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a wide variety of health and wellness information and greater awareness of the extensive resources offered by our integrated health system.





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SPRING 2011

ENSURING COMPASSIONATE CARE AND A HEALTHIER COMMUNIT'



ore than 150 years ago Good Samaritan Hospital was founded on the desire to provide

compassionate care to those in need. Today, it is more than the hospital staff who hold that desire close to their hearts. As this issue of Compassion makes clear, hundreds of other generous individuals also are passionate about what we do here at Good Samaritan and at our satellite facilities.

The back of this magazine is packed with the names of major donors – organizations and individuals – who freely give their dollars to the Good Samaritan Hospital Foundation to improve the health of our community. What a blessing to be able to count you all among the Good Samaritan family.

Dozens of other corporations, physician groups, organizations and individuals show their dedication by supporting events like the Good Samaritans' Gala held in February and featured on page 10. With their help, this year's Gala raised an astonishing \$427,000, which will be used to support a fellowship in robotic-assisted cardiothoracic surgery as well as medical research. We can't say 'thanks' enough to every attendee and sponsor, as well as the organizers who expertly planned this year's extravaganza.

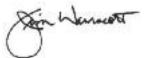
While so many are dedicated to raising funds to improve patient care, our staff is dedicated to providing leading-edge treatment to our patients. The story on page 6 tells of a groundbreaking procedure now available at Good Samaritan to treat abdominal aortic aneurysms. On page 12 you'll read how our staff provide palliative care – a relatively new medical specialty – to comfort patients during serious illness. These are just some examples of the commitment to compassionate care throughout our system.

To those mentioned in this magazine, and to those who quietly go about their work without mention, we thank you for supporting our mission.

Sincerely,

John S. Prout

President and Chief Executive Officer, Good Samaritan Hospital



Iames L. Wainscott

Chairman, Good Samaritan Hospital Foundation

Hospital and Good Samaritan Hospital Foundation

GOOD SAMARITAN HOSPITAL MISSION To improve the health status of the people we serve We pursue our mission by providing a full range of health-related services including prevention wellness and education. Care is provided with compassion consistent with the values of our organization.

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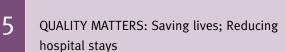
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Cover photo by Tim O'Brien

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FOUNDATION NEWS: Another spectacular Gala

















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CARING FOR PEOPLE FIRST®





Dear Friend, Here's what's been happening lately at Good Samaritan:

- Not only have we been named one of the nation's 100 Top Hospitals (see page 3), we're also proud to be ranked among the top hospitals in Cincinnati according to U.S. News & World Report's first-ever Best Hospitals metro area rankings. Good Samaritan was selected for our consistent record of high performance in key specialty areas
- Cincinnati and Northern Kentucky Family Magazines recently voted Good Samaritan the "Best Place to Have a Baby." CityBeat readers voted us the "Best Place to Give Birth in Cincinnati."
- TriHealth was one of just 10 Greater Cincinnati companies honored with a 2011 Pillar Award for Community Service by the Smart Business Network.
- After 35 years of caring for our tiniest patients, Horacio Falciglia MD will retire June 30. He has chaired our Department of Neonatal Pediatrics, and was director of our Neonatal Intensive Care Unit and our Mother/Baby Unit. Dr. Falciglia gained national recognition for his research. He surely will be missed.

Sincerely,

Baco / Panghaga ...
David P. Dornheggen

Good Samaritan Hospital

Chief Operating Officer

VOLUNTEER Spotlight

Volunteers play an integral role in helping Good Samaritan achieve its mission.

Reeping tiny babies warm. That is the job of Dorothy Inderhees, her sister Mary Maxwell, and Mary's daughter Jean. Together they have knitted thousands of hats for newborns in their 47 years (combined) as Good Samaritan volunteers. They are among 80 at-home knitters whose work warms the tiny heads of each of the 6,800 infants who are born each year at the hospital. Using yarn donated by The Guild of the Good Samaritan

Hospital Foundation, the trio work at their own pace. Mary knits about three hats a week. She also launders and bundles hundreds of hats each month. Jean specializes in making pom-poms, which are added to each hat before they are given to grateful parents. Dorothy recently retired as coordinator of the baby hat program and now is content to knit at her own pace, about

four hats a week.



Left to right: Dorothy Inderhees, Mary and Jean Maxwell

If you or someone you know would like to knit hats at home or volunteer at Good Samaritan Hospital call 513-862-2368 or visit TriHealth.com and click on "Do More at TriHealth.com/ Volunteer."

Good Samaritan named one of the nation's 100 Top Hospitals

THOMSON REUTERS 100 TOP HOSPITALS

"At Good Samaritan – and throughout the TriHealth system – we continue to raise the bar on integrating all aspects of our care..."

~John Prout, president and chief executive officer of Good Samaritan and TriHealth

Good Samaritan's commitment to attaining the best possible clinical outcomes for every patient has resulted in nationwide recognition. For the third time since 1993, the hospital has been named one of the nation's 100 Top Hospitals® by Thomson Reuters, a leading provider of information and solutions to improve the cost and quality of health care.

This annual study evaluated performance at nearly 3,000 U.S. hospitals, reviewing data in 10 areas: mortality; medical complications; patient safety; average patient stay; expenses; profitability; patient satisfaction; adherence to clinical standards of care; post-discharge mortality; and readmission rates for heart attack, heart failure, and pneumonia.

"At Good Samaritan – and throughout the TriHealth system – we continue to raise the bar on integrating all aspects of our care," says John Prout, president and chief executive officer of Good Samaritan and TriHealth. "The *Thomson Reuters 100 Top Hospitals* award recognizes how effectively our physicians, employees, and community partners are working together to continuously improve clinical excellence that is focused on what's best for each and every patient, day in and day out."

Rudemiller Family Medicine joins TriHealth

One of the West Side's best known physician practices for more than 60 years, Rudemiller Family Medicine, has joined TriHealth Physician Practices. Formerly with Greater Cincinnati Associated Physicians (GCAP), Rudemiller Family Medicine is composed of four board-certified family medicine physicians: Mark W. Rudemiller MD, Robert J. Bennett MD, Toni L. Cottongim MD, and Stephen M. Winhusen MD.

Also affiliating with TriHealth from GCAP is Dale J. LaHue MD, board certified in internal medicine, who will be joining Queen City Physicians at their new location at Good Samaritan Medical Center – Western Ridge.





GOOD people doing GREAT things

Good Samaritan employees deliver compassionate care both on and off their jobs.

J. MICHAEL SMITH MD

J. Michael Smith MD, medical director, TriHealth Robotics Program, recently was named one of four Health Care Heroes for 2011 by the *Business Courier* of Cincinnati.

Selected from hundreds of deserving applicants, Dr. Smith was named winner in the Innovator Category for his leading-edge work with Good Samaritan's robotic-assisted surgery program.

Since bringing roboticassisted surgical technology to Greater Cincinnati in 2003, Dr. Smith has elevated TriHealth's program to leadership status nationally and internationally. He has recruited and trained physicians from elite hospitals worldwide, and was instrumental in the donation of two – and the purchase of five – robotic systems at TriHealth, in order to meet the demands for minimally invasive surgery in cardiothoracic, urology and gynecology.
Congratulations and thank you,
Dr. Smith, for your leadership
and dedication to Good
Samaritan and the people of
Cincinnati.

Health Care Heroes are recognized for making an impact through their concern for patients, their research and inventions, their management skills, and their service to the poor and uninsured.

COMPASSION | SPRING 2011

NEWS YOU CAN USE

Extending care beyond our borders

Of her third mission trip to a third-world country, Paula Niederbaumer CCNP, TriHealth Director of Nursing for Medical/Surgical and Behavioral Health Services said, "In spite of the anxiety of traveling to an unknown country, it is a pleasure to share my skills and knowledge with people who have no access to care. I see this as my role as a human being and a Christian- to extend to those less fortunate."

Powered by a desire to assist those in need, a 13-person medical team of physicians, nurses, students and a pharmacist recently traveled 1,600 miles to deliver medical care to residents of Haiti. Sponsored in part by TriHealth and Good Samaritan Hospital, the team included Niederbaumer, Good Samaritan Internal Medicine Residents Amar Bhati MD and Umasankar Kakumanu MD, Good Samaritan physician Richard Fry MD, pharmacist Janet Habedank PharmD, and nurses Anna Erdmann RN and Heather Morgan RN. The 10-day trip resulted in



much-needed medical treatment for nearly 1,300 Haitians, many suffering from malaria, dehydration and malnutrition. Following the aftermath of a devastating earthquake last year, the country's insufficient medical care is compounded by its lack of infrastructure, abundant rubble and open sewers. In addition to providing medical care each day, the group had Bible reflection each evening.

Putting women on the path to good health



IT'S TRUE. Women make the majority of health care decisions in a family. That's why it's important that women know how to keep themselves on the path to good health. They can do just that by attending seminars presented by TriHealth Spirit of Women®. Each seminar, presented by TriHealth expert physicians, is for women of all ages. Seminar topics include: pelvic health, pain management, cancer, diabetes and peripheral artery disease.

UP NEXT!

THE HOOPLA ABOUT PELVIC HEALTH Topics include peri-menopause, heavy periods, fibroids, urinary incontinence and a weak pelvis. THURSDAY, MAY 12, 6:30-8:30 p.m. **BETHESDA NORTH HOSPITAL**

THURSDAY, MAY 19, 6:30-8:30 p.m. NATHANAEL GREEN LODGE

Reservations required.

For more details, or to learn about other seminars and activities presented by TriHealth Spirit of Women, visit TriHealth.com/SpiritOfWomen, or call **513-569-5900**

SAVING LIVES, **REDUCING** HOSPITAL STAYS



Quality Matters

"We're not just assuming that a patient understands our going-home instructions. We are asking them to repeat information back to us to evaluate how much they understand information about medicines, activity, diet and physician follow-up. We also make sure that family members who are caregivers are there to receive education." - Marien Bryson RN

Marien Bryson RN uses a pill bottle as a teaching tool to ensure that patient Buddie Caudill understands the proper use and dosage of the medication he will take when he goes home.

s Good Samaritan continues to elevate its quality of patient care, Lethe hospital has noted significant achievements in recent months.

SAVING LIVES

Good Samaritan and Bethesda North hospitals are among 157 hospitals that recently completed a voluntary three-year project aimed at reducing health care spending and saving lives.

Participating hospitals saved an estimated 22,164 lives and reduced spending by \$2.13 billion compared to a control group designated from Medicare data. If all hospitals in the country had been able to achieve similar results, estimates indicate an additional 64,000 lives and \$23 billion could have been saved.

"I expected that we would lower our mortality rates, but seeing the numbers of lives we have saved is so much more real and rewarding to me," says Georges Feghali MD, TriHealth senior vice president for quality and chief medical officer.

Outcomes indicate that as hospitals increase use of best national practices and evidencebased care, both deaths and costs decline. The project, called QUEST: High Performing Hospitals, was conducted by the Premier health care alliance. For more details, visit Premierinc.com.

REDUCING HOSPITAL READMISSIONS

Good Samaritan is one of 17 Ohio hospitals selected to be enrolled in STAAR (State Action on Avoidable Rehospitalization), a national and state initiative designed to raise patient satisfaction and reduce readmission rates in the first month following hospital discharge.

STAAR is based on the premise that many hospital readmissions, especially of Medicare patients, are costly and avoidable. Good Samaritan was selected, in part, because of its success in reducing readmission rates of discharged congestive heart failure patients. The CHF/Navigator program follows up with a phone assessment of these patients and links them to community health resources, if needed.

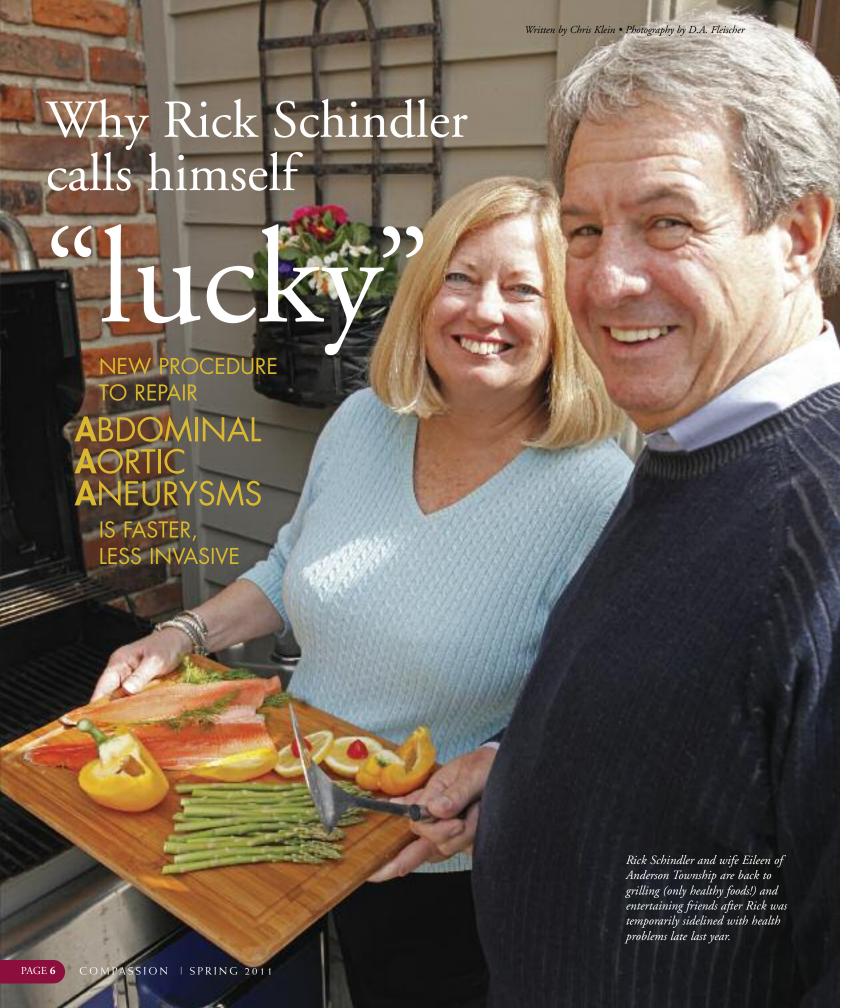
The STAAR initiative is being piloted on Good Samaritan's heart care units, where patients are educated using a specialized interactive teaching method to assess and enhance their knowledge of their condition and how to take care of themselves once they are home.

Marien Bryson RN, staff nurse on cardiac step-down, explains, "We're not just assuming that a patient understands our goinghome instructions. We are asking them to repeat information back to us to evaluate how much they understand — information about medicines, activity, diet and physician follow-up. We also make sure that family members who are caregivers are there to receive education."

She continues, "Our staff is trying hard to make sure patients better understand their conditions. Improved understanding puts patients more at ease, and they are not so overwhelmed about what they need to do when they go home."

It is anticipated knowledge gained from the new interactive teaching approach will spread gradually to all nursing units throughout TriHealth.

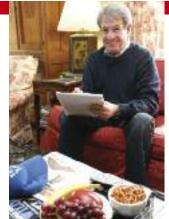
COMPASSION | SPRING 2011



☐ he way Rick Schindler sees it, if you're going to be laid up for a few weeks, it may as well be during March Madness. "I had plenty of time to watch NCAA college basketball and to make sure my tournament picks were solid," he laughs. Rick was thrilled when his favorite team, the Kentucky Wildcats, made it to the Final Four, and says, "With all that TV watching, I knew more about each of the teams than most of my fellow bracketologists!"

Even though Rick's tournament bracket didn't win him the cash prize (he came close!), he still considers himself lucky – very lucky.

Rick's always been lucky, he says. Great family, nice house, nice life. No complaints. In 64 years he had never spent a single night in the hospital. But that changed last November. "I had just gotten out of bed and was getting ready to drive to West Virginia for work," Rick remembers, "when my right leg started hurting." He wanted to ignore the pain and get on the road. But when the leg started going numb, "I had to fess up and tell my wife about it." Instead of heading to West Virginia that day, Rick headed to the closest emergency room. When doctors found a blood clot behind his knee, they recommended a transfer to Good Samaritan for treatment. There, Rick spent three days in the Intensive Care Unit while Vascular Surgeons Patrick Muck MD and Matthew Recht MD systematically removed the clot and inserted four stents from his groin to his knee. The stents (like tiny drinking straws) hold open Rick's arteries, which are narrow due to heredity.



Rick was lucky, he says. Things may have turned out differently if his leg pain happened after he was already on the road.

From routine to not-so-routine

"It was pretty routine," says Dr. Muck about treatment of Rick's blood clot. We don't want to rush treatment, so it can take a few days before the clot dissolves completely and we can insert

Not so routine was what the surgeons found next. During a CT scan to ensure the clot had cleared, they discovered that Rick had an abdominal aortic aneurysm (AAA) – a bulge in the aorta, the main artery that carries blood from the heart. If the wall of the aorta becomes weak, it will balloon. This balloon is called an aneurysm. Ruptured aneurysms are frequently fatal.

Like Rick, most people don't know they have an AAA. They typically are discovered during routine physical exams, or in Rick's case, during treatment for the blood clot behind his knee. Small aneurysms often are not treated. Instead they are monitored closely at regular check-ups. Larger aneurysms, like Rick's, pose more risk of bursting and usually require surgery.

Drs. Muck and Recht suggested Rick have his surgery in the next few weeks before his aneurysm had the chance to get much bigger. That left time for Rick and his wife, Eileen, to enjoy their annual two-week trip to Naples, Fla. where they relaxed with family and went fishing in the Gulf. "I was lucky that we didn't have to cancel the trip. Florida is a good place to be in the dead of the winter!" Rick says.

continued on page 8

	Traditional Open Surgery for Aneurysm Repair	Endovascular Stent Grafting
	 Incision is made in patient's side or abdomen 	 Requires only a tiny incision
	 Procedure lasts 2-4 hours 	 Procedure lasts 1-3 hours
	Patient under general anesthesia (unconscious)	 Patient is awake but sedated
	 Average hospital stay is 5-7 days 	 Average hospital stay is 3 days
	• Recovery time about 12 weeks	 Recovery time about 6 weeks

Good luck returns

Already a fan of Drs. Muck and Recht after they successfully treated his blood clot, Rick's good luck continued when it came to treatment of his AAA. These vascular surgeons, both from Queen City Surgical Consultants, were pioneering a new method of AAA repair, called endovascular stent grafting. The procedure is less invasive than traditional open surgery, requires less time under anesthesia, and results in a faster recovery. (See chart, page 7.)

Drs. Muck and Recht's experience with endovascular stent grafting is vast. Together they perform 100 or more procedures a year. They typically work in tandem, because as Dr. Muck explains, "four eyes are better than two, and four hands work more quickly than two, which is better for the patient."

Even luckier for Rick was the fact that, at the time of his surgery, Drs. Muck and Recht were the only vascular surgeons in the state using a new type of stent that provides even more advantages than traditional stents. "Traditional stents are like tiny pipes. This procedure is like putting a new, clean pipe inside of a pipe that is corroded. The new pipe allows the blood to flow freely," explains Dr. Muck. Traditional stents pose one problem. They cannot be repositioned. "So if the stent slips, or if the surgeon wants it in a slightly different place, he has to use a second stent to get the job done." Using more than one stent can get expensive, says Dr. Muck. Stents can cost several thousand dollars a piece.

The new stent that the surgeons used to repair Rick's AAA is what Dr. Muck calls "the next generation in minimally invasive AAA repairs." Nearly six inches long and ¾ inches wide, the device is shaped like an upside-down Y. (See illustration, page 7.) "The real beauty of it is that, if we aren't happy with the placement, it can be recaptured and repositioned until we are fully satisfied," Dr. Muck explains.

"The ability to reposition the new stent may minimize complications that could occur with using more than one stent," explains Dr. Recht. "It's one more safety feature for the patient."

In Rick's case, the surgeons were able to reach and repair his aneurysm by making just two half-inch incisions in Rick's groin. Because the incisions are so small, they heal much more quickly than traditional incisions that are customary with traditional open surgery.

Rick's anxious family was thrilled when the procedure went smoothly, lasting just one hour, 15 minutes. Afterwards Rick relaxed in his bed, and watched television while eating his dinner. "I was lucky. It was a textbook case and I felt fine."

Luck interrupted

It would be nice if Rick's stay at Good Samaritan ended following the AAA procedure. But his good luck temporarily took a backseat when, while still in the hospital, what he thought was indigestion turned out to be a heart attack. So instead of heading home, Rick was taken to the Cath Lab so a cardiologist could insert stents near his heart. "The bad arteries I was born with, combined with years of smoking in my youth, had taken a toll," Rick says.



Today, three months post-surgery, Rick's good luck has returned. He's back to swinging a golf club, doing yard work and preparing for lots of gettogethers with friends outside on their deck. "Eileen and I will be grilling a healthier menu now," says Rick who is following doctors' orders by eating better and exercising daily. "But I don't

think anyone will complain!"

For more information about endovascular stent grafting at Good Samaritan Hospital, call **513-865-5272**.





ABOUT AAA

WHAT IS IT? A bulge in the aorta, the main artery that carries blood from the heart.

WHAT'S THE CAUSE? The exact cause is unknown. Risk factors include:

- Smoking
- High blood pressure
- High cholesterol
- Male gender
- Emphysema
- Genetic factors
- Obesity

AAAs are most common in men age 60 or older, but anyone can develop one. They grow slowly over many years and typically have no symptoms.

HOW IS IT TREATED? Small AAAs often aren't treated, but "watched" at regular check-ups. Larger aneurysms require surgery. Traditional surgery requires a large cut in the abdomen. A newer, less invasive approach (like the one described here) is called endovascular stent grafting. The procedure is done by inserting stents (tubes) in the arteries. Unlike the traditional approach, it doesn't require surgically opening the abdomen. The result is a shorter hospital stay and faster recovery.

Vascular Surgeons Patrick Muck MD (at left) and Matthew Recht MD have pioneered a new method for repairing abdominal aortic aneurysms, called endovascular stent grafting, at Good Samaritan.

-Photograph by Tim O'Brien



The Good Samaritans' 27th Annual Gala – Diamonds and Denim – raised a goal-breaking \$427,000 to benefit Good Samaritan Hospital's Cardiovascular Robotic-Assisted Surgery Fellowship and the Medical Education Research Fund. The Robotic-Assisted Surgery Fellowship will be funded in each of the next two years.

More than 610 supporters of Good Samaritan's Foundation gathered at the Hyatt Regency Cincinnati,

where guests were treated to a cocktail reception followed by a gourmet southwestern themed dinner. After dinner in the Regency Ballroom, guests danced the night away to the sounds of Nashville's own Pat Patrick Band. In addition to line-dance instruction on the dance floor, guests were treated to a coffee bar, tequila tasting, old time candy display, instant photos and crystal laser etching.

PNC generously underwrote the dinner entrée and Turner Construction Company generously underwrote the hors d'oeuvres, salad and dessert courses and the table centerpieces at the event. Good Samaritan Hospital Medical and Dental Staff underwrote the cost of the musical entertainment. Corporate sponsors included AK Steel, Fifth Third Bank, Macy's, Phillips Supply Co., SC Ministry Foundation, Sisters of Charity and TriHealth, Inc. These substantial underwriting and sponsorship donations had a considerable impact on the fundraising efforts for this annual event.

The Good Samaritans is a dedicated volunteer organization of Good Samaritan Hospital Foundation and includes members with ties to the medical and business community. The Good Samaritans have raised more than \$4.8 million in their history. This year's Gala chairman was Susan Cranley and her co-chairman was Darlene Welling. They worked diligently with other Gala committee volunteers and with physician champions J. Michael Smith MD and Karen Gersch MD.



Dr. Richard Welling, Gala Co-Chair Darlene Welling, Gala Chair Susan Cranley, and Dr. James Cranley



CORPORATE UNDERWRITING

Entrée PNC

Hors D'oeuvres, salad/soup and dessert

Turner Construction Company

Event Entertainment

Good Samaritan Hospital Medical and Dental Staff

Cocktail Hour

Phillips Supply Co.

Katz, Teller, Brant & Hild

Wine with Dinner

Baker Concrete Construction, Inc.

Table Centerpieces

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Coat Check

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Palliative care and

hospice care help patients, families enjoy time together



To ease his grandchildren's fears when he lost his hair during chemotherapy, Jim Steinriede encouraged them to paint his head. Jimmy and Peyton delighted in the job.

kaleidoscope of images stream forth as Lynn Steinriede recalls her late husband's life: Jim losing his hair during chemotherapy treatment and letting their three grand-children paint his head so they wouldn't be afraid. Jim eager to go outside in the morning to tend the vegetable garden they had grown from seed. Jim taking long walks with his dog, Ben, throughout the three-and-a-half years Jim lived with colon and esophageal cancers.

"He was funny and loved to tell long, long stories. I wish you could have met him," Lynn says with a wistful smile. "You would not have guessed he had cancer." The Steinriedes were no strangers to cancer. Their daughter, Sherry, the oldest of three children, is a leukemia survivor, diagnosed seven years ago at the age of 26. "Jim said Sherry set the bar for him. She was remarkable."

A year ago, the family held a remission and retirement party, inviting friends and relatives to celebrate Sherry's recovery and Jim's retirement at age 56 as a pressman for the *Cincinnati Enquirer*. Jim continued cancer treatments throughout the summer and fall of 2010 while nourishing his soul with landscaping and gardening. In October, a pain in his chest led him to Good Samaritan Hospital where doctors found bloody fluid around his lungs.

The next day, Ranga Brahmamdam MD, trusted medical oncologist for Jim and previously for Sherry, recommended that Jim consult with Good Samaritan Hospital's Palliative Care Team and then enter hospice care.

"I didn't even know what palliative care was," Lynn remarks. "Then, Dr. [Amanda] Holbrook, an internist, came in to talk to us. She was wonderful, compassionate, caring. She sat down with us and made us feel like Jim was her only patient. She answered every question, not in a hurry to go anywhere."

Palliative care is a relatively new medical specialty focused on improving the overall quality of life for patients and families facing serious illness. Medical Director Manish Srivastava MD, summarizes the role of his Palliative Care Team. "We do two things: 1) focus on pain and symptom management, including nausea, vomiting, shortness of breath, appetite loss and fatigue, and 2) help families define their goals of care and then decide what treatments will help them reach their goals."

The approach to palliative care is similar to that of hospice care. Both focus on improving the quality of life and creating goals for the time remaining. Both are heavily focused on symptom management. However, palliative care has a broader base since it can be introduced at any point in the person's disease process, whereas hospice care is limited to the last six months of life.

Some patients receive symptom relief from palliative care while also getting curative treatment. For example, an acute leukemia patient may be receiving chemotherapy while "we aggressively manage symptoms," Dr. Srivastava explains. Palliative care, which Good Samaritan offers to inpatients, also may help provide a smooth transition to hospice care.

Once the Steinriedes discussed their options with Dr. Holbrook and the Palliative Care Team, they decided that Hospice of Cincinnati would be the best option for honoring their goals. "We wanted to keep Jim at home," Lynn says. "The only way we could have done that was with Hospice [of Cincinnati]." A nurse met with them in the hospital to arrange Jim's discharge home. Soon after, a social worker and two nurses from Hospice of Cincinnati came to their house. "After meeting them one time, I could feel a connection," Lynn recalls.

The Hospice of Cincinnati staff explained that following an initial visit, a nurse would come weekly, and more often if needed, to evaluate Jim and monitor his medications and control his pain. "We specialize in symptom management and comfort care," says Tracy Zazycki RN, BSN, who has worked both as a home care hospice nurse and currently in the Hospice of Cincinnati Blue Ash Inpatient Care Center.

"Hospice is a philosophy of care that offers spiritual, physical and emotional support at the end of life. We listen to the patient and family about what they want and what might improve their quality of life."

Jim's final day came just weeks after his return home from the hospital. Lynn remembers he felt well enough to take a walk around his yard with his grandson that November day. Later that evening, Jim was chilled and his breathing was sporadic. Lynn called her three children to come and be with him. "I called Hospice of Cincinnati, and they sent a nurse over to help us. The kids were there. The dog was there. The nurse made sure Jim was comfortable and restful." Jim died shortly afterwards – at home, with his family surrounding him – just as he wanted.

continued on page 14

Comfort continued from page 13

While Jim's need for hospice care developed suddenly, Hospice of Cincinnati provides care for six months or longer when a patient is in a slow decline and the progression of the disease, given its natural course, is expected to be terminal within six months. "The goal is to personalize care to each patient and family's needs so they can enjoy their remaining time together," Zazycki explains.

Lynn looks back six months later with praise for the many people who helped her family and the many prayers said. What would have been her 35th wedding anniversary recently passed, and she had dinner with her daughter and granddaughter and looked at her wedding photos. "We were happy. It was a good story – it just ended too soon."



Getting family input about their loved one's options and goals of care is at the heart of the work of Palliative Care Medical Director Manish Srivastava MD and Nurse Clinician Sandi Webb RN.

Understanding Palliative and Hospice Care

Palliative care is a medical specialty focused on improving the overall quality of life for patients and families facing serious illness. At Good Samaritan Hospital, it is provided to inpatients at any stage of chronic illness, even when the patient is receiving curative treatment. Emphasis is placed on symptom management, communication with the patient and family, and defining what quality of life means for them.

Palliative Care Medical Director Manish Srivastava MD explains that he and a palliative care nurse typically schedule a family conference and talk with a patient and family at length about their goals of care and their options. For Dr. Srivastava, "Communication is the main tool, like cardiologists have cardiac caths and gastroenterologists have endoscopies and colonoscopies."

If a person is considered to have less than six months of life remaining, the Palliative Care Team often refers patients to Hospice of Cincinnati, which provides comfort care as well as pain and symptom management for people in their homes, in long-term care facilities or in four inpatient care centers throughout Greater Cincinnati.

Both palliative care and Hospice of Cincinnati services are covered by Medicare, Medicaid and private insurance.

For information about palliative care, call 513-862-2864. For information on Hospice of Cincinnati, call 513-891-7700. To assist patients and families with end-of-life conversations, Hospice of Cincinnati is offering the free guide "Conversations That Light the Way." Call Patti Gaines at 513-792-7961 or e-mail Patricia Gaines@TriHealth.com.

Spirit of Compassion recognizes employees who made a difference

ood Samaritan Hospital Foundation's grateful patient program, Uthe *Spirit of Compassion*, offers patients and family members a way to say thank you to the special person who made a difference to them while they were in our care, and also support Good Samaritan Hospital, or the program of their choice. When a grateful patient



Pictured left to right: Tiffany Dill RN, Kate O'Hagan RN, BSN Nurse Manager Orthopedic Unit.

makes a Spirit of Compassion gift in honor of a staff member, nurse or physician, the Good Samaritan Hospital Foundation will deliver the note of thanks from the patient along with a Spirit of Compassion gift to commemorate the honor.

Good Samaritan Hospital employees who have been honored starting in July 2010 through January 31, 2011 are: Sally Bishop, Tiffany Dill, Jessica Jobert, Lori Johnson, Peggy Koenig, Alison Mirick, Father "Nick" (Gerald R. Niklas), Tina Nickoson, Carolyn

Left to Right: Sarah Godfrey RN, Barbara Davis, Kim Blanton, RN Nurse Manager Karen Valentine, Cindy Rahe RN, Kelley Gibson RN, Cindy Hinkle RN, Barb Johnson RN, Kristen Kingsley, Jane Schappacher RN



Robinson, Meg Stapleton, Sarah Sullender, the Orthopedic Unit, the Outpatient Cancer Care Center, and staff of surgeons, therapists and nursing care. Congratulations on a job well done!

For more information about the Spirit of Compassion program visit us at GSHFoundation.com/makeagift/gratefulpatients or call **513-862-3786**.

Foundation welcomes new board members

The Good Samaritan Hospital Foundation is pleased to introduce its newest Board members:



JANE BIRCKHEAD • After co-chairing the Foundation's 1999 Gala, Jane Birckhead was so "wowed" by The Good Samaritans' dedication to fundraising, she was eager to serve as one of the Foundation's newest Board members. "I have been on many foundation boards, but the fact that the Good Samaritan Hospital Foundation manages and distributes funds for one of the most remarkable institutions, humbles me," she says. "I have such respect for the hospital, its staff, and the Foundation."

Generous with her time and talents, Jane serves on numerous area boards. Of her decision to serve on Good Samaritan's Board, she says, "This is a Cincinnati landmark and destination where you are not a number." She is an executive vice president and partner at Hukill Hazlett Harrington Agency, a full-service independent insurance agency.

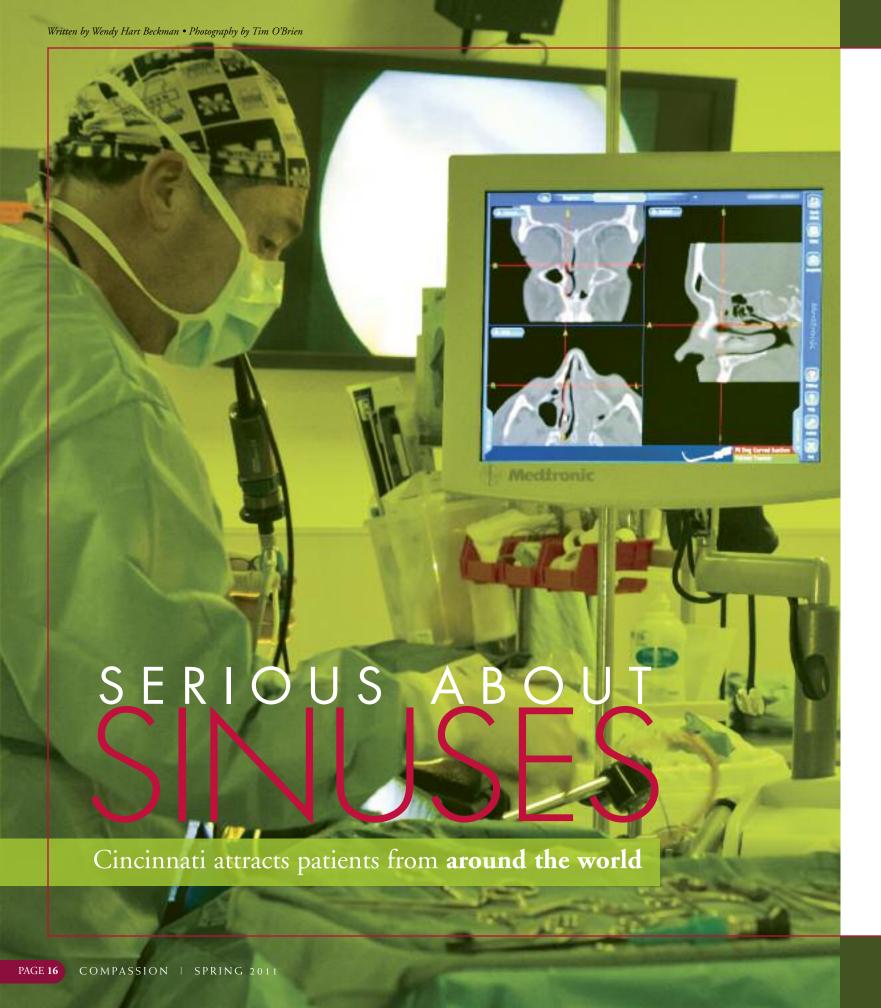


MIKE MICHAEL • As president and CEO of Fifth Third Bank (Greater Cincinnati), Mike Michael is more than a little familiar with what makes our region great. He understands the importance that quality health care plays in a community's vitality. To that end, he is happy to be serving as one of the newest members of the board of the Good Samaritan Hospital Foundation. "Good Sam is an extremely important community asset, and quality health care is one of the most important needs of any community," he states. "I'm excited to be affiliated with such an outstanding organization," he adds. At Fifth Third he is responsible for overseeing the day-to-day operations of the affiliate's five main businesses: Commercial Banking, Retail Banking, Consumer Lending, Business Banking and Investment Advisors.



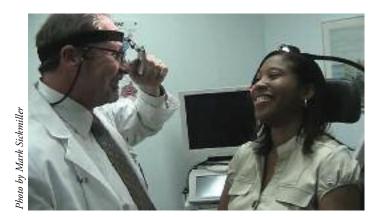
COURTNEY REITMAN-DEINLEIN • When she first saw the Neonatal Intensive Care Unit at Good Samaritan, Courtney Reitman-Deinlein was amazed. A good friend had a premature baby, so Courtney knew how important it was 'to provide families some sense of normalcy, warmth and compassion, while they watch their newborns battle the fight of their lives right from the start" she says. "The NICU environment along with the unmatched skilled care that families experience at Good Samaritan connected me immediately with the hospital."

Employed by Deloitte Tax LLP as a senior manager in the private client advisors Cincinnati tax group, Courtney also is the estate, gift, trust and charitable competency leader for the north central region of Deloitte Tax. Of her new position on the Foundation's Board, she says, "By serving as a trustee on the board, I can continue to serve those parents who are watching their child start off life with a battle."



y health is important to me," Nikita Carter, a native of Barbados, says. So like many of us, when she found herself with a physical ailment (she was losing her sense of smell), she sought the care of an experienced doctor in her area. However, unlike many of us, Carter was told by her doctor that he felt a specialist in another country with more expertise and access to better equipment and technology could provide her the best care.

Carter chose to follow her doctor's advice: she traveled more than 2,000 miles to Cincinnati to see Thomas Tami MD, founder of the Cincinnati Sinus Institute. The Cincinnati Sinus Institute is a Group Health Associates Physician Practice, affiliated with TriHealth, a partnership of Good Samaritan and Bethesda hospitals.



Thomas Tami MD consults with Nikita Carter who traveled from Barbados for sinus treatment.

The 25-year-old Carter first noticed she was losing her sense of smell in the fall of 2009 and dismissed it as a cold. After a month, however, with no improvement, she contacted her ENT. He performed surgery in February 2010 and was able to clear the maxillary and ethmoid sinuses, which lie toward the front of the skull behind the cheekbones and between the eye sockets, above the nose. However, he felt it was too dangerous for him to attempt surgery in the sphenoid sinus, which is located toward the center of the skull, and harder to reach.

Carter's physician thought the surgery would take the skilled hands and advanced technology of a specialist like Dr. Tami.

Carter's physician had known Dr. Tami for more than 10 years, after meeting Dr. Tami here in Cincinnati. It was because of their acquaintance that Dr. Tami was asked to be a featured speaker at an annual meeting of the Caribbean Association of Otolaryngologists.

The physicians had stayed in touch throughout the years, so when Carter's physician asked for help, Dr. Tami's response was immediate and affirmative. Carter trusted her ENT's judgment, so she flew to Cincinnati to meet Dr. Tami.

Carter had been diagnosed as having allergic fungal sinusitis: a severe inflammation of the sinuses due to an allergic reaction to mold.

"This allergic reaction to mold started producing thick, tenacious mucus," Dr. Tami explains. "The mucus gets trapped in the sinuses. The mucus buildup and inflammation then begins to erode the bone."

The area where Carter's problems persisted — the sphenoid sinuses — lay in the innermost portions of the skull, behind the nose and eyes.

"There's a lot of important stuff back there — the optic nerve, the carotid arteries, the pituitary gland and the brain itself," Dr. Tami says, "and there was no bone remaining between her sinusitis problems and all those critical structures."

Even from the first consultation, Carter felt instantly comfortable with Dr. Tami. Beyond his warm "bedside manner" and impeccable professional expertise, Dr. Tami had another asset on his side – advanced equipment – making Good Samaritan a great place to be a sinus specialist.

"One of the pieces of equipment I use is an image guidance system, which the Good Samaritan Hospital Foundation purchased for us with a grant," Dr. Tami says. "It was the only such system in the city at the time."

"I am very grateful to the Good Samaritan Hospital Foundation," Dr. Tami says. "The image guidance system made a huge difference for us. It definitely made a successful encounter for this young woman!"

continued on page 18



Nurse anesthetist Dan Benz is shown here with the Image Guidance System that allows physicians to safely locate and remove diseased sinus tissue.

This electromagnetic image guidance system allows the operating team to upload a special CT scan into the computer in the operating room. A special device is put on the patient's forehead after she is asleep and she is then calibrated and registered to the computer.

"As I'm doing the surgery, I can take various instruments and touch them anywhere I want in the sinuses,"

Dr. Tami says. "I can look up at the computer screen and see where the tip of my instrument is. This image guidance system is accurate to within one millimeter."

As a result of the images, the surgeon can be more aggressive in removing the infection or diseased tissue, and yet do it very safely.

"It tells me 'you're getting very close to the optic nerve, or the carotid artery," Dr. Tami says. "I can perform these complex sinus procedures with much more confidence and safety."

Dr. Tami offers kudos to the many departments who pulled together to provide care to Carter. There was an issue that Carter's insurance might not be comparable to American insurance coverage. But, Dr. Tami worked with the hospital, the radiology group, and his physician practice to cut through the red tape and ensure that she had the care she needed. He is additionally thankful for the technology available to him.

"I am very grateful to the Good Samaritan Hospital Foundation," Dr. Tami says. "The image guidance system made a huge difference for us. It definitely made a successful encounter for this young woman!"

Thomas Tami MD and his partner, Seth Isaacs MD, are part of Group Health Associates, a TriHealth physician practice. For more information, call **513-246-7000** or visit

CGHA.com/Specialties/Sinus.aspx

Seasonal allergies? Cold? Sinusitis? How to tell the difference:

Symptoms of Sinusitis

- A persistent headache in the forehead just above the eyebrows or right behind both eyes. You might have eyes that are puffier than normal, especially upon waking. (Migraines, on the other hand, often cause pain behind just one eye.)
- Facial pain. Soreness usually felt in the areas of the bone structure below the eye sockets.
- A mild sore throat that won't go away.
- Bad breath.
- Toothache, especially of the upper jaw and molars.
- Persistent nasal congestion. Viscous, discolored nasal discharge.
- Sensitivity to bright light.
- Inconsistent elevated temperature (99 to 100° F).
- Blocked ears, middle-ear infection.
- Symptoms can last for weeks.



Cold symptoms will usually subside within a week or two and usually do not include light sensitivity or facial and jaw pain. Allergy symptoms often will subside the farther the allergy sufferer gets away from the source: by going indoors, for example. Allergies tend to cause nasal discharge that is colorless and less opaque than that of sinusitis and colds. Allergy symptoms will last for weeks, or until the allergen source is removed.

And note: both allergies and colds can turn into sinusitis.

• What did the doctor say?

Personal web page keeps loved ones informed

- When are test results due?
- How are the patient's spirits?
- Should I visit?



ANK A NURSE!

In addition to the support it provides patients and loved ones, CarePages enables patients, family and friends to recognize and thank hospital staff. A link on the website enables visitors to make a donation to Good Samaritan's Friends of Nursing fund. This fund pays the cost of CarePages. Donations to the fund not only are a way to thank hospital staff. They also help ensure that CarePages will be available as a source of support for future Good Samaritan patients and their loved ones. For more information about the Friends of Nursing fund, visit GSHFoundation.com/CarePages.

Then a loved one is hospitalized, family and friends are left with plenty of questions. It's the waiting – and the wondering – that can be hardest.

- What did the doctor say?
- When are test results due?
- How are the patient's spirits?
- Should I visit?

They want to be supportive without being intrusive. A new service provided free to all Good Samaritan Hospital patients helps to bridge this communication gap. CarePages is a Web service that provides each patient a personalized website where they can share stories, post photos and update friends and family about their health progress. Located at CarePages.com/GoodSamaritanHospital, the websites are easy to create and manage. Ongoing updates via CarePages can relieve anxiety for loved ones who are unable to visit.

CarePages is as supportive for the patient as it is for those at home. The website enables loved ones to post encouraging messages for the patient, which can be a real boost during their health challenge. "Healing comes in many forms. We work very hard to take care of body, mind, and spirit. CarePages helps ease the mind and restore the spirit" says Good Samaritan Vice President and Chief Nursing Officer Mary Irvin.

Support doesn't end at discharge. A patient's CarePages website remains available, at no charge, as long as the patient and/or family maintains their CarePages site.

In the Resources section of the CarePages website, patients and loved ones can gain encouragement from the inspirational stories of others who have walked in their shoes. Caregivers will find discussion blogs and valuable advice on how to care for people with Alzheimer's, multiple sclerosis, cancer and other conditions.



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very year thousands of generous individuals make donations to the Good Samaritan Hospital Foundation. Your generosity enables the Foundation to fulfill our mission of ensuring compassionate care that will last a lifetime.

As much as we would like to do so, it is not possible to list here the names of every generous giver. Instead, on the following pages you'll find the names of our Lifetime Giving supporters who have donated to the hospital and achieved this special level of giving. Along with our Legacy Society members, their donations sustain a variety of life-giving programs and projects at Good Samaritan Hospital, from securing funds for delicate, high-tech robotic surgery equipment to supporting the hospital's Parish Nurses who provide extraordinary care to those in our community who need it most.

In this difficult economy, we are so appreciative of those who choose to support the Foundation. To everyone listed here, and to the thousands of supporters whose names do not appear, you have our heartfelt thanks.



Sincerely,

May Roffy

Mary L. Rafferty

President and Chief Executive Officer

Good Samaritan Hospital Foundation

Good Samaritan Hospital Foundation Wission Statement

The mission of Good Samaritan Hospital Foundation is to secure and steward philanthropic gifts which will ensure compassionate care that will last a lifetime.



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Good Samaritan Hospital Foundation is pleased to acknowledge and thank the special individuals, corporations, foundations and organizations who have made lifetime gifts of \$10,000 or more to Good Samaritan Hospital and our mission of providing compassionate care.

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