



dream
care
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trust
hope



GRAND VIEW HOSPITAL

Annual Report 2010



Mission

Grand View Hospital shall endeavor to provide and coordinate the appropriate utilization of quality, cost-effective health care and related services for the Upper Bucks and Northeastern Montgomery County communities which we serve. While maintaining our traditional commitment to personalized, compassionate care which respects the dignity of the individual, Grand View Hospital shall strive to make quality programs and services available to and accessible by our community. Consistent with our technological, financial and human resources, the organization shall work to address the changing health-care needs, wants and preferences of those we serve.

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Letter from Our Trustees

Our goal is to provide everyone in our community with a lifetime of high-quality health care, beginning even before birth. This year, Grand View added maternal-fetal medicine services – bringing to our community obstetricians who specialize in high-risk pregnancies.

We also opened our new Birth and Family Center, which features a Level II Neonatal Intensive Care Unit capable of accommodating infants with complex medical needs. The center offers attractive and comfortable post-partum and labor-birth-delivery units equipped with state-of-the-art technology.

At Grand View, we are committed to providing the services you need to manage health conditions – ranging from a minor injury to a chronic illness. To assist us in our fight against heart disease, we opened a second cardiac catheterization laboratory last October. The David M. Flowers, MD, Cardiac Catheterization Laboratory is equipped with advanced technology, enabling physicians to diagnose and treat heart and cardiovascular disease non-surgically.

Cardiovascular diseases, including diabetes, can cause chronic and non-healing wounds. In February, we opened the Grand View Wound Care Center, which features advanced treatments, such as hyperbaric oxygen therapy. A good night's sleep is essential to the health of your heart and entire body. To address sleep issues, Grand View opened the Stoneridge Sleep Laboratory, which provides testing, diagnosis, and treatment of sleep disorders, such as insomnia and sleep apnea.

Although these new centers are attractive and technologically advanced, what makes them truly special is the caliber of health-care professionals who staff them. Like the employees who work throughout our hospital and health centers, our knowledgeable and caring staff members are committed to providing you with high-quality and safe health-care services. In fact, our attention to safety was recognized for the third consecutive year by the leading independent health-care ratings organization, HealthGrades®, which awarded Grand View the Patient Safety Excellence Award™ (2008-2010). This distinction places us among the nation's top 5 percent of hospitals.

These accomplishments would not be possible without the staff, physicians, and volunteers who work diligently to provide you with excellent health-care services. We are indebted to them. Likewise, we are grateful to you for your continued patronage and generous contributions. Your ongoing support moves us closer to fulfilling our dream of providing everyone in our community with a lifetime of high-quality health care.

Sincerely,

Michael Corrado, MD
Chair, Board of Trustees
Grand View Hospital

Mary Anne Poatsy
Chair, Board of Trustees
Grand View Health Foundation

Retired Ball Player Puts Grand View's Joint Replacement Center in *A League of Its Own*

When Ruth Richard was at the height of her baseball career in the 1940s and 50s, she knew squat about knee pain. As a catcher with the All American Girls Professional Baseball League, she would crouch behind a batter to seize a pitch, or leap to snag a foul ball. Ruth played catcher and outfielder for the Rockford Peaches – a team made famous by the movie “A League of Their Own.”

Decades later, Ruth began to feel the effects of her baseball days. Still spry in her 80s, she began to experience piercing pain in her left knee. She turned to orthopaedic physician and surgeon Paul Weidner, MD, who recommended knee replacement surgery.

To prepare for the surgery, Ruth attended a half-day program by Grand View's Joint Replacement Center, where nurses and therapists taught her what to expect during her hospital stay and recovery. They discussed pain management, physical therapy, and safety.

Dr. Weidner replaced Ruth's damaged knee joint with metal and plastic implants that function like her original knee. The surgery was a complete success, and Ruth became pain-free.

Ruth recovered from surgery in Grand View's Joint Replacement Center, a uniquely designed unit run by specially trained staff. Large, private patient rooms enable physical therapists to begin rehabilitation at the patient's bedside. Ruth was out of bed the evening of her surgery and began physical and occupational therapy the very next day. “I was delighted the unit had all private rooms. That was the greatest,” said Ruth, now 82. “The nurses were wonderful, too.”

During her stay, Ruth received individual physical and occupational therapy, participated in group physical therapy classes in the unit's gym, and learned how to care for her new joint. Three days later, she returned home, where she continued her recovery with the assistance of nurses and physical therapists of the Grand View Hospital Community Nurse - Home Care Department. Ruth also participated in two months of physical therapy in the Physical Medicine and Rehabilitation Department at Grand View's Outpatient Center at Sellersville. “The physical therapy area is gorgeous, with its windows overlooking the woods,” Ruth said. “My whole experience at Grand View was excellent.”



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Ruth believes baseball may have contributed to her need for a knee replacement, yet she has no regrets about playing. The star player's athletic ability – evidenced at Sell-Perk High School (now Pennridge) – was her ticket out of town. After tryouts in Allentown, she received an all-expense-paid trip to Havana, where she competed against 600 girls from the United States, Canada, and Cuba.

"I was 18 when I went into the league," Ruth said. "Back then, you were lucky to get out of town. They gave me my first long train and plane rides, and I traveled all over the country." The Rockford Peaches played nearly every night – 126 games from Memorial Day to Labor Day, with double-headers on Sundays and holidays. Anywhere from 1,500-3,000 fans turned out to watch "the players in skirts." At their peak, the Peaches were so popular they drew more fans than the town's minor league men's team.

"We had great fun," Ruth said. "Nearly everyone was single, but we had chaperones. You couldn't get away with anything. We loved playing ball so much we went by the rules."

The league's popularity waned and collapsed by the start of the Korean War. Ruth returned home and worked for 26 years at a gauge manufacturing company. From time to time, she would see her former teammates as they signed autographs at a memorabilia shop in Cooperstown, New York – home of the Baseball Hall of Fame.

The 1992 movie "A League of Their Own" sparked a wave of interest as a new generation learned of the Rockford Peaches. Ruth met director Penny Marshall and roomed for three days with actress Lori Petty (who played pitcher Kit Keller) on a publicity tour. "I like to tell people that Geena Davis, nearly 6 feet tall, played me as the catcher," laughed Ruth. "At 5 feet 4 inches, I'm just a little shorter."

Despite her average height, with her new knee, Ruth is standing tall. "I'm really glad I had my knee replaced. At my age, I am so pleased how well I came through it. It feels really good. The whole experience was a home run."



Our Joint Program Obtains Star Status – Five Stars, Actually

Grand View received five stars in total knee replacement in 2010 and is the only hospital in Bucks and Montgomery Counties to receive five stars in total joint replacement from HealthGrades®, the nation's leading health-care ratings company. Our hip and knee replacement programs also received Gold Seal of Approval™ certification for high-quality care from The Joint Commission. Other joint replacement surgeries performed at Grand View Hospital include shoulder, ankle, and elbow.

Beyond joint replacement, we offer a full range of orthopaedic services, including back and spine care. For more information, call Orthopaedic Services at 215-453-4162.

Addition of a Second Cardiac Catheterization Laboratory

Grand View recently opened the second phase of The David M. Flowers, MD, Cardiac Catheterization Laboratory, featuring a second procedure suite and new location inside the hospital. With construction and renovation costs of \$3.1 million, the lab is equipped with \$1.5 million state-of-the-art technology.

Physicians working in the catheterization laboratory diagnose and treat cardiovascular disease and peripheral vascular disease. PVD affects the veins and arteries that carry blood throughout the body. PVD in the legs can cause pain and ulceration, which can ultimately lead to infection and limb loss.

The Cardiac Catheterization Laboratory is one component of Grand View's Cardiovascular Center of Excellence, which brings together top talent to enable patients to achieve their optimal level of cardiovascular health. Our Cardiovascular Center of Excellence focuses on:

- ▶ Heart Care – Medical management and interventional procedures for heart-related conditions
- ▶ Vascular Services – Surgical and non-surgical interventions to treat conditions affecting the arteries and veins
- ▶ Stroke Program – Evaluation, treatment, and rehabilitation



Left to right (front row): Jessica Rudi, RN; Diane Conley, LPN, RCIS, Director; Joanne Quinn, RN; Bethany Moser, Scheduling; Left to right (back row): Dan Zaffino, RN; Jamie Nuding, RN; Doyle Walton, MD, Co-Medical Director; Susan Strickler, RCIS; Deborah Bandura, RCIS, Cath Lab Coordinator

Stroke Program Receives National Recognition...Again

Grand View has earned a Gold Seal of Approval™ from The Joint Commission for Primary Stroke Centers. "Grand View Hospital demonstrated that its stroke-care program follows national standards and guidelines that can significantly improve outcomes for stroke patients," said Jean E. Range, MS, RN, CPHQ, Executive Director, Disease-Specific Care Certification, The Joint Commission.

Grand View Hospital also received the 2009 American Heart Association/American Stroke Association's Get With The Guidelines® Stroke Gold Plus Performance Achievement Award. The award recognizes commitment and success in implementing excellent care for stroke patients according to evidence-based guidelines.

"This is the second time our program received the certification from The Joint Commission and the second time we've been honored with Get With The Guidelines-Stroke Performance Achievement Award," said Denise Kistler, RN, CNRN, Stroke Program Coordinator. "Earning these distinctions reaffirms Grand View's commitment to meet high standards of care for patients."

Stoneridge Sleep Center Helping Patients Get Their Z's

Studies show individuals can greatly reduce their risk for serious health problems, like cardiovascular disease, by getting plenty of sleep. Yet more than one-third of Americans suffer from sleep disorders that deprive them of necessary rest.

The Stoneridge Sleep Center – which opened in February – provides testing, diagnosis, and treatment of sleep disorders, such as insomnia, sleep apnea, narcolepsy, restless leg syndrome, and more. For information, call 215-453-8106 or visit www.gvh.org.

The Pathway to the Heart

Inspiring others through music is what 60-year-old Jack Bittner enjoys most as a guitar player and songwriter. He's still playing after a heart attack, thanks to an innovative procedure using the hand.

In late December, Jack and his band members were editing a CD featuring songs he wrote for worship services at his Telford church. While getting ready for bed, Jack felt an intense burning sensation in his chest. Fearing it was more than heartburn, he took two aspirins, and his wife drove him to the Emergency Room. By the time they arrived at Grand View Hospital, the pain had eased.

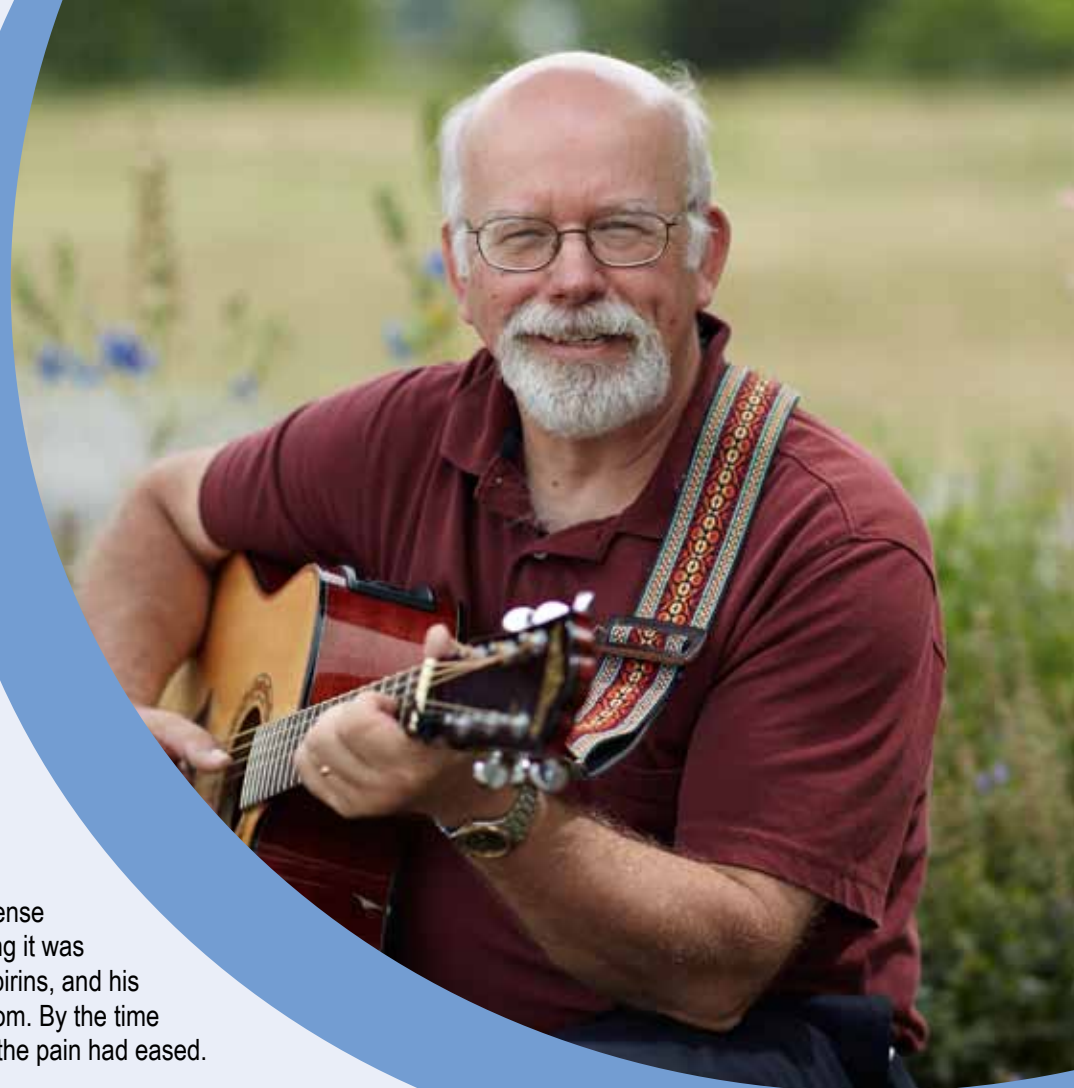
"A typical man, I was ready to go home, but my wife insisted I be evaluated," he said. It was a good thing he stayed. Tests revealed that a blocked artery had led to a heart attack.

To clear the blockage, interventional cardiologist Doyle Walton, MD, performed a transradial cardiac catheterization, used in fewer than 2 percent of catheterization procedures in the United States. Dr. Walton made an incision in Jack's wrist and inserted a thin plastic tube into the artery. He then guided the tube through Jack's arm and chest, and into his heart. Dr. Walton opened the blockage and placed stents (mesh tubes) in the artery to keep the vessel open.

"Patients are surprised to learn we can access heart arteries from the wrist," said Dr. Walton. "They are more familiar with the traditional femoral (through the groin) access." Grand View is able to offer this cutting-edge transradial option because its cardiac catheterization laboratory features the latest technology, and cardiologists and staff are trained in the procedure. Used in 80 percent of cardiac cath patients in China and 40 percent in Europe and Japan, the procedure is growing in popularity here due to its positive outcomes, including reduced risk for bleeding and other complications.

Dr. Walton noted, "Patients are able to sit up and walk around almost immediately after the procedure. They're more likely to be discharged sooner. In certain patients, such as those who have reduced circulation in their arms, the femoral artery remains the optimal access site."

Jack was happy to go home the day after his catheterization and quickly resume his life. In his job as a network security consultant, he was called on almost immediately to solve a problem. "I was surprised at how quickly I healed, with almost no pain," he said. Since his heart attack, Jack has participated in cardiac rehabilitation at Grand View and made lifestyle changes with exercise and diet. He is back to volunteering as music director at his church. The CD was produced, and he credits that music as a source of strength. Suitably, it is titled, *Written on the Palm of My Hand*.



Beyond a Mere Wound

Rita Seidler was not worried about the wound on her calf. The injury occurred while she was watching workmen move a grand piano in her church. She fell backward, striking her leg against the piano's metal wheel apparatus and opening a three-inch gash. She ignored the pain and open sore and focused on her volunteer work at the food pantry – a mission spurred by her own childhood hardship.

However, Rita's daughter, a nurse, was very concerned about her mother's leg. By the time she saw her mother two weeks after the injury occurred, the wound had discolored. She immediately called Grand View's Wound Care Center to schedule an appointment for the next day.

"On her first visit, Rita's wound was sizeable and growing worse," said Wound Care Center Program Director Jody Hanks. The non-healing wound was caused by impaired blood flow from the legs to the heart. A physician specially trained in wound care treated it using debridement – a surgical procedure. To ease discomfort and reduce infection, ointments were applied to the ulcer, and the wound was wrapped with special dressings to keep moisture in, and air and water out. Rita wore compression stockings continuously and received debridement treatments twice a week until her wound fully healed.

"Rita is strong, poised, and focused on others," Hanks said. "Our entire staff looked forward to her stories." Likewise, Rita enjoyed visiting with the staff. "I didn't mind the treatments because the staff was so kind," she said.

At age 82, Rita doesn't neglect her health, but life had taught her to take discomfort in stride. As a teenager in Germany during World II, Rita's home was bombed, her father was imprisoned, and her family had barely enough food to survive. They lived in constant fear of enemy soldiers.

Rita suspects her susceptibility to non-healing wounds was caused by the malnutrition she experienced during the war. While still in her teens, her hunger was so fierce she risked being caught violating curfew to sneak to the countryside at night. There, she foraged for whatever she could find – wheat kernels, potatoes, and corn. She even traded jewelry for milk.

Fortunately, Rita's family eventually relocated to Schleswig Holstein, near the Danish border, once her father returned from prison. There she met Helmut Seidler, an engineer. They married and emigrated first to Canada and then to America. They eventually settled in Schwenksville.

Today, Rita is active in her church – particularly with the food pantry. "I know what it's like to be hungry," she said. "Most people cry the first time they come. They don't want to be here, but I let them know it's going to be all right. It gives me joy to help them."



trust



Wound Care Center Medical Director Dawn'c Wilkes, MD

Hyperbaric Oxygen Treatment Assists in Healing

Patients who receive hyperbaric oxygen therapy (HBOT) breathe 100 percent of oxygen inside a pressurized chamber. HBOT quickly delivers high concentrations of oxygen to the bloodstream and assists in healing wounds. It is effective in fighting certain types of infections, stimulating new blood vessel growth, and improving circulation. HBOT is prescribed for about 16 percent of wound-care patients.

New Wound Care Center Offers Leading-Edge Technology

The Grand View Wound Care Center provides treatment for chronic and non-healing wounds. It opened in February at the Sellersville Outpatient Center. The 3,500-square-foot center offers advanced wound-care treatments, including hyperbaric oxygen therapy. Such therapies can help patients avoid possible amputation of limbs, debilitating health problems, and life-threatening infections.

"People with slow-healing wounds that have not gotten better with other treatments no longer have to suffer," explained Wound Care Center Medical Director Dawn'c Wilkes, MD. "Using leading-edge technologies, our team is devoted to healing problem wounds and helping patients reclaim their lives."

Grand View's Wound Care Center offers other services to treat wounds as well – infectious disease management, physical and occupational therapies, laboratory evaluation, nutritional management, pain management, diabetic education, nuclear medicine, radiology, and debridement. Our physicians and staff trained in wound care work in collaboration with a patient's physician to develop a customized treatment plan.

About 7 million people suffer from chronic, non-healing wounds – a serious condition that can result in severe health issues. Non-healing wounds are typically caused by inadequate circulation, poorly functioning veins, and immobility. All occur more frequently in the elderly and in people with diabetes. For information about our Wound Care Center, call 215-453-3360 or visit www.gvh.org.

hope

Safeguards in Place to Ensure Safety in Radiation Oncology

Grand View is committed to providing you with high-quality, safe health-care services. The Radiation Oncology Department of the Grand View Hospital Regional Cancer Program is a fine example. The department institutes a complex system of checks and balances to ensure patients receive the proper dose of radiation delivered to the precise location of a tumor. Therapy treatments are conducted by qualified staff using properly maintained equipment and safety precautions.

“We never forget the risks associated with radiation,” said Radiation Oncology Medical Director Martin Hightower, MD. “We’re committed to creating an environment where processes and safety checks are strongly in place. Our goal is zero errors.” All of our radiation oncologists are certified by the American Board of Radiology. Radiation oncologists plan a patient’s treatment, track progress, and identify and treat any side effects related to radiation therapy.

Our full-time radiation physicist is board-certified by the American Board of Radiology. He ensures patients receive the exact dose of radiation to the precise area the radiation oncologist has prescribed. To provide accurate treatments, the radiation physicist:

- ▶ Develops and directs quality-control processes for equipment and procedures.
- ▶ Takes precise measurements of the radiation beam and calibrates the equipment to ensure radiation treatments are precisely and accurately delivered.
- ▶ Checks computer-generated calculations by performing independent manual calculations.

For highly complex treatment plans, actual treatment is delivered to a phantom (a dry run). Using the doses measured at various points within the phantom, the radiation physicist is able to determine the accuracy and precision of a real patient’s treatment.

Certified medical dosimetrists work with the physicist and radiation oncologist to deliver an adequate dose to the area of the cancer while sparing healthy tissue. Radiation therapists perform a “time-out” prior to therapy to verify the physician’s written order, prescribed dose programmed into the machine, and patient’s identity. “Two sets of eyes check and double-check,” noted Radiation Oncology Manager Dorothy Barwis.

To keep radiation equipment at peak performance, Grand View’s staff performs daily, monthly, and annual physics calibrations and output checks. We forward measurements related to the quality of the radiation beam to the Radiological Physics Center at the University of Texas MD Anderson Cancer Center in Houston for evaluation.

The Commission on Cancer (CoC) of the American College of Surgeons (ACS) has granted three-year Approval with Commendation to our Regional Cancer Program.

The Outpatient Center at Sellersville has been awarded an accreditation after a recent survey by the American College of Radiology (ACR). The center is now a designated Breast Imaging Center of Excellence, according to the Commission on Quality and Safety and the Commission on Breast Excellence.

The Radiation Oncology Practice of Grand View Hospital and the High Point Cancer Center were awarded three-year accreditation by the American College of Radiation Oncology (ACRO).

Winning the Battle

Alexander “Bud” Pilecki remembers the day he learned his father had cancer. It was 1986, Bud was nearly 50, and his father was 74. The cancer had already advanced to stage IV, the most serious level, and had spread to his father’s bones.

Bud watched the man he thought would live to be at least 90 become weaker and sicker, ultimately losing his battle. “When my father finally went to the doctor and learned he had cancer, it was too late. He was a year older than I am now. I saw how his illness affected him and our family. I vowed never to let that happen to me.”

Knowing his family history put him at risk for prostate cancer, Bud scheduled a PSA test every few years. The test, which measures prostate-specific antigen (PSA), can indicate the presence of the disease. As the years passed, his PSA level slowly rose. When it reached a certain point, his doctor suggested Bud see urologist Matthew Gerstein, MD, who recommended a series of tests. “Although Bud’s biopsy confirmed cancer, I was confident we’d be able to treat it,” noted Dr. Gerstein.

Dr. Gerstein referred Bud to radiation oncologist Martin Hightower, MD, for a consultation. Both physicians recommended brachytherapy, or seed implant therapy. In this minimally invasive procedure, both the urologist and oncologist implant radioactive seeds, about the size of a grain of rice, into the prostate. The permanent seeds irradiate the cancer from within. “Bud was an ideal candidate for the brachytherapy,” Dr. Hightower explained during the consultation. “He’s relatively young and in good physical condition. His cancer was slow-growing and in the early stages.”

Before starting treatment, Bud sought a second opinion. He used the second-opinion service through Grand View Hospital’s partnership with Fox Chase Cancer Center to schedule an appointment there. The physician at Fox Chase recommended the same treatment as Dr. Hightower.

Understanding his options, Bud decided he could get outstanding treatment at Grand View, which was more convenient. “Coming to Grand View was an excellent decision,” he said. “I had almost no pain or discomfort, and it appears the cancer is gone.”

Bud, who worked 30 years in manufacturing management, is enjoying his golden years. At Brittany Pointe Estates, his retirement community, he works out in the gym and plays golf and water volleyball. He also likes to read, play the clarinet, and volunteer at Grand View.





Spa-like bathrooms with six-head showers | Rooms with flat-screen TVs | Wireless Internet access
Take a tour! Online: www.gvh.org | Onsite: 215-453-4100

Announcing Our New Birth and Family Center

Grand View has always been dedicated to outstanding maternity care. Recently, we invested \$7 million in our new Birth and Family Center. We combine advanced technology with a skilled, compassionate team of physicians and nurses, and a striking decor to bring new moms and babies a wonderful birthing experience.

- ▶ Our special-care nursery is ready with the appropriate equipment and experienced staff to provide targeted care for infants with special needs.
- ▶ Children's Hospital of Philadelphia (CHOP) pediatricians staff Grand View's nursery 24 hours every day. They assist with complex births and care for infants with special needs.
- ▶ For complicated pregnancies, our perinatology specialists monitor high-risk births and perform advanced tests, such as amniocentesis, genetic testing, and high-level ultrasound.

A Special Delivery...No Matter What

At 41, Vicki Causerano went to Maternal Fetal Medicine (MFM) because of her age. Soon she was glad to be in expert hands for another reason. A routine prenatal screening test indicated she had a 50 percent chance of having a child with Down Syndrome.

While at Grand View, a high-speed telemedicine network provided a consult with a genetic specialist at Lehigh Valley Hospital. The specialist suggested amniocentesis – a medical procedure used in prenatal diagnosis of chromosomal abnormalities. The test involves extracting a small amount of amniotic fluid, which contains fetal tissues, from the amniotic sac surrounding the developing fetus. The fetal DNA is examined for genetic abnormalities. The drawback of amniocentesis is it carries a small risk, about 1 in 100, of miscarriage.

"We debated whether to have the test," Vicki said. "We decided to have it only if confirming the baby had Down Syndrome would benefit him. Although the risk of miscarriage was very small, if something went wrong, we'd never forgive ourselves."

In addition to mental retardation and distinct facial characteristics, about half of children born with Down Syndrome have heart problems that can be life-threatening and may require surgery in early infancy. To measure the baby's growth and evaluate the heart, MFM specialist Kara Coassolo, MD, suggested a series of high-level ultrasounds and fetal echograms as an alternative to amniocentesis. Fetal echocardiography uses sound waves (ultrasound) to study heart structure.

"There was never pressure to have testing we didn't want," Vicki said. "They let us call the shots and took the time to answer our questions thoroughly without making us feel like we were pestering them. One week I talked to registered nurse Carey Myers, who coordinates the MFM program, three times a day."

Coincidentally, Vicki has experience with Down Syndrome. As a young woman, she worked in group homes for mentally handicapped adults. "When there's a possibility of Down Syndrome, so many people get caught up thinking something is wrong with their baby. They fail to realize these children have so much to offer," Vicki said. "Everyone should have an opportunity to make their contribution in the world. If our child has Down Syndrome, we will stand behind him in however far he can go."

dream

Maternal Fetal Medicine Program

Ask a pregnant woman if she's hoping for a boy or girl and you'll likely hear, "I just want a healthy baby." For many women, the prospect of having a healthy baby or pregnancy is not to be taken for granted.

Women who are over 35, have had problems in a previous pregnancy, have structural abnormalities in the uterus or cervix, or are carrying more than one fetus are at risk for complications during pregnancy or delivery. Fortunately, Grand View provides the services of specially educated obstetricians to evaluate the fetus and provide genetic counseling. They work with an expectant mother's OB/GYN to ensure she and her baby receive specialized care. The MFM team includes nurses with training in special-care maternity services. Expectant mothers receive advanced diagnostic and therapeutic procedures. For information or to schedule an appointment, call 215-453-4754.

One Mom Expecting Two

Jana Ellixson (below), 39, was referred to Maternal Fetal Medicine specialists when she learned she was expecting twins.

With her first pregnancy, she entrusted her care to a midwife service since she wanted a natural delivery in her home. She needed a C-section anyway. This time around, Jana had already decided she wanted to deliver her twins in a hospital fully equipped to respond to unexpected complications. As soon as her obstetrician discovered she was expecting twins, she referred her to Maternal Fetal Medicine at Grand View Hospital.

"I love coming here," said Jana, who receives a stress test twice a week. "Everyone has been so kind to me and seems genuinely concerned about us. The doctors and staff have the expertise we need, so I know all three of us are being well cared for medically."

For an update on Jana and Vicki and their babies, visit www.gvh.org.

Telemedicine Connects Patients in Sellersville with Genetic Counselors in Allentown

Genetic counseling is available for expectant mothers through Lehigh Valley Hospital and telemedicine technology. Patients viewing a TV monitor at Grand View have real-time discussions with genetic counselors in Allentown. Maternal-fetal medicine specialists recommend tests to assess one's risk for having a baby with birth defects or genetic abnormalities before conception or during pregnancy. Individuals with diabetes, heart disease, or other medical problems can also learn to manage any conditions they may have.



Hysterectomy, Sisterectomy

Many sisters enjoy activities together, but Julie Yoder (left) and Jill Stouffer (right), ages 38 and 37, took it to the extreme. The sisters had hysterectomies on the same morning at the same place... Grand View Hospital.



Both women suffered from menorrhagia, a condition characterized by heavy and painful menstrual periods, fatigue, and sometimes anemia. Each woman saw her gynecologist at Stoneridge OB/GYN and decided to have a hysterectomy. “Our mom suggested we have the surgery the same day and call it a ‘sisterectomy,’” Julie said.

Jill’s difficulties began three years ago. Her gynecologist, Stephen Kupersmith, MD, performed endometrial ablation – a minimally invasive procedure that controls heavy bleeding. “Ablation changed my life,” said Jill. “I no longer had to stay close to home three days each month.”

Although the ablation was successful, Dr. Kupersmith told Jill that her underlying condition would most likely warrant a hysterectomy at some point. Her pain eventually became severe, and her situation was complicated by the discovery of a benign ovarian tumor. The parents of three, Jill and her husband did not intend to have more children so she decided to have the hysterectomy. Dr. Kupersmith was able to successfully remove the mass and spare the ovary.

Sister Julie began experiencing similar problems around the same time Jill’s issues began. Julie’s gynecologist, Nicholas Lindberg, MD, suggested she, too, have a hysterectomy. “I have four beautiful kids. I love them to death but don’t plan on more,” laughed Julie.

Jill and Julie each chose to undergo laparoscopically assisted vaginal surgery – a modern technique that uses specialized tools inserted through tiny incisions in the navel and abdomen. The surgery leaves abdominal scars about one quarter-inch each in length. Benefits include less pain, shorter hospital stay, faster recovery time, and a smaller scar than traditional surgery.

The sisters left Grand View the morning after their surgery. Both experienced little pain or discomfort. “The hardest part was following our doctors’ instructions and limiting our activity for a couple of days,” said Jill. “We’re very active, and before long we were back to working out and playing with our kids. We both feel great.”

Nearly “ScarLESS” Surgical Technique Available at Grand View

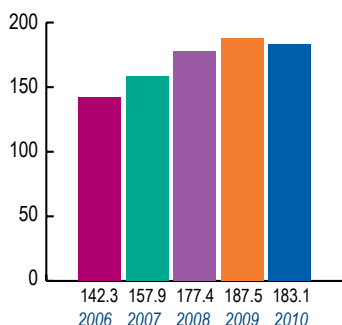
Grand View physicians use several types of laparoscopic techniques to perform minimally invasive surgery. One option, appropriate for some patients, uses a single incision in the belly button. The procedure, known as Laparo-Endoscopic Single-Site (LESS) surgery, results in a less noticeable scar. As recently reported in the *American Journal of Obstetrics and Gynecology*, LESS may result in less abdominal trauma and post-operative pain and a quicker recovery than traditional surgery. Donald DeBrakeleer, DO, said, “Patients are delighted that the scar is barely noticeable because the folds of umbilicus or bellybutton nearly completely hide it.” Grand View is the only hospital in the area to offer LESS.

Charity Care Policy

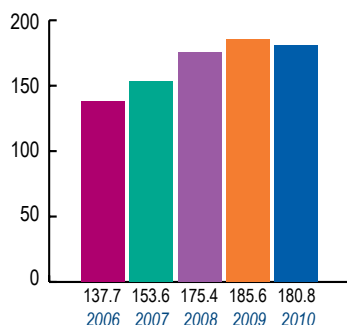
Grand View Hospital is committed to treating patients who lack financial resources with the same dignity and consideration that is extended to all of our patients. We provide charity care to those who are unable to pay. For the fiscal year that ended June 30, 2010, Grand View provided charity care in excess of \$20 million.

Financials

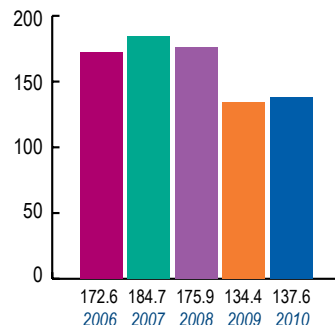
Operating Revenue
Millions of Dollars



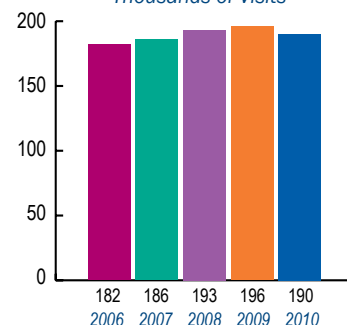
Operating Expenses
Millions of Dollars



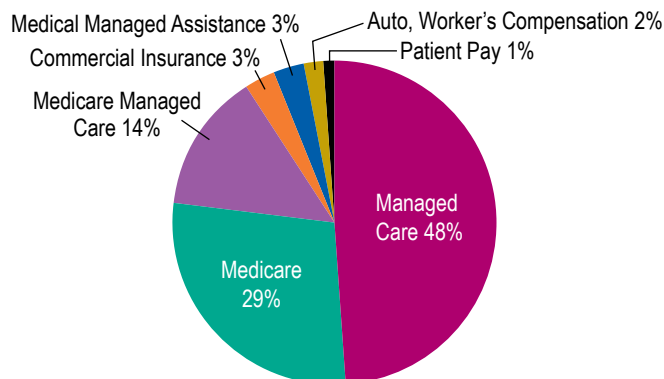
Community Ownership
Millions of Dollars



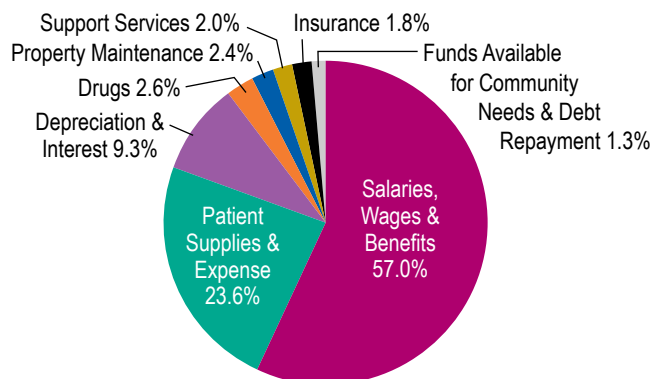
Inpatient Admissions & Outpatient Visits
Thousands of Visits



Where the Revenue Comes From



How the Revenue Is Used



ICCU Now Staffed by Intensivists

Physicians who specialize in the treatment of critically ill and injured patients are now at Grand View seven days a week. Called intensivists, they coordinate the care provided by a team of medical specialists – such as cardiologists, pulmonologists, surgeons, and neurologists. Intensivists work exclusively in the hospital, primarily in the Intensive/Coronary Care Unit. Their training consists of a fellowship in critical-care medicine after first achieving board certification in another specialty.

“We look forward to working with the ICCU staff and physician specialists to deliver optimized patient care,” said Edward Gray, DO, lead intensivist. Studies suggest hospitals using intensivists have lower mortality rates, shorter hospital stays, and reduced costs.

Intensivists Edward Gray, DO, and Michael Lagnese, DO



The Barndts: More Than Four Decades of Giving

William H. Barndt was born at Grand View Hospital in October 1919, just six years after it opened. He was delivered by one of the founding physicians, Dr. H.C. Grim. Thus began a longstanding relationship between the hospital and a most loyal supporter.

In 1968, Bill was asked to join the Grand View Hospital Board of Trustees. For 42 years, he has served as an active trustee or emeritus trustee for the Hospital or Grand View Health Foundation boards.

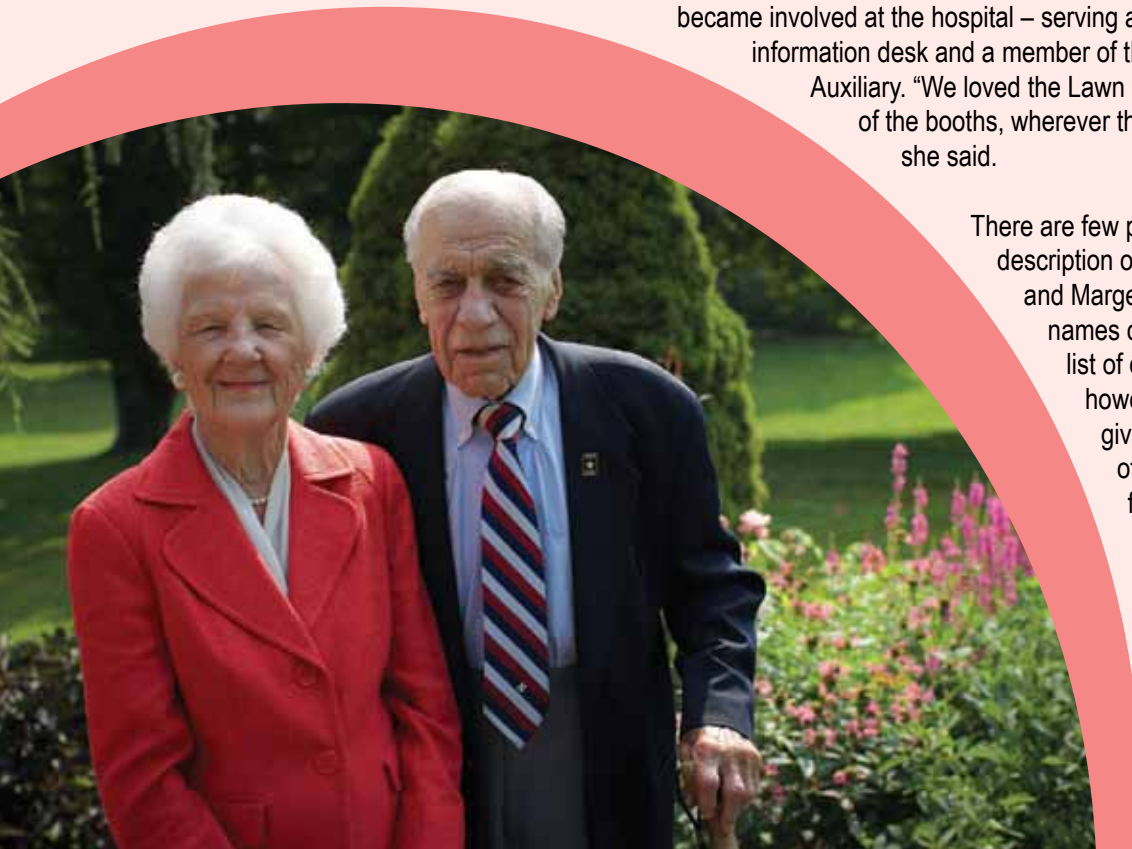
In 1972, not long after Bill joined the board, he assumed the role of treasurer. "That meant you were the fundraising chair," he explained. "Along with William Waite, the hospital administrator, we organized a very successful campaign that kicked off with the ringing of all the local church bells and the blaring of the fire departments' sirens. Ministers and fire chiefs from the area joined hospital volunteers going door-to-door and asking for gifts. There was such appreciation for Grand View Hospital in our community, so much respect for the care available there, that we received many wonderful gifts," Bill remembered.

For many years, when Bill Barndt's name came up at a fundraising committee meeting, someone would recall the time he arrived at Grand View by helicopter for a campaign meeting. Bill had a 45-year career with First Pennsylvania Bank. In 1972, he was senior vice president in charge of eighty branches in seven counties. At the time, the bank was using a helicopter to collect paperwork and receipts from the branches. "I hitched a ride and landed behind the hospital not far from the present-day helipad. I made it to the meeting on time!" Bill joked.

Bill's loyalty to Grand View is surpassed only by his loyalty to Marjorie, his wife of 66 years. They met at Fort Douglas, Utah, where Bill was serving in the Army and Marge was working as a telephone operator on base. In 1952, after Bill's storied tour of duty in the Pacific theater during World War II (which included serving as the military escort for the Bob Hope Troop) and following his service in Korea, Bill and Marge made their way back to Bucks County and purchased a farmhouse in Telford, where they still reside.

Bill and Marge raised three children. After their children had grown, Marge became involved at the hospital – serving as a volunteer at the information desk and a member of the Grand View Hospital Auxiliary. "We loved the Lawn Fete. I worked at many of the booths, wherever the Auxiliary needed me," she said.

There are few people who better fit the description of loyal supporters than Bill and Marge Barndt. Every year, their names can be found among the list of donors. Just as important, however, is their gift of time – given so generously in support of Grand View for more than four decades.



support

THE CHARLES J. MANDERFIELD SOCIETY Recognizing Donors for a Lifetime of Giving

Charles J. Manderfield was a quiet man whose simple lifestyle gave little hint of his true means or his generosity to Grand View Hospital. This society, named in his honor, recognizes those donors whose lifetime of giving reflects Mr. Manderfield's commitment to charity. Outright gifts to Grand View Hospital and the Grand View Health Foundation or payments on pledges received through June 30, 2010, and totaling \$25,000 or more are honored and recognized here.

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Recognizing individuals who have planned a bequest, created a gift annuity, established a charitable trust, or in some way provided for a gift that will live on in perpetuity.

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Gifts were received from the estates of these farsighted individuals between July 1, 2009, and June 30, 2010.

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 Curtis and Esther Bergey
 Alice Bozarth
 Ruth K. James
 Horace W. Longacre
 Kenneth A. Longacre, Sr.
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 Mary S. Ziegler

The following lists recognize individuals who have given gifts totaling \$100 or more to Grand View Hospital and Grand View Health Foundation between July 1, 2009, and June 30, 2010.

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Recognizing donors who have made gifts to help fund hospital expansion and renovation.

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