

RIDDLEMATTERS

A Publication of The Riddle HealthCare Foundation Fall 2013



Caring. Committed. Critical.

Emergency Department's New Rapid Evaluation Unit Nears Completion

Riddle Rehabilitation Services

Helping People Function Better at Every Stage of Life

Riddle Opens New MRI Suite

Advanced Technology Enhances Patient Comfort While Improving Image Quality



Riddle Hospital

Main Line Health

Well ahead.®

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Riddle Matters

Fall 2013
Issue 6.2

On the Cover (L-R): Michael F. Shank, DO, joins John M. Feehery, MD, and Joseph D. Hope, DO in leading physician support for the Emergency Department project.

Riddle Matters is published by The Riddle HealthCare Foundation, which provides a philanthropic venue for members of the community to support Riddle Hospital in fulfilling its mission and vision.

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We're tooting our own horn.

At Riddle Hospital, it has always been our goal to provide superior patient care. When leading national organizations recognize Riddle for our commitment to quality, we stand proudly and hope that you—our patients—do, too.



The Joint Commission

Gold Seal of Approval for Stroke Care
Gold Seal of Approval for Hip Replacement
Gold Seal of Approval for Knee Replacement
Top Performing Hospital for Heart Attack, Heart Failure, Pneumonia & Surgical Care (2010, 2011 & 2012)



Society of Cardiovascular Patient Care

Accredited Chest Pain Center with PCI



American Heart Association

Gold Plus Performance Achievement Award and Honor Roll for Target Stroke



NICHE Hospital

Nurses Improving Care for Healthsystem Elders



National Accreditation for Breast Centers



The Cancer Center at Riddle Hospital, Main Line Health

Three-Year National Accreditation with Gold Level Commendation from the Commission on Cancer of the American College of Surgeons



Riddle Hospital
Main Line Health
Well ahead.®



Gary L. Perecko



Thomas A. Bruder, Jr

Your Top Performing Community Hospital

As always, there is a lot going on at your community hospital, and our efforts at Riddle continue to focus on providing the very best healthcare services to you and your family. Nothing illustrates this more effectively than our renewed recognition by the Joint Commission as a *Top Performing Hospital for Heart Attack, Heart Failure, Pneumonia and Surgical Care*. Riddle Hospital is among only 5% of organizations to be recognized three years in a row! Yes, we are proud and the list of awards and achievements on the opposite page reflects our ongoing commitment to superior patient care.

Inside this issue of *Riddle Matters* we share with you our progress on a number of fronts: the capital campaign to raise funds for our much-needed Emergency Department expansion; the opening of our brand new MRI Center on the ground floor of Health Center 3; and one year later, the encouraging data from our Rapid Evaluation Unit.

We are proud of our partnership with over 500 physicians who practice at Riddle. We are even prouder of the improvements they have helped us make in patient safety and quality. Awards and certifications for stroke, joint replacement and cancer treatment are prime examples of this partnership. So too is the philanthropic support we are receiving for our campaign. We are pleased to recognize Rose Tree Medical Associates and Providence ENT for their leadership gifts. In coming issues, we will share more examples of the generosity of our medical staff.

For the past 20 years, Riddle has provided first class inpatient and outpatient rehabilitation services. These therapists often work in the background, leading the healing process for many in our community. This issue introduces you to the therapy staff and a very grateful patient, Lee Cross.

Riddle's newest jewel is our state-of-the-art MRI Center, which features two top-of-the-line MRI machines that enhance patient comfort and provide much improved images. Behind the scenes are the members of Riddle's Radiology team who interpret test results and share them with your physician. This is truly an investment that will provide lasting benefit to our patients.

As we near the end of our 50th Anniversary year, we'd like to thank you once again for your ongoing support of Riddle Hospital. We hope you enjoy this issue of *Riddle Matters*.

Gary L. Perecko, FACHE
President, Riddle Hospital and
The Riddle HealthCare Foundation

Thomas A. Bruder, Jr
Chairman,
The Riddle HealthCare Foundation

Not Just Bigger, But Engineered for Better Patient Flow

Emergency Department's New Rapid Evaluation Unit Nears Completion

Riddle Hospital is about to mark a significant milestone with the opening of our new Rapid Evaluation Unit (REU), designed to move non-critical patients through the Emergency Department more quickly. This represents the halfway point of the Emergency Department expansion project, which is scheduled for completion by the end of 2014. Riddle's ED began using the rapid evaluation approach in the summer of 2012 with excellent results (*see sidebar*), sharing space near the main emergency entrance to create a temporary REU with six curtained bays. Now, a larger permanent REU is taking shape behind the new brick façade visible from Route 1, which houses an 8,000-square-foot

addition to the front of the existing ED. This REU features eight private rooms along with a spacious interior waiting room where patients can wait for additional tests or results after being seen.

"The goal for this project was not just to build bigger, but more efficient," notes Harry Pecorelli, a project manager with Stantec of Philadelphia, the firm overseeing the project for Riddle. "It's about getting people the care they need more quickly and not having them wait for long periods of time."

By separating walk-ins from critically ill patients who arrive by ambulance at a different entrance, the new REU will help Riddle better accommodate the large

number of patients with non-life-threatening illnesses and injuries—the sprained ankle, the fever and vomiting, the nighttime ear infection or sudden stomach pain. There are exterior features designed for these patients' convenience: a new driveway and entrance with canopied drop-off area, along with a designated parking area for the ED with its own guard station to control access. Patients will enter a convenient, attractive waiting area with high-definition televisions—

The end result will be a larger, more modern ED better suited to the needs of our community, ranging from routine illnesses and injuries to life-threatening emergencies.

with the goal always to get them quickly to one of the REU's rooms for evaluation by a care team, or to the acute care side of the Emergency Department for more serious symptoms. REU patients will not linger in rooms for long periods awaiting diagnostic tests or results, which is a common ED bottleneck; they will proceed to the REU's new interior waiting area and get sent for tests from there, so that each room can turn over quickly. This new waiting area can accommodate up to 30 people at once, making it possible for loved ones to accompany patients and stay up-to-date on their progress.

Although expanding on to the front of the hospital made the most sense logistically and financially, it has posed a number of challenges. Not only has the construction site occupied a highly visible location, it also required careful planning to



ED Construction Team (L-R): Harry Pecorelli of Stantec, ED Project Manager, along with Riddle Hospital Team members: Ed McKillip, Director of Finance; Donna Cantalupi, ED Nurse Manager; and Ronald Gravina, Director of Plant Operations.



Exterior of new ED transforms daily while care continues inside.

reroute traffic flow through Riddle's front driveways and parking lot. Also, the construction took place directly below patient rooms, which required contractors with HSC Builders to find ways to minimize disruption and keep the noisiest equipment outside.

"The team has worked hard to keep patients and staff insulated from a project that is happening right on their doorstep," Pecorelli says. "For a project like this to succeed, there has to be a solid partnership that forms among everyone working on the project."

During late summer and fall, as the new REU took shape, Emergency Department staff and administrators surveyed progress regularly and made suggestions about everything from patient flow to the location of phones, computers and medical equipment. Throughout November, ED Clinical Nurse Educator Jennifer Cummins, MSN, RN-BC, CEN (see page 7), conducted a series

of training sessions and simulations to familiarize staff with the new REU and how it will work during a typical shift. Although ED staff members are accustomed to the REU approach, they will be working in a larger space that is separated from the acute care side of the Emergency Department.

Once the new REU is up and running, the three interior renovation phases will begin and continue through most of 2014. The former REU will be turned into offices and common rooms for clinical staff. Next, half of the current ED's acute care rooms will be completely renovated while the others remain in use. After that, the remaining acute care rooms will get the same overhaul. The end result will be a larger, more modern ED better suited to the needs of our community, ranging from routine illnesses and injuries to life-threatening emergencies.

The REU at Riddle: One Year Later

In July 2012 Riddle opened a temporary REU in order to test the concept before building the new facility around it. In the summer of 2013, data clearly showed that the rapid evaluation approach significantly improved both efficiency and the patient care experience. Wait times decreased from an average of two to three hours in Fiscal Year 2011-12 to roughly zero to 45 minutes for FY2012-13. The percentage of patients who left the ED without treatment was cut nearly in half, from 1.24 to .67 percent, and hallway bed usage decreased by about 55 percent.



Dorothy Smith AD, RN, CEN, and Cecilia Carpenter BSN, RN, CEN, attend to a patient in the REU while she waits for test results to come back.

"The Riddle team continually raises the bar in improving the patient experience, and the successful implementation of the REU is just one example. The Main Line Health family has become stronger because of the energy, compassion and commitment to excellence that Riddle Hospital physicians, employees and volunteers exhibit every day. I am proud and excited for the entire patient care team to embark on a new chapter in delivering a superior patient experience with the opening of the expanded Emergency Department."

Jack Lynch, CEO, Main Line Health

Caring. Committed. Critical.

Community Members and Physicians Step Up to Support The Campaign for Riddle's Emergency Department

Since the announcement of The Campaign for Riddle's Emergency Department at the Man O'War Gala last April, numerous friends, neighbors, and Riddle staff and physicians have stepped up to support the project. To date, The Riddle HealthCare Foundation has raised \$6.5 million toward the campaign goal of \$7.5 million.

This goal represents nearly half of the new ED's total cost, with the remainder to be funded by Main Line Health. Early support has made all the difference to our campaign's success and the generosity of our lead donors is helping to ensure that all nearby residents will have access to a best-in-class Emergency Department within minutes of home.

Essential to our progress are leadership gifts from two physician groups at Riddle: Rose Tree Medical Associates and Providence Ear, Nose & Throat (ENT), both long-time practices in Health Center 3, located on Riddle's campus. The physicians at each practice made a deliberate decision to come together and



lend their financial and leadership support to the Emergency Department project. All felt a sense of responsibility to their own patients, the hospital and the community where they and their staff members live and work (see page 6).

Additionally, we are honored to report that a prominent member of the Delaware County philanthropic community, the Ethel Sergeant Clark Smith Memorial Fund, has also stepped up to support the project with a grant of \$225,000. This will be used to purchase telemetry and bedside monitoring equipment in the new ED.

Thanks to these and many other generous donors, The Campaign for Riddle's Emergency Department has reached 85

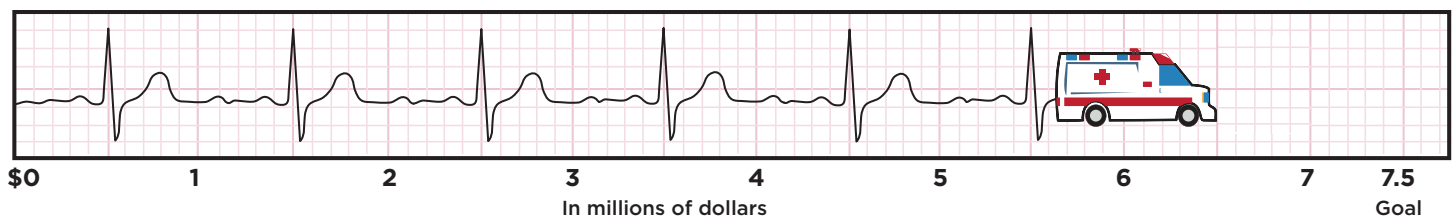
percent of its goal, yet our work is far from finished. As our new ED continues taking shape over the coming year, we ask all community members to consider supporting a project that will benefit them, their relatives, neighbors and friends not just now, but for decades to come.

"We plan to keep reaching out to all members of the Riddle community—including local residents, area businesses and community groups, as well as physicians and employees—to garner more support for the Campaign," says co-chair John Unangst. "You'll see us at local events and you may hear from us. This has to be a true community effort, and this final push depends on even more people stepping up to support the new ED."

If you want to make a gift to support this vital resource, call Ellen Grill at 484.227.4701 or visit mainlinehealth.org/rhgiving.

As our new ED continues taking shape over the coming year, we ask all community members to consider supporting a project that will benefit them, their relatives, neighbors and friends not just now, but for decades to come.

Emergency Department Campaign Progress



Marking Progress, Building Momentum

Campaign Leaders Share Riddle's Vision at a Summer Celebration

In July, Riddle Foundation board members, campaign leaders and staff paused for a moment to celebrate Riddle's successes and plans at the beautiful Jersey shore home of Euse and Sue Mita of Media. About 100 people with ties to Riddle Hospital and its surrounding community gathered to learn more about the Emergency Department expansion and renovation, the progress to date, and the impact the new ED will have when it opens at the end of 2014.

Riddle President Gary Perecko and Campaign Co-Chair Don Saleski also shared good news about Riddle's achievements in recent years, ranging from high patient satisfaction scores to certifications of clinical excellence from national accrediting organizations. It was a time to reflect on great progress while also preparing for the work that remains, as The Campaign for Riddle's Emergency Department seeks to raise an additional one million dollars to meet its goal.

"I think we both realized the value and the importance of Riddle's ED, and given our ties to Media it felt natural to get involved..."

Sue Mita

The Campaign would not be where it is today without people like Euse and Sue Mita of Media, who have set a powerful example to others with their support of Riddle. Not only did they offer their shore home for this event, they also made a significant leadership gift in support of the new ED. As long-time residents of Media who raised their own children here, the Mitas feel strongly that the time has come to ensure that all local families can receive emergency care in a facility that is as clinically advanced as it is modern and welcoming. Euse and Sue both shared stories about their own experiences in the Riddle ED last winter. Neither situation was life-threatening, so they were able to witness firsthand the attentive-

ness and efficiency of care in the Rapid Evaluation Unit. The Mitas were impressed and decided to add Riddle's ED project to the long list of important charitable causes they already support.

"I think we both realized the value and the importance of Riddle's ED, and given our ties to Media it felt natural to get involved," says Sue. "We were happy to hold this event at our home to spread the word and encourage our friends and neighbors to support the effort as well."

"From the beginning, we have talked about the new Emergency Department as a project that the community needs to own, and we are so grateful to the Mitas for taking that message to heart," says Don Saleski, co-chair of The Campaign for Riddle's Emergency Department. "These major gifts are absolutely essential in meeting our fundraising goal, and they are a real vote of confidence in Riddle's plans and vision for the ED."



By the sea, by the sea, by the beautiful sea. Riddle supporters at Mita event included (L-R): Steve and Marilyn Derby, Euse and Sue Mita, Gary and Cindy Perecko, Ken and Elaine Kirby, Ellen Grill, Don Saleski.

Leading by Example

Physician Practices Invest in the Future of Riddle

The Riddle HealthCare Foundation is especially grateful to the physicians and staff of Rose Tree Medical Associates and Providence Ear, Nose & Throat for each practice's contribution of \$50,000 in support of The Campaign for Riddle's Emergency Department. Both practices were motivated by a desire not only to shape the future of Riddle, which is their patients' primary hospital, but also to improve the quality of life in a community where their staff members, associates, family and friends live and work.

"Our patients rely on the ED as we do, and we look forward to giving them a high-quality facility—one that matches the quality of the doctors and nurses who provide the care there."

Michael Shank, DO

"We see the Emergency Department as not just a Riddle department or a Main Line Health department, but something that belongs to the community," explains Michael Shank, DO, founding partner of Rose Tree Medical Associates. "Many of our physicians and employees live in this community, so this new ED is going to serve our neighbors, our families, even ourselves. It is here 24/7 for us, and it has a special responsibility to the community in ways that other medical departments don't have. We thought about this and decided that we

really wanted to be a part of this effort.

"At the same time, we are primary care doctors and our patients rely on the ED as we do, and we look forward to giving them a high-quality facility—one that matches the quality of the doctors and nurses who provide the care there."

At Providence ENT, physicians and staff also feel personally and professionally committed to Riddle, according to partner John Feehery, MD.

"I speak for all of my partners when I say we feel a real connection to Riddle. We've had a location here for 40 years, it's our busiest office, and we provide a significant amount of care to patients in the Emergency Department," says Dr. Feehery. "We work closely with the ED physicians, nurses and staff every day, and we know the facilities need improvement. Riddle provides us with an excellent environment for caring for our patients. Making Riddle even better will only make us more successful as physicians and maintain the hospital's standard of excellence in caring for residents of Delaware



John Feehery, MD

County and Chester County. We realize we have a responsibility to take ownership in the future of Riddle."



Michael Shank, DO

"On a more personal level, my partners and I all have our own stories about experiences with Riddle as community members and patients," he adds. "In my case, I remember when Riddle was built, and my parents always felt that Riddle was part of the community. My mom volunteered here for close to 20 years. I remember taking my parents to Riddle and seeing them get good care, and other family members have used the ED and other services. My partners and I agreed that supporting the ED was a way of honoring this sense of commitment to Riddle."

The Riddle HealthCare Foundation thanks all physicians and staff members at Rose Tree Medical and Providence ENT for their leadership support of the Emergency Department Campaign.

Providence Ear, Nose & Throat

Kenneth Briskin, MD
John Feehery, MD
Steven Fischer, MD
William Gartner, MD
Mark Ginsburg, DO
Joel Perloff, MD

Rose Tree Medical

Michael F. Shank, DO
Joseph D. Hope, DO
N. Paul Alpert, MD
Aaron S. Best, DO
Michele L. Boornazian, DO
Julia Elcock-Vengen, MD
Dorothy Jenkins, MD
Alexander I. Kiotis, DO
Timothy Patterson, DO
William Purner, DO
Marlowe Schaeffer-Polk, DO
Armen Sevag, DO
Kelli Yacono, DO

Fast-Paced Care, Fast-Paced Education

In Riddle's Emergency Department, Learning Never Stops

In emergency medicine, the pace of change is just as relentless as the pace of care. Major professional organizations such as the American Heart Association, American Stroke Association and the Emergency Nurses Association are constantly updating care recommendations to incorporate the latest evidence on how to treat patients for the best outcomes. Since 2009, Clinical Nurse Educator Jennifer Cummins, MSN, RN-BC, CEN, has served as the self-described “portal” that brings this new knowledge about best practices to Emergency Department nurses and staff.

“I am always reading, going to conferences, and exploring what might be coming down the line,” Cummins says. “And then I have to get this information out to the staff and help them put it into practice.” She also chairs Main Line Health’s Emergency Department Care and Practice Committee, where the four hospitals’ ED educators and administrators can share ideas.

When Riddle recently sought accreditation from the Society of Chest Pain Centers, for example, Cummins worked to ensure that every staff member knew and was making use of recommended care pathways for managing patients with chest pain. When the American Stroke Association’s *Target: Stroke* project challenged hospitals to treat eligible stroke patients with the clot-busting drug tPA within 60 minutes of arrival—instead of the previously recommended three hours—Cummins and the Riddle Stroke Committee had to figure out how to make that happen and bring



Jennifer Cummins conducts teaching session with ED staff nurses and Elliot Wong, MD.

Staff education is in good hands with Cummins, who was just named the winner of the Pennsylvania Nightingale Award for Excellence in the Nurse Educator category.

the ED staff up to speed. Even more recently, the national Surviving Sepsis Campaign has recommended care steps that can help nurses identify patients with sepsis and initiate treatment more quickly. Sepsis is a severe inflammatory response to infection that can be hard to identify in its early stages, but can quickly turn fatal if left unchecked. Cummins is educating staff on a new sepsis screening protocol and the care bundles proven to save lives.

Finding time for education is no small feat in a busy Emergency Department. Cummins uses a range of tools to get her colleagues’ attention: instructional sessions during shift changes,

online education, role-play and simulations, one-on-one teaching out on the floor, a “grab bag” of questions for on-the-spot quizzes, even board games designed to walk colleagues through the recommended pathways of care.

“I try to be as creative as I can in how I present the information,” Cummins says. “I also spend time in the ED just observing, so I can see what’s not working well and consider how I can better help the staff. Another important part of my role is being there to educate one-on-one in the moment as needed.”

As Riddle prepares to move into the new REU and eventually the ED, staff education is in great hands with Cummins, who was just named the winner of the Pennsylvania Nightingale Award for Excellence in the Nurse Educator category. In 2012, she was a Philadelphia Tri-State finalist for *Nursing Spectrum*’s Nursing Excellence Award in education and mentoring, and she was Riddle’s Nurse of the Year in 2011.

Riddle Events



Gary Perecko, President, Riddle Hospital; Jack Lynch, CEO, Main Line Health; Joseph Hope, DO, President, Riddle Hospital Medical Staff; and Steve Derby, Vice President for Development, The Riddle HealthCare Foundation

Man O'War Gala

One of the highlights of Riddle's 50th anniversary this year was the Man O'War Gala at Drexelbrook on April 20, where "50" special people and organizations were honored for their substantial impact on Riddle Hospital's growth over the past 50 years.



OB GYN Health Care Associates at Riddle enjoyed the evening. (L-R): Sueny Seeney, MD, Richard Denovan, MD, Libbi Woodson Abney, Jeannine Roth, John Roth, and Jacqueline Redding

Save the Dates

Man O'War Gala

April 26, 2014

The Springfield Country Club

Pro-Am Golf Classic

September 11, 2014

DuPont Country Club



The Man O'War Gala's "50" Honorees celebrate 50th Anniversary.



Peter Sharkey, MD, and his wife, Sally, welcome Richard Rothman, MD, PhD, to the 2013 Samuel D. Riddle Society event.



Jo Anne Thomas and Trudy Berman, with their husbands, Al Berman and David Thomas, DO, PhD



Tom and Kate Bruder arrive with friends Joan and John Mullen

Samuel D. Riddle Society

Peter Sharkey, MD and his wife Sally, welcomed 125 members of the Samuel D. Riddle Society to their home in Villanova on October 18th to thank them for their generous support of Riddle and to share recent hospital accomplishments. Dr. Richard Rothman, Founder of The Rothman Institute, was the featured speaker.



Pro-Am Golf Classic



Wawa's team was the winning foursome with (L-R) Mark Agnew, Auggie Augustine, former Philadelphia Flyer Brian Propp, Paul Hess and Rich Wood

The 31st Annual Pro-Am Golf Classic at DuPont Country Club on September 12th raised \$40,000 for the Emergency Department Expansion Project. PGA teaching professionals and celebrity guests joined the Fivesome Scramble. The day included breakfast, BBQ lunch, skill prizes, a hole-in-one automobile prize and dinner reception.

Riddle Rehabilitation Services

Helping People Function Better at Every Stage of Life

Scott Voshell, PT, DPT, MhS isn't big on titles; in fact, he can't say for sure what his own official title is. (For the record, he just started his 15th year as Director of Rehabilitation Services.) He would much rather talk about his 70 "awesome" staff members who work with patients throughout the hospital and in Health Center 4—the spacious, modern home for Main Line Health Outpatient Rehab Network at Riddle since 2010. Voshell takes credit only for hiring great people and staying out of their way.

"Many of my staff have been here for 10 years or more, and that tendency to stay builds stability and camaraderie," he says. "When we invest in additional certifications or training, we know those skills are going to stay here and benefit our patients."

In fact, most people aren't aware of how wide-ranging those specialized skills are. When they hear the word "rehab," they think of patients getting physical therapy after a sports injury or joint surgery, or perhaps exercise therapy after a heart attack. Every day, Riddle therapists help



Scott Voshell consults with program manager Christopher Lambert, PT, WCC, while visiting the inpatient therapy gym. Advanced clinician Ed Penot, PT, works with a patient on balance.

patients of all ages develop and strengthen skills such as movement and motion, walking, balance, speech, swallowing, hearing and physical fitness, among others—any of which can be impacted by developmental delays, injury, illness, certain medical conditions, surgery or aging. They also work with healthy people to increase their strength and fitness level, which can help prevent problems such as heart disease and diabetes.

"I'm blessed to have an incredible staff with such a multitude of subspecialties," Voshell says. "For example, we have therapists trained to handle premature infants and others who are passionate about cancer rehabilitation. We have geriatric specialists and vestibular therapists who work on balance issues. We have certified hand therapists and other orthopaedic therapists. We have pediatric therapists who work on developmental issues with the little ones, and others trained to help people who have trouble speaking due to stroke or some other neurologic disease. If

"I'm blessed to have an incredible staff with such a multitude of subspecialties."

Scott Voshell

we don't have a specific therapy service here, we can find it within Main Line Health."

"Another great thing about my staff is that whenever I make a suggestion—a simple 'why don't we try this?'—within 24 hours they're on it."

That was certainly the case with his department's newest offering, *The Next Step to Wellness Cancer Rehab Program at Riddle Hospital*, which is the first coordinated program of its kind within Main Line Health. Voshell and his staff wanted to give people with cancer a central resource for accessing hospital services that can aid in their recovery: exercise therapy, fitness training, physical and occupational therapy, lymphedema therapy, pelvic floor rehabilitation and nutrition counseling.



Deborah Humbert, Hand Center Manager, demonstrates with Katy Coughlin, Riddle Fitness Manager, how the BTE strengthening machine operates.

“We already had all of these great services in place, but now patients can call a single phone number and speak with a certified exercise physiologist, who can then connect them with whatever therapies they need,” Voshell says. “But again, all of the credit goes to my staff members who sat in a room and hashed all of the details out together.”

Although Voshell constantly assigns credit back to his staff, it is clear that he leads by example. When he joined Riddle, he made a conscious decision to continue practicing physical therapy, which he does three days a week from 5:30 AM to 11 AM. (See page 12 to meet just one of his grateful patients.) He is actively involved with the American Physical Therapy Association and serves as a regional vice-chair for the Pennsylvania chapter. He keeps his hand in teaching as an adjunct professor with Widener

“Riddle’s therapists work with people at every phase of life—from babies in the NICU to seniors with special needs.” *Scott Voshell*

University’s physical therapy program. A few years ago, he and several colleagues started a twice-yearly educational conference for all Main Line Health therapists, which allows them to learn from experts in the field and forge collaborations across hospitals. And Riddle Hospital’s Rehabilitation Services offer hands-on experiences for physical therapy students from local colleges and universities.

Voshell traces his passion for the profession back to his time at Chichester High School, when he shadowed a physical therapist during a health services career day. He was immediately hooked,



Genna Wallerstein, OT Level II clinical student, is helped into the shower by occupational therapist Erin Stone, OTR.

and after undergraduate work at the University of Pittsburgh, he earned his master’s and doctor of physical therapy at Drexel and Widener, respectively. Along the way, he married and raised two sons, and just last year he celebrated the birth of his first three grandchildren: triplets born on Thanksgiving night—his “Thanksgiving dessert.” He talks about his family with the same level of enthusiasm he conveys about his profession, his staff and rehabilitation therapies at Riddle.

“I have gotten to do so many things and I have loved every day of it,” Voshell says. “In some ways I still feel like we are one of Delaware County’s best kept secrets. I want the community and area physicians to know how much we have to offer, and that we are here to be a partner in our patients’ recoveries.”

“It all comes back to hiring quality people. I have come to know so many great people through my work, my teaching, my contacts in the professional association—and quality people tend to know other great people. I am confident we have as excellent a staff here as you’d find anywhere.”



Amy Harper, PT, demonstrates some techniques for treatment of knee issues with “patient” Michelle Bochanski, PT.

Leland Cross:

A Full Recovery, Thanks to Riddle Rehab



“That really great therapist,” Scott Voshell, watches patient, Lee Cross, perform exercises following shoulder surgery.

L ee Cross of Kennett Square knows the challenges of managing people and processes while ensuring high quality. That is why his recent letter to Riddle President Gary Perecko about his experiences with Scott Voshell and Main Line Health Outpatient Rehab Network at Riddle made such an impact. Cross, a retired pharmaceutical executive, wrote the letter after spending most of 2012 making regular visits here for therapy sessions with Voshell, as he recovered from not just one but two successive rotator cuff surgeries. Today he says he is “100 percent recovered”—and he gives much of the credit to Voshell and his team.

“I had my surgery in Bensalem and did not want to have to drive there for physical therapy, so I asked my surgeon to recommend someone closer to home,” Cross

recalls. “Without hesitation, my surgeon pressed a button on his cell phone—clearly a speed dial—and asked someone, ‘Who’s that really great therapist at Riddle?’ He handed me a paper with the name ‘Scott Voshell’ on it.”

Cross almost couldn’t believe it when he called on December 23, 2011, and Voshell offered to see him the next day—Christmas Eve morning. That initial two-hour session set the stage for what Cross describes as a “fantastic experience” from start to finish. He recalls how Voshell and the front desk staff worked around his hectic travel schedule, giving him early-morning or late-evening appointments and making changes at the last minute. He was even more impressed by the teamwork and dedication he observed among the staff.

“Without hesitation, my surgeon pressed a button on his cell phone—clearly a speed dial—and asked, *Who’s that really great therapist at Riddle?*”

Leland Cross

“When I started with Scott, I didn’t realize how much they work as a team at Riddle until other therapists would come over and show me how to do an exercise if I wasn’t doing it quite right. I came to realize that all of the therapists were watching over all of the patients. They were all very knowledgeable and took time to explain how to do something, why you should do it that way, and what the impact will be on your recovery. No patient at Riddle is just a number; the staff members are all 100 percent focused on making sure each person has the most positive outcome.

“I spent about a year there two or three times a week, so I came into contact with nearly everyone and they were all terrific. I keep telling people, ‘If you need rehab therapy, go to Riddle. Don’t pay attention to all of the advertising from other places—just go there.’

“I never dreamt I would have a 100 percent recovery, and my surgeon and Scott had prepared me for the fact that I might not,” Cross adds. “But now I am fully recovered. I know my surgeon’s skill was important, but I also feel that I worked with the absolute best physical therapist I could have found anywhere.”

Riddle Opens New MRI Suite

Advanced Technology Enhances Patient Comfort While Improving Image Quality



The view into an MRI Suite reveals a peaceful scene tailored for the patient. Jackie Dwyer, RT (R) (MR), Supervisor, conducts the study.

When doctors need more information about a possible injury or other problem affecting a part of your body—ranging from the brain and spinal cord, to blood vessels, to bones and joints, to organs and tissues throughout the chest, abdomen and pelvis—they often order an MRI, or magnetic resonance imaging study. MRI technology uses magnets and radio waves to produce detailed cross-sectional images of structures inside the body. It is a powerful diagnostic tool that doesn't involve any radiation exposure, which usually appeals to patients. Historically, though, the MRI experience *hasn't* appealed to patients. In the past, they had to lie still within a tight tunnel-shaped bore, which created the magnetic field needed to generate the images, but also triggered anxiety in many people. Fortunately, newer MRI technology is enhancing patient comfort.

Here at Riddle, we opened a new MRI suite in August with two top-of-the-line Siemens MRI machines that not only produce higher-quality images than older models, but also are more comfortable for patients. Each machine's bore has a diameter of 70 centimeters, or about two-and-a-half feet, which is much larger than past models and creates more space between patient and tunnel. The bore is shorter, too, and the patient can enter from either end, meaning that a smaller portion of the body needs to be contained during the scan. In many cases, only the area being assessed by the MRI has to rest inside the bore—so if the head, neck or upper chest aren't part of the study, the patient does not have to spend the entire time facing up at the tunnel. This often alleviates the sense of close confinement that caused anxiety or aggravated claustrophobia in the past.

“MRI testing relies on a series of images, and now the sequences can be programmed more efficiently in advance, which means less lag time.” *William Merenich, MD*

William Merenich, MD, Clinical Chief of Radiology at Riddle, points to yet another advantage: the Siemens machines use faster, more automated technology, which cuts down on testing time. This is good news for patients, since having an MRI still requires lying motionless and controlling one's breathing at times, and the machine creates knocking sounds as the scanner works to create the images.

“MRI testing relies on a series of images, and now the sequences



Dr. William Merenich and Jackie Dwyer are proud of the new and spacious waiting area in the MRI Suite.

can be programmed more efficiently in advance, which means less lag time,” says Dr. Merenich. “If a patient is moving around too much, the machine can pick up on that and adjust to ensure we get sufficient images. This automation also allows the technologist to spend more time with the patient. And the coils we use are much lighter and less confining—no more heavy cables draped over the patient.”

Still, if patients feel anxious, Riddle's new suite has other features designed to put them at ease. They can listen to music during the test or even bring in their iPod or other digital device to have their own playlist piped into the room. A fan creates a continuous breeze that many patients find soothing. Each scanning room has a back-lit nature scene along one wall to bring a sense of outdoor space and openness indoors.

Even before patients reach the MRI testing area, they will notice how the entire suite has been configured with their needs in mind. It is located on the ground floor of Health Center 3, on the

Riddle campus, just a short walk from dedicated parking spots for MRI patients and right behind the valet station. The waiting area is spacious and up-to-date, with beautiful artwork and comfortable furniture. Once registered, patients enter a large preparation area with private changing rooms, lockers for their belongings, and an interior waiting room. There is also a separate entrance for hospital patients who need MRIs—a great improvement over Riddle's previous facility, which had a single entry area that could get congested with wheelchairs and hospital transport equipment.

The new MRI suite occupies a portion of the space that previously housed Riddle Hospital's outpatient therapy services, which moved to Health Center 4, on the Riddle campus, in 2010. The entire space was renovated to accommodate additional imaging services planned for the future.

In the meantime, patients needing MRIs have access to a new suite that combines some of the best technology available with patient-centered features.

Who is Reading My MRI?

Meet the Riddle Radiology Team

When you have an MRI or another imaging study at Riddle, those images are read by one or more members of our core radiology group: William Merenich, MD, Garen Boghosian, MD, Ashima Lall, MD, Neerav Mehta, MD, David Smoger, MD, Tina Stein, MD, or Peter Wahba, MD. While you might not get to meet these radiologists, they are an indispensable part of your team, interpreting the images and providing essential information for diagnosis and treatment planning. Because these experts are based at Riddle, they can form close working relationships with fellow physicians across the medical staff. This makes the diagnostic process more collaborative than it would be if different radiologists rotated through on less predictable schedules. Radiology Associates of the Main Line, the 50-member group that serves all Main Line Health hospitals, has established core teams at each hospital for this very reason.

"The philosophy at Main Line Health is to have radiologists build that consistent relationship with

physicians and patients in one place," Dr. Boghosian says. "The doctors know us and we know them, we have each other's cell phone numbers, we can truly work in partnership."

"We really begin to understand how each other thinks—we're not just an unfamiliar voice at the end of the line—and that just makes the whole process better, and ultimately better for patients," adds Dr. Lall.

At the same time, Riddle's radiologists benefit from being part of a larger multi-hospital group. In February 2013, Riddle completed its integration into Main Line Health's PACS, or picture-archiving system, a secure digital repository for all imaging studies done across the Main Line Health system. If one of our radiologists wants the advice of a colleague at Bryn Mawr, Lankenau or Paoli, that radiologist can easily access the images from his or her desktop. In turn, our team consults on studies done at other hospitals. This collective knowledge base is a great advantage for patients.

Our radiologists are also excited to have access to the two new 1.5 Tesla MRI machines in Riddle's MRI suite, which produce much better images than previous models. "There is just such incredible detail in these images. It's kind of like going from a traditional TV screen of the 1970s or 1980s to the high-definition screens available today," says Dr. Mehta. "And we're all trained MRI experts so there has been very little learning curve for us."

"The quality of our core group and their teamwork with physicians here is better than ever."

William Merenich, MD

Drs. Lall, Boghosian, Mehta, Smoger and Wahba have all joined Riddle since 2009, bringing specialized training in reading MRIs from such high-profile academic medical centers as Thomas Jefferson University Hospital, the University of Pennsylvania, the University of Pittsburgh and Brown University.

"The quality of our core group and their teamwork with physicians here is better than ever," says Dr. Merenich, Clinical Chief of Radiology. "The radiologists are constantly on the phone with physicians, talking over cases, making decisions together. Doctors not just at Riddle but throughout Main Line Health and even downtown hospitals, where our patients sometimes go for specialty care, are commenting on the quality of the images. We're excited to be able to offer this level of care to Riddle patients."



The core radiology group includes (L-R, seated): David Smoger, MD and Garen Boghosian, MD, (standing L-R): Peter Wahba, MD, Neerav Mehta, MD, Ashima Lall, MD, William Merenich, MD and Tina Stein, MD.

Employee Honored for 50 Years of Service



Diana Conrad was raised in Shenandoah, PA and graduated from St. Agnes Nursing School in Philadelphia. When she married Joe, an outdoorsman whose best fishing spots were in Delaware County, they decided to move from the city. While visiting the area to find a home, they drove by Riddle Hospital, which was under construction, and Diana thought, "Hmmm, I might try to work there when we move." By July 1963 they had moved and within one month she was employed at Riddle. Diana's gentle nature was perfect for the Newborn Nursery where she began...then on to Pediatrics. She presently works as a Community Health Nurse, rounding out an amazing 50 years of continuous service. Everyone at Riddle and Main Line Health salutes Diana's legendary devotion and commitment to providing the best care for our patients and community members.

Time Capsule Discovery



The 1961 cornerstone from original hospital construction and the recently discovered time capsule will be reset into Riddle's East Wing wall.

Most construction sites have surprises and the new ED expansion project at Riddle did not disappoint. While the construction team was removing the 1961 cornerstone in the wall of the original emergency department, they discovered a hand-crafted copper time capsule from the year Riddle Hospital opened in 1963. Workers immediately called hospital president, Gary Perecko, to witness the opening of the time capsule. Contents included the original copy of Samuel D.

Riddle's will; a mimeographed record of community donors; a stack of original *Riddlegrams*, The Associated Auxiliaries newsletter; and *The Saga of Samuel D. Riddle*, a retrospective written by *Delaware County Daily Times* sports writer Arden Skidmore.

All documents have been archived and copies will be returned to the time capsule for reburial later this fall. The original documents remain carefully sealed until plans are developed for their display.



Early photo in Spring 1963 of Riddle Hospital

Ways to Give

There are a variety of ways to support Riddle Hospital that provide you with the satisfaction of supporting its mission and securing certain tax advantages. The simplest form is to make your tax-deductible gift by check payable to "The Riddle HealthCare Foundation" and send it in the enclosed envelope.

Or make your secured credit card gift online at: mainlinehealth.org/rhgiving.

Just click on

(1) "Ways to Give," and

(2) "Give Online NOW!"

Depending on your personal circumstances, you may want to consider other available options such as:

Gifts of Securities and Other Property

Gifts of appreciated stock, mutual fund shares or other securities can be a cost-effective way of supporting Riddle. Gifts of real estate, paid-up insurance policies or personal property are also welcome.

Planned Gifts

From a simple bequest in your will to a charitable gift annuity that provides valuable life-income, planned gifts offer the flexibility of providing for Riddle's future while addressing your personal and financial needs. They also provide current and future tax benefits.

Matching Gifts

You can increase the value of your gift by taking advantage of your employer's matching gifts program, if one is offered. Check with your human resources department, and enclose the matching gift form with your contribution.

Memorials and Tributes

Remembering a loved one or honoring a friend, family member, physician or caregiver is a wonderful way to express your personal appreciation and support Riddle Hospital at the same time.



Steven R. Derby, Vice President for Development

For more information, please call The Riddle HealthCare Foundation Development Office:

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Our Mission

We exist to provide quality healthcare and superior service in order to promote and improve the quality of life in our communities.

Our Vision

To be the best place to receive care. To be the best place to give care.

The Riddle HealthCare Foundation provides a philanthropic venue for members of the community to support Riddle Hospital in fulfilling the mission and vision stated above.

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If you prefer not to receive fundraising communications from Riddle Hospital, please go to mainlinehealth.org/optout. We will honor your request after the date we receive your notification.

A Riddle Hospital gift annuity is a great way to share your vision.

A gift annuity may help you meet your financial and charitable goals in one easy step. In exchange for your gift of cash or stock, Riddle Hospital makes regular fixed payments to you, you and your spouse, or someone you name, for life.

Here are some of the benefits:

- A tax deduction for your gift
- Guaranteed income for life
- Highly attractive annuity rates
- Part of your annuity income will be tax-free
- Capital gains tax savings on appreciated property you donate
- Your gift will provide generous support for Riddle Hospital and the community we serve
- Membership in Riddle's Man O'War Society

Sample Rate Chart for a \$10,000 Gift Annuity

Annuitant Age at Gift	65	70	75	80	85
Annuity Rate	4.7%	5.10%	5.8%	6.80%	7.80%
Charitable Deduction	\$3,490	\$4,099	\$4,577	\$5,020	\$5,660
Annual Payment	\$470	\$510	\$580	\$680	\$780

Minimum gift is \$10,000
Deduction will vary slightly with changes to the IRS Monthly Discount Rate.

PLEASE NOTE: These examples are for illustrative purposes only.
Consult your own legal and tax advisors prior to making gift.



Peg and Hugh MacDonald

We gave a gift annuity because...

We have a great appreciation for the quality of care we have received in the past at Riddle Hospital, and we hope that this charitable gift will help to further enhance that care for each and every patient going forward.

For more information, contact Steven R. Derby Vice President for Development
484.227.3651 • derbys@mlhs.org

Visit us online at mainlinehealth.org/rhgiving