Barber because of his collaboration with Spectranetics, a Springs-based international company that researches and makes medical devices for specific surgical procedures. Barber is one of the few doctors who specialize in lead extractions.

"For all intents and purposes, I'm a heart electrician," he said. "I fix heart rhythm problems, ablations, hearts that beat too fast or too slow. There are no chronic medicines to speed hearts up or slow them down. It can be life-threatening."

Those life-threatening conditions mean implanting pacemakers or defibrillators into patients to regulate heartbeats for the rest of their lives. Usually, that's where Barber's involvement ends. But sometimes, he has to remove the leads — tiny tangles of wire that travel from the veins to the pacemaker or defibrillator — a complicated, delicate procedure that can take hours.

"Most of the time, it's no big deal," Barber said. "But occasionally the device gets infected, the leads get infected, and then there's an issue. It has to be removed from the body. It's a pretty robust surgery. You can cause holes in the veins, trying to remove this spaghetti tangle of wires."

Again, it's not a common type of surgery. Barber



Price



Barber

says he removes about 100 leads a year, and in a career that's spanned more than 16 years, that equals about 1,800 total. Some doctors won't perform the surgery, because it can cause excess bleeding and complications.

"It's not for the faint of heart," he said. "I don't want to brag, not really, but we're in the top 10 programs in the United States and in the top two or three west of the Mississippi. We have more experience doing this — and the more experience you have, the results get better."

## Collaboration

And the results speak for themselves.

In one hospital, which Barber wouldn't identify, he said there were 17 complications in 25 procedures.

"In 1,800 cases, I've had only one death," he said. "And that was two-and-a-half years ago. I don't have complications because I move quickly, but I don't rush."

Barber started Penrose's electrophysiology program and moved here because it was a chance to be part of a brand-new program. He's now in a group of 15 surgeons, and mostly they perform general vascular surgery. But his colleagues have some sub-specialties that make them attractive to people outside the immediate area.

"One of my partners trained at the Cleveland Clinic, and is known for his ablation surgery," Barber said. "Others are known for treating ventricular tachycardia. We have our niches. When you do a lot of one thing, you get more efficient and complications are fewer."

That's the bottom line for Penrose, Smith said. He credits the collaboration with doctors for the outstanding outcomes and the program's reputation. Smith believes doctors choose the hospital not only because of its reputation, but because of the collaboration at a higher level.

"These doctors could have gone to a huge practice and then just done the numbers," Smith said. "But they wanted to collaborate. We're not the biggest in the country, but the young doctors came here because they wanted to have a voice in what we do. They wanted support."

Penrose allows surgeons to take a leadership role.

"We're attracting a certain type of surgeon, because we're not a 'plug and play' anonymous group," Smith said. "Surgeons here have a very, very big voice." • CSBJ



While the surgeons do their work, perfusionist Ray Pruitt runs and monitors the complex heart and lung machines throughout the heart surgery procedure.

Photo by Cameron Mox