

PILOT

SUMMER 2006

ENH EVANSTON
NORTHWESTERN
HEALTHCARE

Evanston Hospital
Glenbrook Hospital
Highland Park Hospital
ENH Medical Group
ENH Foundation
ENH Research Institute



**Advancing Breast Cancer
Treatment in China**

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The Legacy of Philanthropy: Kellogg Cancer Care Center Celebrates 25 Years

The Kellogg Cancer Care Center at Evanston Northwestern Healthcare (ENH) will celebrate 25 years of caring in October. First established at Evanston Hospital in 1981 with a \$3.1 million gift from the J.L. and Helen Kellogg Foundation, two locations at Glenbrook and Highland Park Hospitals were subsequently added.

Combined with the volunteer drive of the late Jacqueline E. Kellogg, the philanthropic support of the Kellogg Foundation helped establish a premier center for cancer treatment. In 1983, the Center became one of the first National Cancer Institute (NCI) Community Clinical Oncology Programs. Over the years,

the Kellogg Cancer Care Center has grown from one small outpatient facility to three sites offering a full scope of hematology, oncology, radiation and surgical expertise. All physicians are fellowship trained and board certified, and all Center nurses maintain a valid national oncology nursing certification.

But what complements the medical excellence the Center provides is the vision of Jacqueline Kellogg—a deep commitment to the emotional and psychosocial well being of Kellogg patients and their families. “We already knew that our doctors and nurses provided quality care in quality facilities,” Kellogg once said. “The challenge was to give cancer patients and their families a place for treatment that was pleasant to visit and comfortable to stay in. We hope that this kind of atmosphere would lift our patients’ spirits and relieve some of their anxiety.”

With a dedication to patients and families, as well as a strong commitment to research, the Kellogg Cancer Care Center is continuing a legacy of caring that imbues each patient with personal strength.

For more information on how you can support the Kellogg Cancer Care Center with a gift to the 25th Anniversary Fund, please contact Allyson Regnier, Director of Development, at (224) 364-7207 or aregnier@enh.org.

Contributing to the nationally recognized cancer treatment at Evanston Northwestern Healthcare’s Kellogg Cancer Care Center are staff and physicians, including Elaine Bers (from left), patient registration supervisor; Grace Mungy, RN, staff nurse; and the Center’s Director, Janardan Khandekar, MD.



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Cover photo: Women rehearse a dance and exercise routine in Jingshan Park, Beijing.
Photo: Peter Charlesworth/OnAsia.com



Illinois Governor Rod Blagojevich at Evanston Hospital, announcing his new patient safety initiatives.

Blagojevich Praises ENH's Electronic Medical Records, Calls for Similar Patient Safety Initiatives Statewide

Because Evanston Northwestern Healthcare (ENH) has become widely recognized as a leader in patient safety and a pioneer in electronic medical records, Illinois Governor Rod Blagojevich chose Evanston Hospital as the setting for his July 13 announcement of new patient safety initiatives.

Gov. Blagojevich, State Rep. Julie Hamos, Dr. Eric Whitaker, Director of the Illinois Department of Public Health, and other local and state officials were given a demonstration of ENH's electronic medical records system. Members of the ENH community spoke about the ways we are improving information flow, reducing errors and better serving our patients through medical informatics.

At the hospital, the Governor signed an Executive Order creating a new Division of Patient Safety, which will consolidate the state's efforts for dealing with medical errors. He further proposed that, by 2011, all healthcare providers use "e-prescribing" to cut down on prescription errors.

ENH remains one of the few organizations worldwide using a fully integrated electronic medical records system that eliminates paper charts and assures all caregivers immediate access to complete, current information from anywhere within our system as well as at the physician's home. Such important features as computerized physician order entry, integrated care plans, safety alerts and nursing documentation make ENH's system a model for other organizations seeking to use technology to improve patient safety and clinical care. Our secure online patient portal, ENH*first* Platinum, also establishes us as a market leader in patient-centered care, with nearly 18,000 active patients currently able to view their medical records, make appointments, request prescription refills and send secure messages to their physicians from their own computers.

ENH Once Again Named Most Wired/Most Wireless

Evanston Northwestern Healthcare (ENH) has been named for the third consecutive year as one of the nation's Most Wired and Most Wireless hospital systems, according to the results of the 2006 Most Wired Survey and Benchmarking Study released in the July issue of *Hospitals & Health Networks*, the journal of the American Hospital Association.

"We are very honored to again be the recipient of this prestigious award, and we are proud of the accomplishments throughout our organization that got us this recognition," said Steve Foley, Assistant Vice President, Technical Services. "This award acknowledges the dedication and tireless effort of many employees. Our wired and wireless network has allowed ENH to operate its three hospitals and more than 70 physician-office locations without paper charts for more than three years," said Foley.

Hospitals & Health Networks has conducted the Most Wired Survey annually since 1999. The July cover story detailing the survey's results is available at www.hhnmag.com.



Alexander Named Head of Cardiothoracic Surgery

The Cardiovascular Care Center of Evanston Northwestern Healthcare (ENH) has announced the appointment of **John C. Alexander, Jr., MD**, as Head of the Cardiothoracic Surgery Program. Dr. Alexander helped establish and build cardiac surgery at ENH from 1984-1999. For the past seven years he has served as Chief of Cardiovascular Surgery at Hackensack University Medical Center.

"We are thrilled to welcome Dr. Alexander back to Evanston to further complement our team," said Tim Sanborn, MD, Director of the Cardiovascular Care Center. "He is a well-known and respected clinician who brings an established reputation to Evanston Northwestern Healthcare."

The cardiovascular care team comprises internationally renowned heart specialists, including clinical cardiologists, interventional cardiologists, electrophysiologists and cardiothoracic surgeons. Dr. Alexander is leading the surgical team that offers advanced valve repair and replacement techniques as well as surgical techniques for atrial fibrillation and con-

gestive heart failure. The interventional cardiology team, led by Ted Feldman, MD, Director of Cardiac Catheterization, offers non-surgical treatment as an alternative for patients for whom surgery may not be appropriate. Clinical cardiologists provide evaluation, diagnosis and management of a variety of cardiovascular diseases.

The physicians at the Cardiovascular Care Center work collectively to ensure a comprehensive approach to each patient's care. "Critical to each patient is a collaborative relationship between the heart specialists at Evanston Northwestern Healthcare and the cardiologists who manage their continuum of care," said Dr. Alexander. "We work as a team to treat the patient and provide leading-edge treatment options close to home."

Dr. Alexander earned his medical degree in 1972 from Duke University Medical School, where he also completed his internship, residency and a fellowship. He received an MBA in 1988 from Northwestern University's Kellogg School of Management.



John C. Alexander, Jr., MD

Evanston Hospital Reapplies for Level I Trauma Center Status

Evanston Hospital has notified the Illinois Department of Public Health's Division of Emergency Services and Highway Safety of our reapplication to change our trauma center designation



from Level II back to the more acute Level I. Glenbrook and Highland Park Hospitals will maintain their current Level II status.

"This decision, made after careful analysis and consideration, acknowledges the feedback we have received from patients, their families and elected officials in recent years that reinstating a Level I trauma center at Evanston Hospital is in the best interest of the surrounding communities," said Ray Grady, President, Evanston Hospital. To that end, Evanston Hospital has received commitments from four trained trauma surgeons who will provide 24/7 in-house coverage, as required by the Illinois

Department of Public Health.

Evanston Northwestern Healthcare also recognizes that the number of trauma patients in the North Shore area is greater than we initially estimated. "Trauma victims deserve to have the option of being taken to the nearest Level I Trauma Center without further jeopardizing their already compromised health by having to be transported longer distances," Grady noted.

Non-trauma patients who have historically utilized the services of the Emergency Department will continue to receive the same high caliber of care they have come to expect from Evanston Hospital.

Center Supports Clinical Trials

ENH's new Clinical Trials Center (CTC) is a central resource for any Evanston Northwestern Healthcare scientist who needs help launching a clinical trial.

The Center is led by Bruce Steinert, who holds a PhD in biochemistry and pathology from the University of Wisconsin, and who set up a similar clinical trials unit at Beaumont Hospital in Michigan. "We help researchers with contracting and budgeting," said Dr. Steinert. "We also can train their office staff about what to look for with research patients—sometimes their medical records or billing need to be handled differently," he said.

Dr. Steinert and his staff also are active in recruiting new studies to ENH. "We try to get a feel for what investigators want to study and then approach sponsors with similar interests," Dr. Steinert said. More than half of the clinical trials at ENH are sponsored by pharmaceutical companies or medical device manufacturers. CTC staff also maintain ties with contract research organizations (CROs), which



Bruce Steinert, PhD, with study coordinator Janet Beck, CT(ASCP), CCRP (left), and administrative assistant Monica Ferrin.

run studies on behalf of the sponsors. "Sponsors often delegate site selection to these organizations, so it's important to get your name in front of them."

With all this additional support, our research portfolio will grow. "We have 1,000 active research studies now," Dr. Steinert said. "We want to make

that 2,000." He expects to see more studies of cancer drugs, drugs for neurological conditions such as Parkinson's or Alzheimer's, as well as new antibiotics. Such studies will offer benefits to ENH patients, affording them early access to emerging drugs and devices.

ENH, Illinois Bone & Joint Partner in Ambulatory Surgery Center



Ravine Way Surgery Center LLC, a joint venture of Illinois Bone & Joint Institute and Evanston Northwestern Healthcare (ENH), recently opened its doors at 2350 Ravine Way in Glenview. The 8,500 square-foot ambulatory surgery center features three operating rooms, a new GE Signa MRI scanner and a Sports Medicine Clinic. The Center, located near Willow and Waukegan Roads, is designed to create a comfortable environment for patients while offering safe and efficient care. ENH and Illinois Bone & Joint Institute partnered in developing the Center in order to better serve patients in the surrounding community.

Attending the opening reception for the Ravine Way Surgery Center are: J.P. Gallagher, Senior Vice President, Hospitals and Clinics (from l.); Mark R. Neaman, President and CEO; Robert D. McMillan, MD, Senior Attending, Orthopaedic Surgery; David F. Beigler, MD, Senior Attending, Orthopaedic Surgery; James C. Kudrna MD, Senior Attending, Orthopaedic Surgery; Melody Winter-Jabeck, Administrator, Illinois Bone and Joint Institute.

New Technology Expected to Detect Colon Cancer Risk Earlier, Less Invasively

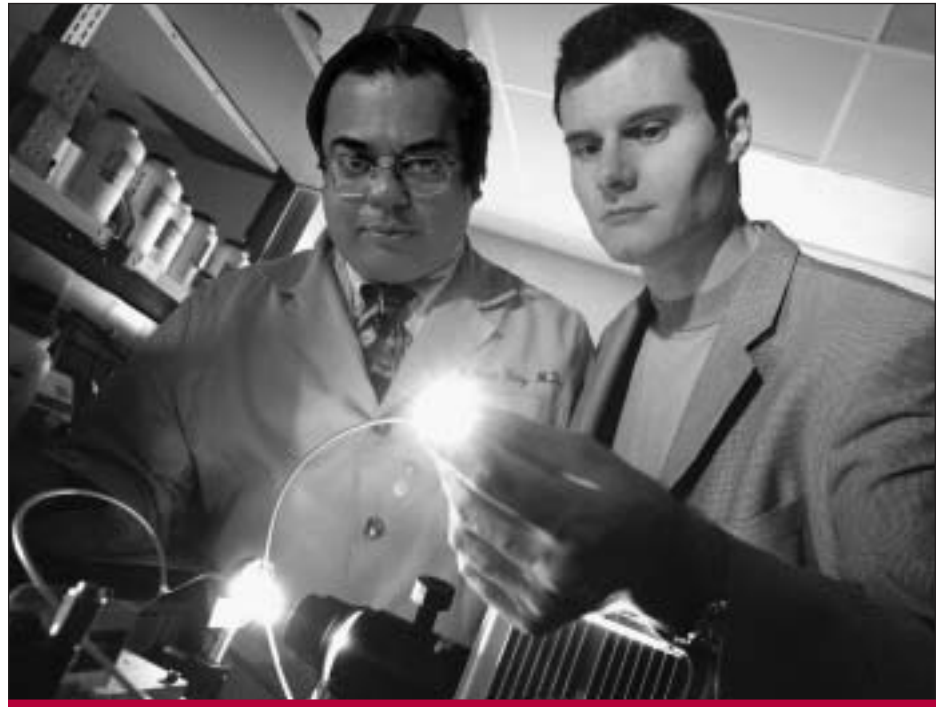
Vadim Backman, PhD, assistant professor of biomedical engineering at Northwestern University's McCormick School of Engineering and Applied Science, and **Hemant Roy, MD**, an attending physician at Evanston Northwestern Healthcare (ENH) and associate professor at Northwestern University's Feinberg School of Medicine, are testing a new optical technology to detect colorectal cancer in its earliest stages.

The researchers are conducting clinical trials of a revolutionary light probe developed by Backman. The probe uses technology called Four Dimensional Elastic Light-Scattering Fingerprinting (4D-ELF), which allows physicians to quantitatively analyze structures in human cells that are 10 to 20 times smaller than can be seen with microscopy. Sophisticated analysis of the light-scattering properties of cells lining the colon allows researchers to detect the earliest stages of colon carcinogenesis, enabling them to identify which patients will develop colon polyps before polyps actually form.

Because the 4D-ELF technology can predict the presence of carcinogenesis anywhere in the colon based solely on a measurement of rectal tissue, the test can be performed using a miniature fiber-optic probe inserted in a manner similar to taking a rectal temperature. If carcinogenesis is detected, a colonoscopy would still be required to locate and remove any polyps.

Current data collected from more than 200 patients indicates that 4D-ELF analysis has more than a 90 percent accuracy rate in identifying risk of colon polyps/cancers.

Drs. Roy and Backman envision that one day this technology could be used by physicians during an annual physical exam. "We believe that the 4D-ELF probe will be a less intrusive and highly accurate means of screening



Hemant Roy, MD (left), and Vadim Backman, PhD, are testing their new light probe's effectiveness in detecting colorectal cancer in its earliest stages.

for colon cancer, the second leading cause of cancer death among Americans" explained Dr. Roy.

Said Backman, "Our hope is that, similar to the way the Pap smear drastically reduced deaths from cervical cancer, this new technology could do the

same when it comes to colon cancer." While the technology is still in the clinical trial phase, Dr. Michael Goldberg, head of gastroenterology at Evanston Northwestern Healthcare, said it could be available to ENH patients within five years.

September Colon Cancer Screening Campaign

As part of its ongoing efforts to promote the prevention and early detection of colon cancer, Evanston Northwestern Healthcare is conducting a colon cancer screening campaign throughout the month of September. In addition to regular hours, special Saturday appointments will be available. To schedule a screening colonoscopy, call 1-888-364-6400.

Special Saturday Colonoscopy Appointments:

Sept. 9	Highland Park Hospital GI Lab
Sept. 16	Vernon Hills GI Lab
Sept. 16	Evanston Hospital GI Lab
Sept. 23	Evanston Hospital GI Lab
Sept. 30	Glenbrook Hospital GI Lab

Advancing Breast Cancer Treatment in China



ENH doctors and nurses train their Chinese colleagues in treatment techniques as part of a groundbreaking research project.

China, the world's most populous nation, is often referred to as the awakening dragon, and it's not hard to imagine why. With an economy on the march and a population on the move, China stands poised to transform the global marketplace, reinvent business culture and—thanks to the collaborative efforts of the American Cancer Society (ACS), the Chinese Anti-Cancer Association and a group of Evanston Northwestern Healthcare (ENH) doctors and nurses—reverse its cancer survival rates and change how breast cancer is detected in women around the world.

Currently, there is almost no breast cancer screening in China, and the disease is one of the leading causes of death

among Chinese women. But a groundbreaking new effort, known as the China Million Women Study, aims to establish a life-saving early-detection program and educate Chinese physicians in the latest treatments for breast cancer.

The study is the brainchild of **Stephen Sener, MD**, ENH Vice Chairman of Surgery, professor of Surgery at Northwestern University's Feinberg School of Medicine, and immediate past-president of the ACS. Earlier this year, Dr. Sener brought a team of 12 ENH doctors and nurses to Beijing for the first annual Chinese-American Surgical Oncology Week. There, the team met doctors from China's 76 cancer hospitals and shared the latest developments in >>

PHOTO ABOVE:

Back row, from left: Timothy J. Kennedy, MD, Chief Resident, General Surgery; Ermilo Barrera, Jr., MD, Senior Attending Physician, Surgical Oncology; Joseph Szokol, MD, Senior Attending Physician, Anesthesiology; David J. Winchester, MD, Senior Attending Physician, Surgical Oncology; Stephen F. Sener, MD, Vice Chairman of Surgery; Christy Russell, MD, Medical Oncologist, University of Southern California

Hospital; Malcolm Bilimoria, MD, Attending Physician, Surgical Oncology. Front row, from left: Yulia Voytekunas-Antonson, RN, Surgical Technician; Viola Gilman, RN, Staff Nurse; Marsha Lee Pearlman, RN, Perioperative Case Manager; Jesse Marymont, MD, Senior Attending Physician, Anesthesiology; Karen Joy Hamlett-Kleinhenz, RN, Nurse Anesthetist; June Chan, Manager of East Asia Programs, American Cancer Society; Elizabeth E. Drezek, RN, Staff Nurse.

detecting and treating breast cancer.

Already, the study is having an impact on the health and well being of many Chinese women. And when it is concluded, the study will provide researchers around the globe with invaluable information on how best, and how often, to screen women for breast cancer. “This will be a landmark study with universal, worldwide implications,” said **Joseph Szokol, MD**, ENH Vice Chairman of Anesthesiology and an associate professor of Anesthesiology at the Feinberg School of Medicine. “There is really nothing to compare to this.”

Laying the groundwork

The roots of the China Million Women Study date back to November 2003, when Dr. Sener traveled to China as part of an ACS delegation. Although the country was quickly coming up to speed in terms of medical facilities and high-tech treatments, Dr. Sener observed that it still lagged when it came to disease prevention and early detection.

“China under Mao was very reactionary and so made almost no advances in medicine during that time,” he said. “So China is very young when it comes to forward-thinking programs.” In fact, there is almost no screening—for cancer, diabetes, hypertension or any other diseases, according to Dr. Sener.

But China is eagerly playing catch up, and Dr. Sener realized the time was ripe to suggest a shift in focus. With 500,000 cases of breast cancer diagnosed each year (most in advanced

stages), and a five-year survival rate of just 40 percent, a screening program for early detection of breast cancer seemed a logical place to start. Dr. Sener proposed his idea to the head of the Chinese Anti-Cancer Association, and planning for the Million Women Study was soon under way.

Worldwide implications

In April 2005, mobile mammography buses—specially outfitted with the most advanced digital equipment—began traveling to factories, stores and other places of employment. The buses will screen one million Chinese women every 12 or 18 months over the next five years.

The women will be screened using both mammography and ultrasound technology. In the United States, most women are screened with mammograms, but mammograms can result in false negatives, especially in younger women, according to Dr. Sener. “If you look at the last 4,000 breast cancers we’ve taken care of [at ENH], 20 percent of those women had false negatives with mammograms,” he said. “My proposition was to take young women, which is where mammography has the most trouble, and add another screening [ultrasound] to test the incremental yield of ultrasound with mammography.”

The study also will help researchers determine how much time should pass between screenings. In the United States and other parts of the world, women over 70 are screened once a year. Some physicians think such frequent



While in China, ENH physicians and nurses demonstrated a variety of surgical techniques. Here, Drs. Bilimoria and Barrera perform a gastrectomy while a Chinese surgeon observes.



Perioperative Case Manager Marsha Pearlman scrubs in with Chinese operating room nurses at Beijing Cancer hospital before assisting in a colon resection.

screenings are unnecessary, and that a screening once every 18 months is adequate in women 50 and older. By screening some Chinese women at 12 months and others at 18 months, researchers can determine the best interval for screenings, Dr. Sener explained.

Finally, because breast cancer tends to strike more young women in China, the study will teach researchers about the nature of cancer in young women. In the United States, breast cancer rates are highest in women ages 60 to 69. But in China, rates are high in women ages 40 to 49 and ages 60 to 69. “I think we’re actually going to find a different kind of tumor in this age group of women, and I’m looking at this as a tumor biology lesson,” Dr. Sener said. Studying this population could lead to breakthroughs in prevention and treatment, he added.

“We are going to learn a great deal from this study,” agreed **Ermilo Barrera, Jr., MD**, head of surgery at Glenbrook Hospital and assistant professor of Surgery at the Feinberg School of Medicine. Dr. Barrera also sits on the ACS national board of directors and was a member of the China team. “The data that this study will generate will benefit women throughout the world.”

Teaching, sharing and learning

Chinese officials expect 6,000 new cases of breast cancer to be diagnosed as a result of the study. But China’s healthcare system is more used to treating advanced cases of breast cancer, and its doctors are not current in leading-edge treatments for

early-stage cancer—which is why Dr. Sener organized the Chinese-American Surgical Oncology Week.

Accompanying Dr. Sener on the weeklong mission were Drs. Szokol and Barrera, Jesse Marymount, MD, Malcolm Bilimoria, MD, David J. Winchester, MD, Timothy Kennedy, MD, Karen Joy Hamlett-Kleinhenz, RN, Elizabeth Drezek, RN, Yulia Voytekunas-Antonsen, RN, Viola Gilman, RN, and Marsha Lee Pearlman, RN.

Pearlman, perioperative case manager at ENH, had a personal interest in joining Dr. Sener in China: She is a breast cancer survivor and credits early detection with her recovery. “Having had breast cancer, and having the fortune of being a survivor because of early detection, I felt like I had to be part of this study,” she said.

While in China, Pearlman and the rest of the team provided Chinese doctors and nurses with a crash course in minimally invasive procedures, such as lumpectomy, which removes the cancerous tumor but leaves most of the breast intact, and sentinel node biopsy, which helps doctors determine if the cancer has spread beyond the breast. These lifesaving procedures, combined with the early detection, are expected to boost China’s five-year breast cancer survival rate to about 85 percent, and will go far to improve patients’ quality of life.

In a traditional lymph node dissection, for example, up to 15 lymph nodes are removed from under the arm. Recovery can be painful and slow, and up to 10 percent of patients experience lymphedema, or chronic pain and swelling, in the arm. >>



Sally West Brooks, RN, MA, 2005-2006 Chair of the National Board of Directors, American Cancer Society (second from left), visits Peking University School of Nursing with ENH nurses Yulia Voytekunas-Antonsen (from left), Marsha Pearlman and Viola Gilman.



At a Winter Palace dinner, hosted by the ENH and ACS visitors for their Chinese counterparts, Marsha Pearlman (fourth from left) is flanked by two waitresses in traditional dress and fellow nursing professionals

In a sentinel node biopsy, an injected dye helps doctors identify and analyze the lymph node nearest to the tumor site. This allows doctors to determine more accurately whether the cancer has spread—and to leave unaffected nodes intact, greatly reducing recovery time, pain and risk of lymphedema. Evanston Hospital was one of the first in the Chicago area to perform sentinel node biopsy, and ENH remains at the forefront of minimally invasive surgical care.

“This institution [ENH] has been one of the leaders in sentinel node biopsy,” said Dr. Szokol, “and it’s interesting to watch as it spreads out from here, across the country and now across the globe.” Indeed, while in China, Dr. Sener and colleague David J. Winchester, MD, performed a sentinel node biopsy before a live audience of 200 Chinese doctors watching on closed-circuit television.

Lasting impact, lasting relationships

Out of the operating room, the ENH team presented and heard lectures, and met with medical and nursing students at Peking University. During these small-group meetings and lectures, the doctors and nurses were able to forge personal relationships with their Chinese counterparts. Pearlman, for example, remains in e-mail contact with several nurses from the Beijing Cancer Hospital, and paid, out of her own pocket, for two nurses to join the Association of periOperative Registered Nurses (AORN). She also plans to help them start a local

AORN chapter and hopes—someday—to establish an exchange program between Peking University nursing students and those at Chicago-area institutions.

Likewise, Dr. Sener would like to establish a formal exchange program between the Chinese cancer hospitals and ENH and Northwestern University. “We have an opportunity to have an imprint on surgical thought in a country of 4 billion people,” he noted. “That’s a powerful and exciting responsibility, and the way you do that is to create an ongoing educational program to train their surgeons.”

At the very least, the doctors and nurses agree, there may be opportunities for more trips to China, as the country begins to recognize the importance of early detection and adopts more screening programs. Already, Dr. Sener is speaking with his Chinese counterparts about a cervical-cancer screening program.

“Hopefully the success of this program will convince the Chinese health ministry and the people responsible for setting healthcare policy that early detection is valuable to the Chinese society,” said Dr. Barrera. “It will have a big influence on the future of China.”

At the same time, the data gathered through this landmark study, and the exchange of ideas between ENH doctors and nurses and their Chinese counterparts, may very well influence cancer detection and treatment practices here in the Chicago area and around the world.



Flanked by their Chinese colleagues at Beijing Cancer Hospital are ENH surgeons Timothy J. Kennedy (from left), Malcolm Bilimoria and Ermilo Barrera, Jr.



From left: Dr. Christy Russell, Yulia Voytekunas-Antonsen, Karen Hamlett-Kleinhenz, Marsha Pearlman, a Chinese colleague, Viola Gilman and Elizabeth Drezek,

ENH Performance Measures a Mouse Click Away



Key measures of quality and patient-safety performance at Evanston Northwestern Healthcare are now publicly available at www.enh.org/aboutus/quality.

This new section of the Evanston Northwestern Healthcare (ENH) Web site is designed to give visitors a snapshot of how well ENH is performing and what we're doing to drive further performance improvements. "There's an increasing amount of information available to the public about hospitals' performance," said Alan Peres, Director of Disease Management at the ENH Research Institute's **Center on Outcomes, Research and Education (CORE)**, who helped develop and updates the pages. "Articles in the general press often portray hospitals as doing anywhere from not enough to nothing at all to improve quality and patient safety. At ENH, we have many projects under way or in planning. It's important for us to say, 'This is what we are doing; we're working to make care better.'"

The site includes access to:

- **Performance measures** – Numeric information about ENH performance and how it compares to national averages in key clinical areas such as heart attack care, heart failure and community-acquired pneumonia. Visitors can click to view a bar graph of ENH performance on a specific measure over the past several calendar quarters, as well as a statement of our goals for that measure. The measurements reported in this section come from data that ENH and other hospitals are required to provide to the Center for Medicare and Medicaid Services (CMS).
- **Accreditation & Certifications** – "Most people who work in our facilities are very aware of the Joint Commission on Accreditation of Healthcare Organizations," noted Peres. "But we're not all aware of the many different areas, such as our labs and cancer programs, that are accredited and certified." This page lists some of the ENH clinical areas and programs that have been accredited by their respective professional organizations, and offers links to those organizations' Web sites.
- **Patient Safety** – General information about patient safety issues, descriptions of regional and national organizations (e.g., Leapfrog Group, HealthGrades) that are leading efforts to improve patient safety, and opportunities to learn about how we're continually improving patient safety at ENH.



- **Related Sites** – Links to the Web sites of organizations that study or provide resources related to quality of care and patient safety.
- **Quality Improvement Plan** – An executive summary of ENH's 2006 Corporate Performance Improvement Plan.
- **Awards and recognition:** Information about and links to the Web sites of organizations that have recognized ENH with national and regional awards.

Peggy King, Senior Vice President, Risk Management, under whose auspices the pages were developed, says making our performance statistics public is the right thing to do; it's a way to partner with our communities. "We want people who are choosing a provider to know how we do what we do and what our priorities are," said King. "We also want to put the information in perspective. There are a lot of different Web sites out there offering hospital quality data. With our site, we've put it all together in a place where it's easy for members of the community to see it and understand it."

Perhaps more important is the fact that we're continually acting to improve our performance measures even as we report them. "One of our performance improvement goals is to know and understand our data before anyone else does," said King. "We don't submit data and wait for someone else to tell us what to do about it. We pull it, we respond to it, and we post it."

A Hip for the Younger Generation



Credit: Smith & Nephew Orthopaedic Reconstruction

Skokie dentist Michael Goone, DDS, likes to stay current on new techniques to preserve or restore his patients' teeth. So it's no surprise that he took the same approach to researching treatment for his own deteriorating right hip. "I'd been dealing with hip pain for about 10 years," said Dr. Goone, who is now 49. "I did everything I could to avoid having surgery for as long as possible. I tried chiropractic treatment, acupuncture, physical therapy—and just ignoring the pain." Dr. Goone knew, from talking to his patients who had undergone hip replacement surgery, that the implanted joints wear out over time and require replacement. And while the devices may last 20 years or longer, the higher activity levels of younger patients can lead them to wear out faster.

So he held on and held out, looking into other treatment options. He saw a television news segment on hip resurfacing—a more conservative approach—but the procedure hadn't been

approved in the United States. He consulted with a specialist in arthroscopy, a minimally invasive procedure involving miniature cameras and surgical tools inserted through tiny incisions, but learned it wouldn't be beneficial in his case. Finally, Dr. Goone relented and began asking for referrals to a hip-replacement surgeon. "My patients all raved about Dr. Kudrna," he said.

Dr. Goone made an appointment with orthopaedic surgeon **James C. Kudrna, MD, PhD**, of the Illinois Bone and Joint Institute in Glenview, Ill. Dr. Kudrna, a senior attending physician at Evanston Northwestern Healthcare (ENH), and assistant professor at Northwestern University's Feinberg School of Medicine, agreed that hip replacement was Dr. Goone's best hope for pain relief and a return to mobility, and scheduled him for surgery at the end of June.

A few weeks before the surgery, while Dr. Goone was attending a pre-surgery patient-information session, Dr. Kudrna called him to his



Left: Michael Goone, DDS, has a follow-up visit with surgeon James C. Kudrna, MD, several weeks after undergoing hip resurfacing.

Above: The Birmingham Hip Resurfacing System

office and delivered some surprising news. “He told me that the FDA had approved the more conservative hip resurfacing procedure a few weeks earlier and, based on my X-rays, I was a candidate,” said Dr. Goone. Was he interested? “Absolutely.”

Hip replacement vs. hip resurfacing

The hip is a ball-and-socket joint: a round ball at the head of the femur, or thigh bone, fits into the curved socket of the pelvis, where it swivels easily. When a disease such as arthritis wears away the smooth cartilage lining the pelvic socket, the resulting bone-on-bone friction causes debilitating pain and limits range of motion.

In a total hip replacement (fig. 1), the surgeon cuts off the head of the femur and replaces it with a prosthetic metal head. The head sits atop a long metal stem that is inserted several inches into the femur. A new socket or cup (until now made of polyethylene, although increasingly metal is used) is inserted into the pelvis.

In hip resurfacing (fig. 2), the surgeon reshapes the head of the femur, leaving more of the bone intact, and caps it with a new ball made of extremely smooth and durable high-carbide cobalt chrome. A socket made of the same material is fitted into the pelvis. The outside of the socket has a textured surface, which is coated with a material that encourages the patient’s own bone to grow into and fuse with the prosthetic joint for added stability.

While the design and material of this particular device are new—and newly approved by the U.S. Food and Drug Administration (FDA)—the procedure itself is not. “I used to perform the procedure in the 1970s and 80s,” explained Dr. Kudrna. “At that time, the joint we used consisted of a metal ball and a plastic socket. But the plastic socket wore, and the device would fail.”

Surgeons stopped performing the procedure, but researchers “continually looked for a way to repair hips with less bone removal,” said Dr. Kudrna.

The new device, called the Birmingham Hip Resurfacing (BHR) system, is designed to be much more durable. “It’s a very hard material,” said Dr. Kudrna. “That, combined with the fact that it uses a larger ball than in the previous procedure, means that overall there’s less wear.” The larger ball size also reduces the possibility of the joint being dislocated, a small risk that accompanies traditional hip-replacement surgery.



FIG. 1: X-RAY, TRADITIONAL HIP REPLACEMENT



FIG. 2: X-RAY, HIP RESURFACING

The BHR system has been in use in the United Kingdom for more than 10 years, where more than 100,000 patients have undergone the procedure. Based on his experience with the metal-plastic approach, as well as his extensive record and reputation with hip-replacement surgery, Dr. Kudrna was a likely choice to begin performing hip resurfacing. He traveled to the U.K. for training and is currently one of only a few dozen U.S. surgeons approved to implant the device.

Right place, right time

Michael Goone’s years of waiting—and enduring the pain—until a new treatment option became available ended on June 23, when Dr. Kudrna performed a hip resurfacing procedure at Glenbrook Hospital. “After the surgery, Dr. Kudrna talked to my wife and said he didn’t know how I was even walking before,” said Dr. Goone. “He’d found a lot of bone-spur formation that limited my mobility.”

Three weeks after the procedure, Dr. Goone was getting around with the help of a cane, taking longer walks each day and looking forward to a full recovery.

“This procedure is ideal for younger patients—60 and under—who don’t have major deformities,” said Dr. Kudrna. (In older patients, where the femur may be thinner or more susceptible to fracture, a total hip replacement is more appropriate, as the long stem of the prosthetic joint reinforces the bone.)

The larger ball and reduced risk of dislocation mean patients with the new prosthetic joint can lead active lifestyles. Patients who’ve had hip resurfacing in the U.K. have successfully returned to such demanding activities as kickboxing, distance running and mountain climbing.

Given the improved durability of the prosthetic joint, the length of time before a repeat procedure may be necessary is expected to increase. Should a second surgery be needed, the conservative nature of hip resurfacing leaves the surgeon more bone to work with. “If the patient needs a revision later on, we can cut off the [prosthetic] cap, including the ‘neck’ of the femur, and do a primary hip replacement,” said Dr. Kudrna.

Ultimately, the benefits of the new procedure offer younger patients like Dr. Goone an alternative to living with incapacitating pain. Asked what he was most looking forward to being able to do after his recovery is complete, Dr. Goone said, “Just being able to walk without pain. Anything beyond that will be a blessing.” Then he paused to consider greater possibilities. “It’s been three years since I’ve been able to ride a bicycle. I’m hopeful to be able to do that again.”

“Community benefit” is more than just the free medical care Evanston Northwestern Healthcare (ENH) provides to people who are unable to pay. It encompasses a broad spectrum of health programs and medical services that improve the health of our communities, but for which we receive little or no payment.

Extending Care into our Communities: Highlights from our 2005 Community Benefit Report

We offer these services, such as trauma centers, mental health care, community clinics and educational programs, simply because our community needs them.

We care for patients in government-sponsored programs such as Medicare, but the payments we receive don't cover the cost of providing the care. We absorb the difference as a form of community benefit.

Other important parts of our charitable mission are to educate the physicians of tomorrow, and to conduct medical research that furthers the state-of-the-art of healthcare. Teaching hospitals like ours subsidize these programs because of their obvious importance to the future of medicine.

Here is a partial list of the community benefits provided by ENH in fiscal 2005.

- Charity Care: **\$8,396,168**
- Language Assistance Services: **\$395,064**
- Government Sponsored Indigent Healthcare: **\$81,858,245**
- Donations: **\$269,929**
- Volunteer Services: **\$1,451,631**
- Education: **\$12,262,257**
- Research: **\$5,123,000**
- Subsidized health services: **\$12,382,864**
- Bad debts: **\$17,944,000**
- Other community benefits: **\$1,228,596**

Total financial value of reportable community benefits under the Illinois Community Benefits Act: **\$141,311,754**

Following are just a few examples of the programs and services we have supported in the past year.

- Due to budget cuts in 2004, Evanston/Skokie District 65 was forced to eliminate many after-school athletic programs and turned to the McGaw YMCA for help.

With the help of a \$5,000 contribution from Evanston Northwestern Healthcare, the Y's after-school programs are used by more than 500 children today.

- ENH's contribution of \$340,000 supports the Evanston Township High School Health Center, which is staffed by an ENH physician, two nurse practitioners and a social worker.
- The “Live Well, Work Well” program offered reduced-cost screenings to teachers in Glenview School Districts 31 and 34.
- ENH physicians and residents provided sports physicals to middle school students who were on financial assistance and otherwise would not have been able to participate in extracurricular sports.
- Healthy Highland Park/Highwood was created by Highland Park Hospital, the City of Highland Park, Park District of Highland Park and community volunteers. The program provided three free health screenings and education programs to residents of Highland Park and Highwood.
- Highland Park Hospital partners with Family Services of South Lake County and School District 112 to provide school and sports physicals, lead screenings and immunizations to un/underinsured students.



To obtain a copy of the full 2005 Community Benefit Report, contact Mark Schroeder, Director of Community Relations, at (847) 570-1867 or mschroeder@enh.org.

Chairman's Tribute Dinner Celebrates Success of The Campaign for Evanston Northwestern Healthcare

At the Chairman's Tribute Dinner held on May 10, Evanston Northwestern Healthcare (ENH) Board Chairman William Davis announced that The Campaign for Evanston Northwestern Healthcare had reached its original fundraising goal of \$100 million 16 months ahead of schedule. As a result, the ENH Board of Directors and the ENH Foundation have recommitted themselves to raising an additional \$50 million beyond the original goal.

"Continued support will further strengthen the Centers of Excellence, with an added emphasis on the ENH Research Institute and planned new surgical suites and intensive care unit at Evanston Hospital," noted Davis. The Campaign will provide the critical resources necessary to continue to expand "world class care close to home," with a focus on enhancing seven Centers of Excellence: Advanced Diagnostic Imaging, The Kellogg Cancer Care Center, Cardiovascular Care, Gastroenterology, Maternal/Child Health, Medical Genetics and Neuroscience.

More than 300 people attended the Tribute Dinner at Northmoor Country Club, where Master of Ceremonies Bill Kurtis honored doctors and leading community donors for their generous gifts to The Campaign for Evanston Northwestern Healthcare. "You are fortunate to have the healthcare resources of Evanston Northwestern Healthcare in your communities, and you are even more fortunate to have a strong coalition of donors who support it," he said. "I congratulate you on your success."



Hamid Band, MD, PhD (from left), and Vimla Band, PhD, celebrated The Campaign's success with ENH Board of Directors Vice Chairman Connie Duckworth and her husband, Tom Duckworth. Dr. Vimla Band holds The Duckworth Family Chair of Breast Cancer Research.



Television journalist and producer Bill Kurtis (from left), Katie Easton and William K. Johnston III, MD.



ENH Foundation Board Chairman John H. Walter and wife Carol.

Hospitals' Galas Establish Center for Inflammatory Bowel Disease

Largely through the efforts of **The Auxiliary of Evanston Northwestern Healthcare (ENH)** and patients grateful for the care they received from ENH physicians, the Division of Gastroenterology has raised nearly \$1 million to establish The Center for Inflammatory Bowel Disease (IBD). In addition to last year's Hospitals' Gala, which raised \$570,000, the Auxiliary's 2006 Gala raised nearly \$450,000 to create the new Center. (For more information about the Hospitals' Galas, see opposite.)

"We are extremely grateful for this two-year commitment from the Auxiliary, because in our community the need for a Center dedicated solely to patients with Inflammatory Bowel Disease continues to grow," said **Michael Goldberg, MD**,

Head of the Division of Gastroenterology. "In fact, with the incidence of IBD increasing, the need to support efforts that benefit our patients has never been greater. These funds will help us undertake exciting new initiatives that promote the importance of gastrointestinal health, directly impacting patient care and advancing medical research."

Nearly 2 million Americans suffer from IBD, which includes Crohn's disease and ulcerative colitis. Crohn's disease is an inflammation of the intestines, which may involve the entire GI tract; ulcerative colitis is a similar inflammation of the large intestine. These chronic conditions affect individuals of all ages and can cause debilitating symptoms, which affect not only a patient's quality of life but also can profoundly impact family members. They also have been linked to an increased risk of colorectal cancer.

"The real beneficiaries of this generosity are the patients and families who turn to ENH for their healthcare needs," said Dr. Goldberg. "With the crucial funds raised at the Galas, The Center for Inflammatory Bowel Disease will help us continue to develop a multidisciplinary clinical program and put in place a nationally recognized research team. In fact, we already have recruited additional physician-scientists with a specialty focus on IBD to provide patient care and further our research initiatives in order to understand these debilitating disorders of the GI tract."

For information about making a donation to support The Center for Inflammatory Bowel Disease, please contact Jim Lynch, Director of Development, ENH Foundation, (224) 364-7205, jlynch@enh.org



Under the direction of its Past President Mary Hoppe (pictured) and current President Barbara Balsley, The Auxiliary of Evanston Northwestern Healthcare has raised nearly \$1 million for the Division of Gastroenterology, with the leadership of Michael Goldberg, MD.

THE CAMPAIGN for EVANSTON NORTHWESTERN HEALTHCARE

Challenge Grant Met: Progress Made on New Campaign Goal

The Campaign for Evanston Northwestern Healthcare will receive \$1 million after successfully meeting a challenge grant from an anonymous donor. The conditions of the challenge required the ENH Foundation to raise \$1 million from members of the ENH, ENH Foundation and ENH Research Institute Boards of Directors and \$2 million from new individuals by June 30, 2006. The Foundation exceeded the challenge by raising \$4.6 million, of which \$3.5 million came from non-board members.

To date, more than \$114 million has been raised toward the revised Campaign goal of \$150 million set by the Boards of Directors of Evanston Northwestern Healthcare and the ENH Foundation. Recent gifts to the Campaign include:

- \$1.5 million from The Daniel F. and Ada L. Rice Foundation to construct The Patricia G. Nolan Center for Breast Health at Glenbrook Hospital.
- \$1.5 million from ENH Foundation Board Member Scott Schweighauser and his wife, Liz Ellrodt, to endow The Schweighauser-Ellrodt Chair in Perinatal Medicine.
- \$520,000 from the physicians at the Illinois Bone and Joint Institute to support research in the Department of Orthopaedics.
- \$200,000 from ENH Foundation Board Member Lester B. Knight III and his wife, Becky, to create and support the Medication Assistance Fund at Evanston Hospital.

Standing Ovation for Broadway-Themed 2006 Hospitals' Gala

The 2006 Hospitals' Gala "Bright Lights! Black Ties!" sponsored by The Auxiliary of Evanston Northwestern Healthcare (ENH) was held June 17 at the Fairmont Hotel. The event brought a bit of Broadway to Chicago and raised almost \$450,000 for the Division of Gastroenterology.

The Ballroom of the Fairmont Hotel was transformed into an elegant dinner theater where nearly 800 guests enjoyed musical and dance performances from some of Broadway's most popular musicals. Throughout the evening, live music by the Gentlemen of Leisure had the crowd out of their seats and on the dance floor.

The event marks the conclusion of The Auxiliary's two-year commitment to the Division of Gastroenterology. Co-chaired by Janet Emmerman and Madonna Tideman, this year's event again benefited Gastroenterology Research directed to Inflammatory Bowel Disease, which includes ulcerative colitis and Crohn's disease (see opposite). With proceeds from the past two galas, nearly \$1 million has been raised for these programs.

Thanks to the many generous donors who helped The Auxiliary of Evanston Northwestern Healthcare fulfill its two-year commitment to establish the Division of Gastroenterology's Center for Inflammatory Bowel Disease.

Next Year's Gala, co-chaired by Marcy Alspach and Annmarie Trapp, will be held Saturday, June 16, at Chicago's Union Station.



ENH Auxiliary President-elect Kathy Leighton and President Barbara Balsley



Gala Co-Chairs Janet Emmerman and Madonna Tideman celebrate another successful Hospitals' Gala with their husbands, Herb Emmerman (left) and Jeff Tideman (right).



Keith Evans, Director, Human Resources for ARAMARK Healthcare, enjoys the evening with his wife, Dawn.



Sari Goldberg, Michael Goldberg, MD, Head of the Division of Gastroenterology, James Rosenberg, MD, and Sandra Rosenberg.

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Honoring their father's legacy at the dedication of the Evanston Hospital Professional Staff Office in memory of Bernard Adelson, MD, are, from left, Edward, Duffie and David Adelson.

Professional Staff Office Dedicated in Honor of Bernard Adelson, MD

On June 6, the Professional Staff Office at Evanston Hospital was dedicated in honor of Bernard Adelson, MD. Dr. Adelson died on March 5, 2005, leaving a 50-year legacy that will impact Evanston Northwestern Healthcare (ENH) for years to come.

Dr. Adelson joined the medical staff of Evanston Hospital in 1957 and continued to treat patients until a few weeks prior to his death. The plaque that recognizes his accomplishments reads, "In memory of Bernard H. Adelson, MD; Founder and then Chair, Division of Nephrology 1975-1988; Founder and Chief, Geriatrics Services 1987-2005; Founder and Chairman, Institutional Ethics Committee and Medical Ethics Program 1988-2004; Extraordinary physician, beloved teacher, revered mentor. His devotion to patients and his passionate belief in the role of medical ethics inspired all who knew him."

With the generosity of family, friends, former patients and colleagues, the Evanston Northwestern Healthcare Foundation is seeking to establish an Endowment Fund in Medical Ethics in honor of Dr. Adelson. For more information or to make a contribution, please contact the ENH Foundation at (224) 364-7200 or give online at www.enh.org/foundation.

ISCU Volunteer Earns Auxiliary Nursing Scholarship

During her final year at New Trier High School, Zoe Lasky's senior service project was observing and helping in Evanston Hospital's Henrietta Johnson Louis Infant Special Care Unit (ISCU). This experience crystallized her desire to be a nurse, and now the 18-year-old is off to Radford University in Radford, Va., with the assistance of a \$5,000 nursing scholarship from The Auxiliary of Evanston Northwestern Healthcare (ENH).

This is the third consecutive year The Auxiliary has awarded a college scholarship to a deserving local high school senior with plans to pursue a career in nursing. The amount of the scholarship increased this year from \$2,500 to \$5,000 in response to increasing college costs.

The semester-long service project allowed Lasky to observe developmental follow-up clinics, learn how to take vital signs and feed infants. "My experience in the ISCU was one of the best I've ever had," Lasky said. "I love babies, and it made me realize that neonatal nursing is what I really want to do."

"The Auxiliary has a 70-year tradition of giving back to the community," said its president, Barbara Balsley. "The nursing scholarship is one way we can help support the nursing profession by encouraging talented individuals like Zoe to pursue a career that will make a difference in the lives of others."



Barbara Balsley, ENH Auxiliary President (left), and Susan del Castillo, Nursing Scholarship Chair (right), congratulate scholarship recipient Zoe Lasky of Wilmette.

SAVE-THE-DATES

OCT. 12 - 15

Key to the Cure, Saks Fifth Avenue, 1849 Green Bay Rd., Highland Park, presented by Saks Fifth Avenue. On these days, a percentage of all sales will be directed to several of the Auxiliary of Highland Park Hospital's fundraising projects: women's programming and services within the Ambulatory Care Center and the Arthur G. Michel, MD, Breast Cancer Research Fellowship. The event will feature a kick-off celebration with hors d'oeuvres and giveaways from 5 to 8 p.m. on Thursday, Oct. 12, at Saks. For more information, call (847) 859-8930.

SATURDAY, NOV. 11

The Associate Board of The Auxiliary of Evanston Northwestern Healthcare presents *A Night of Illuminations, Part Deux* at A New Leaf, 1818 North Wells St., Chicago. Tickets are \$100 each and include cocktails, hors d'oeuvres, dancing, silent auction and raffle. All proceeds will support the Henrietta Johnson Louis Infant Special Care Unit at Evanston Hospital. For more information, call (847) 570-5306.

SATURDAY, DEC. 2

Join the Auxiliary of Highland Park Hospital for an exciting evening of Italian dinner and bocce ball. Proceeds benefit programs at the Hospital. For more information, call (847) 859-8930.

You can also visit the Web at www.enh.org/auxiliary for more information about these events or about joining The Auxiliaries or The Associate Board.



Honoring the legacy of the late Myra Rubenstein Weis (pictured in the portrait at left) are her daughter Sari Weis (right) and her mother Millie Rubenstein.

MRW Luncheon Celebrates 10 Years of Supporting Patient Education

It's said that laughter is the best medicine, and to celebrate "Prescription for Your Health," the 10th Anniversary of the Myra Rubenstein Weis (MRW) Luncheon, WLS-TV ABC7 Chicago feature and entertainment reporter Janet Davies had the more than 350 guests smiling as she recounted details of her encounters with various celebrities.

Co-chaired by Sharen Berman, Linda Clark, Sheri Kase, Sue M. Roberts and Maxine Yellen, the event raised \$80,000 for the **Myra Rubenstein Weis (MRW) Health Resource Center** at Highland Park Hospital and related projects within Evanston Northwestern Healthcare (ENH). A special 10-year Anniversary celebration was held the evening before the luncheon.

Eileen Goldstein, along with her husband Paul Goldstein, MD, established the MRW Health Resource Center in memory of her sister Myra Rubenstein Weis, a North Shore mother of two who died of breast cancer in 1990. Proceeds from this year's luncheon will help fund a television-based patient-education system broadcast to each patient room at Highland Park, Glenbrook and Evanston Hospitals.



MRW Luncheon Honorary Chairs Eileen Goldstein (from left), and Paul Goldstein, MD, join keynote speaker Janet Davies, feature and entertainment reporter for ABC7 Chicago.

ENH Wishes to Thank ...

The Dr. Ralph and Marian Falk Medical Research Trust for a \$130,000 grant for purchasing equipment to further the research of Wendy Rubinstein, MD, PhD, Director of the ENH Center for Medical Genetics. The equipment will be used for Dr. Rubinstein's research on gene expression profiling of breast tumors.

The **Pearle Vision Foundation**, which awarded \$10,000 to Marian Macsai, MD, Chief of ENH Ophthalmology Division, Professor and Vice-Chair, Department of Ophthalmology, Northwestern University Feinberg School of Medicine, and co-investigator Lissa Silver, PhD, for their ongoing clinical research *The Effects of Omega-3 Fatty Acid Supplementation on Meibomian Gland Secretions and Blepharitis*. The study aims to understand the underlying physiology behind the benefits of omega-3 fatty acid to the treatment of blepharitis, or dry eye, a condition common in up to 20 percent of adults over age 45.

Target, for a grant of \$3,000 through the company's community giving program for Reach Out and Read, which provides new books to children in Evanston Hospital's Child and Adolescent Center. The Evanston Greatland Target awarded the grant on behalf of Target Corporation.

Swinging for a Cure Nears Half Million Mark

The **Carol Gollob Foundation for Breast Cancer Research** held its 10th Annual Swinging for a Cure fundraiser in May. Proceeds from the event are distributed to several area medical research facilities, including Evanston Northwestern Healthcare. Cumulatively, the group has raised nearly half a million dollars for breast cancer research.

Lisa Gollob Finke and her husband Tom, along with her brother David, formed the foundation in memory of their mother Carol Gollob, a Glencoe resident who died of breast cancer. This year, two generations of Gollobs participated in the event—Tom and Lisa Finke (from left), their children Carol and Andrew, and David Gollob.



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Philanthropy Helps Babies Survive and Thrive



Top: Quinn Glancy takes a ride on the slide.
Center: A train ride was one of the highlights at the ISCU reunion picnic in June.
Bottom: Branden (from left), Jessica and Jason Phillip are ready for any weather.
Back cover: Henry Armstrong goes for a spin.

In the United States, more than 480,000 babies are born prematurely every year; however, more of these infants are surviving today—as witnessed by the crowd of babies, toddlers and teenagers who attended a **reunion picnic** celebrating the 34th anniversary of Evanston Hospital's Henrietta Johnson Louis Infant Special Care Unit (ISCU).

Advancements in the medical specialty of Neonatology and special facilities like the Henrietta Johnson Louis ISCU are helping premature and severely ill infants beat the odds. More than 500 infants a year are treated in the ISCU, which was named in honor of a founding member of The Auxiliary of Evanston Northwestern Healthcare, whose family gave a gift of \$2 million to ENH in 1994.

Over the years, other gifts to The Center for Maternal/Child Health have supported a variety of programs, including the Perinatal Depression Program, which was established through an initial gift by Charles and Joan Mudd in memory of their daughter, Jennifer Mudd Houghtaling. Recent gifts by Scott Schweighauser and Liz Ellrodt have endowed a Chair in Perinatal Research and supported programs within the Perinatal Family Support Center. The Associate Board of ENH is focusing its fundraising efforts on equipment needs in the ISCU.

“The partnership that our staff has with our patient families inspires us in our daily work to see the babies we care for go home and thrive into childhood,” said Michael Caplan, MD, Chair of the Department of Pediatrics. “Through the philanthropic generosity of countless individuals, we are able to sustain critical research and clinical programs, providing the highest level of compassionate and cutting-edge care.”

For more information on how you can support the Center for Maternal/Child Health, please contact Allyson Regnier, Director of Development, at (224)365-7207, aregnier@enh.org.



Helping Babies Survive and Thrive

Children and families celebrate 34 years of the Henrietta Johnson Louis Infant Special Care Unit at Evanston Hospital

See inside back cover.



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