

RIDDLEMATTERS

A Publication of The Riddle HealthCare Foundation Fall, 2010



Continuity, Community, Commitment:
A Physician Roundtable on Primary Care

The Archbolds

Riddle Stroke Center Helps Ben Get Back on His Feet

Wawa CEO Howard Stoeckel

Wawa and Riddle, Never Standing Still

2009-2010 Report to the Community



Riddle Hospital

Main Line Health

Well ahead.™

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Riddle Matters

Fall 2010
Issue 3.2

*On the Cover: “Ben Franklin” and “Betsy Ross”
portrayed by Ralph and Linda Archbold*

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.

Editor: Ellen Grill
Assistant Editor and Writer: Martha Grieco
Designer: Kathy Todd
Photography: Jim Greipp
Writer: Kristine Conner

Riddle Hospital...Well Ahead



Gary L. Perecko



Thomas A. Bruder, Jr.

So...why is Ben Franklin on the cover of a magazine about Riddle Hospital? For starters, Ralph Archbold, who has portrayed Ben Franklin in and around the City of Philadelphia for decades, received emergency care here about 18 months ago.

But that’s not all. Ben Franklin and Riddle Hospital have something else in common. Ben was an active citizen who cared deeply about the basic human right to freedom and independence. We at Riddle Hospital are also active citizens who care deeply and deliver superior health care to our patients every day—offering the freedom and independence that comes with good health.

At Riddle Hospital, we focus on delivering the most advanced medicine to treat and cure disease. But we also recognize the role we must play in prevention and disease management. As never before, we stand at the center of a transformation that is redefining health care whether through technology, clinical advancements, or health care reform.

And we have taken steps to refine our mission. Our daily task is to keep our patients and community *Well Ahead*—whether receiving treatments that are well ahead of others or guidance in wellness and prevention to stay well ahead for years to come.

You’ve probably seen our ads in *The Philadelphia Inquirer*. *Well Ahead* is all about Riddle and Main Line Health. It’s about how we promote prevention and early diagnosis so our neighbors can live healthier lives. It’s about providing a superior experience for patients, employees, physicians, and the community.

It’s what we do. And what we have been doing. Riddle Hospital has a deep history of keeping our community well ahead.

That’s what you’ll learn about in the pages of this magazine. From our focus on physicians and primary care at Riddle...to the recent Joint Commission stroke certification...to the stories about people who have helped and continue to help shape Riddle every day.

We are *Well Ahead*. And we hope you’ll join us.

Gary L. Perecko
President, Riddle Hospital and
The Riddle Healthcare Foundation

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

Continuity, Community, Commitment

A Physician Roundtable on Primary Care



Physicians gather for panel discussion: (L-R, clockwise) Helen Kuroki, MD, Michael Shank, DO, Joseph Hope, DO, Doris Tirado, MD, and Russel Applegate, MD

In the American health care system today, many adults tend to seek out emergency or specialty care only when they experience a major health crisis.

Health care experts agree that we must move toward a new model in which each patient establishes a continuous working relationship with a primary care physician. This model has always been in place with pediatrics, as children typically stay with the same physician from infancy through young adulthood. Adults too can benefit greatly from working with an internal medicine or family practice physician—and, for women, an obstetrician/gynecologist as well—who can build an understanding of his or her health

needs and concerns, offer advice about preventing problems and staying healthy, and help with finding the right specialist when needed.

For nearly 50 years, Riddle Hospital has been a main source of primary care for residents of Delaware County. Earlier this fall, Riddle Matters magazine convened a panel of experienced primary care physicians to talk about the role of primary care today, its major challenges and opportunities, and the experience of practicing at Riddle Hospital.

The Physician Panel

Russel Applegate, MD

pediatrics, 30 years at Riddle

Joseph Hope, DO

internal medicine, 15 years

Helen Kuroki, MD

obstetrics/gynecology, 10 years

Michael Shank, DO

family practice/geriatrics, 25 years

Doris Tirado, MD

obstetrics/gynecology, 12 years

In this two-part series—with Part 2 to appear in the Spring 2011 issue—five Riddle physicians share their insights and commitment to building productive long-term relationships with patients and families throughout the region.

RIDDLE MATTERS: What made you want to focus your medical career on primary care?

DR. APPEGATE: For me, it was simple: I chose pediatrics because I enjoyed being around children and their families, and helping those families look to the future and optimize the health of their children.

DR. TIRADO: When I did my rotation in ob/gyn as a medical student I fell in love with it, particularly the obstetrics part. And I feel very strongly about women's health care, so everything came together.

DR. KUROKI: I too really liked women's health care. I was fascinated by the idea that it covers such a broad spectrum—from young women to older women, from good health to more serious problems such as cancer. It would allow me to work in multiple settings, see patients in the office and hospital, perform surgery, and touch on other areas of general medicine. And I enjoyed the idea of caring for multiple generations—



the grandmother, the mother, her children—and getting to know families over a long period of time.

DR. HOPE: As a resident, I was considering emergency medicine, but then I started talking with Dr. Shank about his practice. The lure of developing a close relationship with patients and their families—that ongoing back-and-forth, “How are the kids doing? How are your grandkids?”—really became attractive to me. Dr. Shank offered me a position and it seemed like a sign from God that it was the way to go. And I'd do it all over again.

DR. SHANK: I truly believe that medical care can best be given in a situation of continuity. There are many complex decisions involved, especially with elderly patients, and those can best be made when you walk into a situation where you know patients and their families, the family dynamic, and their wishes about how they want to live and be able to function independently. That is what is so great about family medicine: we work through a continuity of care. We are with our patients at the hospital, in their homes, at the nursing home, and in the office.

RM: What major changes have you experienced in your role as a primary care physician over the past several years?

DR. HOPE: When I got started almost 15 years ago, the physician's role was more about treating diseases that had already turned acute and helping patients deal with the consequences. But now I see a real push toward more preventive care, and I want that to continue.

DR. APPEGATE: Pediatrics traditionally focuses on preventive care, but we are seeing more educated parents coming in with more knowledge. And that is usually a good thing.

DR. KUROKI: I too am seeing a more sophisticated patient—she knows what she wants from her care, has looked up disease processes or health concerns online and collected some information, comes prepared for her visit and asks very appropriate questions. She is more actively involved in advocating for herself and making decisions. So it has become more of a collegial relationship in which I don't tell the patient what is going to happen to her, but we make decisions together.

DR. HOPE: It definitely has become more collaborative. Some of my older patients are still looking to me to tell them what to do, but with the younger patients—in their 40s, 50s, and 60s—it is more about sharing information and coming up with a plan together. They are going to question you more, but hopefully you have a good answer for them.

DR. TIRADO: It can be a little bit of a double-edged sword, though, with health care now so consumer-driven. Much more advertising is directed to the general public, leading patients to come in and ask for “this test” or “that medication.” Sometimes we need to educate the patient that this may not necessarily be the best thing for you, even though you saw it on TV.

DR. APPEGATE: We definitely have to re-educate parents who have encountered misinformation on the Internet and in the popular

media about vaccines. For the past two generations, parents have not really seen polio, chicken pox, or measles, and they have forgotten how dangerous these and other diseases can be. We have had to fight harder to keep the vaccination rates high—that is how we are going to have healthy children.

DR. SHANK: Our practice deals mostly with geriatrics, and we have seen a maturing realization among our patients that medicine can only do so much. Sometimes “doing everything” is not the best thing. Sometimes looking to hospice care for some serious diseases is in the best interest of the patient.

DR. TIRADO: From a more practical standpoint, we cannot ignore the tremendous impact the insurance companies have had on all of our practices.

DR. KUROKI: The piles of paperwork and the time spent making phone calls to insurance companies take away from direct patient care.

RM: Why Riddle? In other words, why did you choose to become affiliated with Riddle Hospital, and what has kept you here?

DR. KUROKI: Initially it was a practical decision: Riddle is close to my home, and my own family members had positive experiences having babies here. But once I got here I thought, “I need to become part of the culture of this place.” During the past decade, I and other members of my department have worked hard to make sure that this is a collegial environment where the patient is always our foremost concern. Safety is a huge priority here. When Riddle joined Main Line Health system three years ago, I saw it as an opportunity to



broaden our exposure. About 7,000 babies are delivered across the system each year, and there is a wider breadth of resources available to us.

DR. TIRADO: The hospital has been serving the needs of this community for a very long time—for generations in many families. That really attracted me to Riddle, and I found it very welcoming when I was recruited here from another practice.

DR. HOPE: I live in the community and I have a personal stake in this place. What makes me want it to do well is that it is my hospital, my parents’ hospital, my kids’ hospital. If something happens to me or my wife, they are bringing us here. And that takes my commitment to a whole new level.

DR. KUROKI: I think that is so well-put. I grew up in this community, my parents still live here, and when my father isn’t feeling well I can bring him over, keep tabs on how he is doing, and the nurses all know him. That is very reassuring.

DR. APPLGATE: I find Riddle to be a wonderful place for babies to be born. The babies and the moms are well taken care of, and we in pediatrics appreciate that. Patients I cared for in the past are now coming back here to have their own babies and bring them to our practice.

DR. SHANK: I grew up in Newtown Square and my parents still come here when they are ill and receive excellent care. I wanted to stay in the community, and it has been a real privilege to care for patients who were customers at my dad’s gas station in Broomall. It is fun to reminisce about the old days and have a continuity that extends beyond my medical practice—they are friends and neighbors as well as patients. Another advantage is that Riddle is small enough for nurses and doctors to get to know their patients well, but big enough to attract high-quality specialty care.

DR. HOPE: I agree. Riddle is surrounded by some large, university-type medical centers, but it still attracts excellent specialists. Rarely have I ever had to transfer a patient out of Riddle for specialty care.

DR. APPLGATE: In pediatrics and the nursery, we have been fortunate to have neonatologists on staff in the hospital seven days a week, 365 days a year, for many years now. They can take care of any baby with any problem.

RM: Research has shown that people stay healthier when they have a regular primary care provider, and health care reform is placing more emphasis on the importance of this relationship. Consequently, more hospitals are emphasizing it as well. How do you see this affecting your practice now and in the future?

DR. KUROKI: We don't know with certainty what is going to happen under health care reform. But it's pretty clear we are going to have to do more with less, and there are



going to be some increased financial constraints on our practices. Many of us are dabbling in or already switching over to electronic medical records in our offices—and that is a challenging transition for any physician who has been in practice for a long time. We have close to 50,000 charts in our office that need to be switched over to electronic medical records, with limited staff to do so. The onus is on the provider to oversee the transition and learn how to use the system and maintain it. Although we understand this is needed and it is the way of the future, we know it is going to be grueling and somewhat time-consuming.

DR. TIRADO: I agree we are going to have to do more with less—continue to provide excellent care with less staff and less time for patient education. But we are going to have to find that time somewhere. Time is a huge challenge for everyone.

DR. HOPE: The time issue goes back to preventive care: it is a lot cheaper to keep someone healthy than it is to treat a disease, but preventive care is a tougher visit. It is harder to talk about preventing disease than something like changing your blood pressure medicine—that's easy. The conundrum is that you want to spend more time on a preventive visit, but you are going to have less time. And you get reimbursed less for your time, but you still have office staff and overhead.

DR. KUROKI: I am interested to see how insurance will play into all of this. As more people are uninsured, either because they are unemployed or they can't afford the contribution to buy into their employer-sponsored benefits, we



are going to deal with a whole population that cannot easily come to a private practitioner's office.

DR. TIRADO: And that leads directly to use of the Emergency Department for primary care. When people are ill and do not have insurance, they use the ED, and that ratchets up the cost of care and does not provide the continuity patients need, especially for chronic conditions such as diabetes or hypertension.

DR. APPLGATE: Going to the Emergency Department is an acute, one-time visit that cannot deal effectively with all of their health issues. Really all patients need a "medical home" where they can deal with all aspects of their health and lifestyle.

End of Part 1. In our next issue, the physicians will talk more about the medical home model, how patients can best work with primary care providers, additional challenges on the horizon for primary care at Riddle, and what they love most about their jobs and Riddle Hospital.

Helen Kuroki, MD

Moving Riddle “Well Ahead” as Vice President of Medical Affairs



For obstetrician/gynecologist Helen Kuroki, MD, moving her practice to Riddle Hospital almost a decade ago felt like “coming home.” This Delaware County native grew up in Collingdale, attended Villa Maria Academy and Immaculata College, and went to the University of Pennsylvania for medical school and her residency. She recalls Riddle Hospital being there throughout her life, with many of her relatives having positive experiences giving birth at Riddle.

“I’ve lived in this area as long as Riddle has been here,” she marvels. “It is particularly meaningful for me to give something back to the community where I was raised and educated.”

Not long after arriving at Riddle in early 2001, Dr. Kuroki decided she wanted to make an impact beyond the four walls of her office. She serves as director of Continuing Medical Education

(CME) for Obstetrics and Gynecology and on committees such as the Obstetrics Task Force and The Birthplace Advisory Committee. After Riddle affiliated with Main Line Health a few years ago, Dr. Kuroki also joined the system-wide CME Committee and became involved in the Main Line Health Women’s Heart Initiative.

In November 2009, Dr. Kuroki was named vice president of medical affairs, a new position at Riddle and the three other Main Line Health hospitals. She serves as the voice for Riddle physicians to both the hospital’s administration and the Main Line Health leadership. When her colleagues have an idea or concern, she can take it right to the top—and communicate the administration’s vision and priorities back to physicians.

“From a physician perspective, it becomes easier to see how an idea turns into policy,” Dr. Kuroki says.

“The new Main Line Health brand is ‘Well Ahead,’ and we want to engage all physicians in this mission,” she adds. “A major focus of my role is ensuring the highest quality of care and patient safety. I want to make Riddle Hospital the safest in the country, improve its patient satisfaction scores, and engage the medical staff in giving the best care possible.”

In her first year on the job, Dr. Kuroki has helped roll out some new safety initiatives across the system, including efforts to prevent hospital-acquired infections and readmissions as well as meet national standards set by quality organizations such as The Joint

Commission. She is also helping Riddle physicians recruit new doctors to their practices, making what she calls a “concerted effort” to grow the number of primary care physicians. She also spends a great deal of her time simply listening to her colleagues, attending numerous committee and department meetings so she can represent the physicians’ point of view to the administration.

“I feel lucky to hold this position at a hospital I know well, where I feel I am trusted, and where I can do my best to speak for my colleagues. And I have seen that the administration cares as much as we do about making the hospital strong, delivering quality care, and putting patients first.”

“It is particularly meaningful for me to give something back to the community where I was raised and educated.”

For Dr. Kuroki, giving back also includes philanthropy. She has consistently promoted Foundation efforts at Riddle—playing a leadership role in a campaign to raise funds for new fetal heart monitors, enthusiastically and actively supporting all fundraising events, making generous personal contributions to the Annual Fund as well as other special projects, and actively encouraging her physician colleagues to do the same.

“We all share the same goal: making Riddle Hospital the best it can be,” she says.

Michael F. Shank, DO
*Bringing Health Care to the Elderly—
Wherever They Need It*



Many of today's health news headlines point to a looming shortage of primary care physicians, particularly those trained to care for the elderly. Perhaps what the world needs now is more physicians like Michael Shank, DO, of Rose Tree Medical Associates, who was drawn to senior care three decades ago as a student at the Philadelphia College of Osteopathic Medicine (PCOM).

"Right away, I found people who are elderly to be such interesting, complex patients," Dr. Shank recalls. "Often, just a few small changes here and there—such as an adjustment in medication or a new therapy—would make a vast difference in the quality of their lives."

Those early experiences in problem-solving inspired Dr. Shank to build a career in geriatrics. He was also motivated by the example of a family doctor from his childhood who made house calls to his Newtown Square home. That model of primary care, in which a physician commits to seeing patients in any setting, appealed to him and seemed to be just what older patients and their families needed most.

After graduating from PCOM, Dr. Shank began teaching anatomy to first-year medical students—a role he continues today—and supervising their internships and residencies. He also started caring for older patients in their homes, at nursing homes, and at Riddle Hospital when they needed inpatient care.

"At first I literally was carting around medical records and working out of the trunk of my car," he recalls.

Before long he gained a partner and some office space, and over the years Rose Tree Medical Associates has grown into a practice of 13 physicians based at Riddle in Health Center 3. The core philosophy remains the same: follow patients wherever they are, and give them the continuity of care that can only come from a primary care physician who knows them well.

"It is especially important for older patients and families to establish the rapport with a physician who will follow them throughout the continuum of care," Dr. Shank says. "We do not rush our patients. They often have complicated medical situations with multiple problems that need to be addressed.

"To simply tell a patient, 'Well, you're old,' just doesn't feel right to me. If someone is having a health issue, we need to work together to fix it."

Dr. Shank continues to take his practice on the road by seeing patients at White Horse Village in Newtown Square, where he is medical director; at other nursing homes; and in their private residences. He works seven days a week and concentrates on his house calls—an estimated 10 to 20 per week—on the weekends. It's a rigorous schedule, but one that allows him to be the kind of doctor he always wanted to be. As fewer young physicians choose primary care and geriatrics, he remains more committed than ever to forging long-term relationships with patients and their families to help them live well into old age—and that includes end-of-life care.

"We also must bring our efforts to giving patients a peaceful passing when the time comes," he says. "Care given without a clear purpose can be torture. It is important to help patients and families recognize when treatment of symptoms is no longer the answer and hospice care is the appropriate course of action."

Recently, two of Dr. Shank's long-term patients, Janet Fullmore and Nancy Most, made significant bequests to Riddle upon their passing—a testimony to the power of the relationship that binds patient, physician, and hospital. Dr. Shank says he feels fortunate that he and his patients have access to all of the resources available at Riddle, from diagnostic testing to excellent inpatient and specialty care.

"Having Riddle as my hospital makes me a better physician," he says. "This is a great community with a great commitment to the future."

Recently, two of Dr. Shank's long-term patients, Janet Fullmore and Nancy Most, made significant bequests to Riddle upon their passing—a testimony to the power of the relationship that binds patient, physician, and hospital.

When Joseph Hope, DO, joined Michael Shank, DO, at Rose Tree Medical Associates nearly 15 years ago, he knew he was signing up for much more than a 9-to-5 job. With a large population of elderly patients, this primary care practice is committed to seeing patients not only at its office in Riddle's Health Center 3, but wherever they need care: in their homes, at local nursing homes, at Riddle Hospital, in hospice. Dr. Hope wears many hats in testimony to that commitment. In addition to holding office hours, he is an attending physician at Riddle Village; he is medical director at both Heartland Hospice in Chadds Ford and Naamans Creek Country Manor in Boothwyn; and he follows his patients at several nursing homes.

Yes, it's challenging, but Dr. Hope would not have it any other way. He likes the fact that "every week is different," but even more importantly, he enjoys building the kinds of close relationships that are the foundation of excellent primary care. He worries that this philosophy could become a thing of the past.

"There is a renewed sense of energy and momentum at Riddle, and our physicians have an important role to play in its future."

"When a primary care physician follows the patient through the entire care process, things are less likely to go wrong," Dr. Hope says. "When practicing medicine becomes only about having office hours—not going to the hospital or nursing home or even making a house call if needed—it becomes much too fragmented to truly help

Joseph D. Hope, DO

Leading by Example as New Medical Staff President



the patient. We have to find ways to get primary care physicians to every setting of care."

It's an attitude he hopes to promote during his two-year term as president of the medical staff at Riddle Hospital, a post to which he was elected in May. Dr. Hope has been a member of the Medical Executive Committee for nine years and chief of Internal Medicine at Riddle for three years—so this role represents a natural progression for him.

"I like to be involved," he says. "There is a renewed sense of energy and momentum at Riddle, and our physicians have an important role to play in its future."

His main goal is to work with fellow physician leaders and administrators in looking for opportunities to improve the quality of care. He also wants to engage the more than 600 physicians on staff at Riddle in the day-to-day life of

the hospital. Dr. Hope believes that their input and leadership are critical as administrators work to move the hospital forward in a number of different areas—including the improvement of facilities.

"Our patient satisfaction scores are very good, but we are limited by certain aspects of the physical plant," he says. "We have the space to build, and if we can start with the Emergency Department and then move on to other floors, I think we can make Riddle the absolute best it can be for our patients and for us."

"The potential is tremendous and the time is now," Dr. Hope adds. "For me and so many of my colleagues, Riddle isn't just the hospital where we work. It's where our family members come to receive care, it's the place that is here for us in case of emergency. We all have a vested interest in the future of Riddle Hospital."

Riddle Stroke Center Helps Ben Get Back on His Feet

In the pre-dawn hours of June 17, 2009, Ben Franklin came to Riddle Hospital's Emergency Department (ED). Not the real Ben Franklin, of course, but the next best thing: Nether Providence resident Ralph Archbold, who for three decades has portrayed Ben on the streets of Philadelphia, in the process becoming one of the city's most beloved icons. Archbold was just a few weeks shy of his first anniversary with wife and Betsy Ross impersonator Linda Wilde Archbold: The two were married by Mayor Michael Nutter in front of Independence Hall on July 3, 2008.



Linda Archbold had called 911 when Ralph tried to get out of bed and collapsed. Within 14 minutes of the call, the couple found themselves in Riddle's ED, where Ralph was quickly evaluated by an Emergency Department physician, who initiated treatment and contacted David Thomas, DO, PhD, Chair of Neurology and Medical Director of the Stroke Center. Soon it was decided that Ralph needed more specialized treatment, and he was airlifted to the Hospital of the University of Pennsylvania—the university founded by Ben Franklin himself.

“Although I was frightened, I was comforted by the presence of such a caring and compassionate physician as Dr. Thomas,” Linda says. “He was already close to my heart because of the way he cared for my father, who had a massive stroke in 1996 at age 90+ that left him brain dead and took his life.”

Ralph would be much more fortunate: Linda recalls that he was working Sudoku puzzles in his room the very next day, which everyone took as a good sign that the stroke had not seriously affected his mental abilities. She adds that the stroke was likely connected to Ralph's atrial fibrillation (irregular heart rhythm), as he had not kept up with taking the blood thinner Coumadin that had been prescribed for him some years ago to prevent blood clots from forming. About 15 percent of all strokes occur in people with atrial fibrillation.

“This is my public service announcement: A-fib and stroke are linked, and people with a-fib need to be aware of this and follow the advice of their doctors,” Linda says.



Linda (Betsy Ross) and Ralph (Ben Franklin) meet with David Thomas, DO, PhD for a follow up discussion.

While Ralph recovered at Penn, Linda would come home every day to literally hundreds of email and phone messages, which she says were a great source of support. All she had to do was mention the first names of some of the well-wishers and Ralph immediately knew who she was talking about—another very encouraging sign. After a month at Penn, Ralph spent two months at Main Line Health’s Bryn Mawr Rehabilitation Hospital, where he worked to strengthen his left arm and his fine motor skills, which had been affected by the stroke.

But he says the high point of his care was coming back to the Riddle Stroke Center to continue his recovery as an outpatient—a process he credits with helping him get back to portraying Ben Franklin by the fall of last year.

“I can’t say enough good things about what Riddle has done for me,” Ralph says. “Every step of the way, I’ve felt secure that I am getting the care I really need. And I am getting it in a terrific facility where people bend over backwards to get me what I need.”

“Every step of the way, I’ve felt secure that I am getting the care I really need.”

Working with Dr. Thomas and his colleagues, Joyce D. Liporace, MD, for neurology care and Danielle T. DiGregorio, PsyD, for behavioral care, Ralph has undergone procedures such as a comprehensive three-hour neurological evaluation to check his brain capability, and a carotid artery study to look for any buildup of plaque in the main arteries of the neck that feed blood to the brain. Behavioral therapy sessions have helped him develop strategies for compensating when he cannot find exactly the right word or when he has to “multi-task” mentally—a common experience for a person who regularly delivers speeches and makes hundreds of public appearances annually. Ralph notes that these are just a few examples of the critical role Riddle has played in helping him return to the work he loves.

“Here I feel as if nothing is ever being missed,” he says. “I am working with the most competent people you can imagine, who also show me the highest level of care and concern.”

Ralph is back to a full schedule of appearances as Ben Franklin both locally and up and down the east coast, often with wife Linda as Betsy Ross by his side. Many days he can be found at Franklin Court in Old City, bringing Ben to life for visitors from throughout the nation and the world. Ralph was especially thrilled to be back in the 2010 July 4th parade, which he missed last year for the first time since 1981. He is a much thinner Ben now—he has lost around 175 pounds, a process he began before having the stroke—and he still struggles a bit with his voice and range of motion in his left arm. But he and Linda have no doubt that his physicians at Riddle will get him back to where he wants to be.

“I guess you can’t keep a good Ben down,” jokes Linda. “He’s had phenomenal care every step of the way, and we couldn’t be more grateful.”

Riddle Earns Gold Certification as a Primary Stroke Center

In May 2010, Riddle Hospital earned the Gold Seal of Approval™ as a Primary Stroke Center from The Joint Commission, the nation's oldest and largest standards-setting and accrediting body in health care. This distinction recognizes Riddle for providing all the critical elements of stroke care that have been shown to improve outcomes for patients.

The journey toward Gold certification began almost two years ago, when each Main Line Health hospital formed its own stroke committee to look at the care provided and bring it in line with The Joint Commission's standards. A main goal was speeding time to evaluation and treatment for those with stroke symptoms, since lost time can mean more healthy brain tissue lost.

The primary treatment for people experiencing stroke is a clot-dissolving medication called tissue plasminogen activator, better known as tPA. Not every-



Beverly Stollsteimer, RN, Patient Care Facilitator, handles a patient's discharge.

one is a candidate for tPA—but for those who are, the treatment is effective only if given within three hours of the onset of stroke symptoms. The first step is evaluating the person with suspected stroke by ordering a CAT scan of the head and a number of blood tests.

“All of this has to happen in a concerted and yet rapid fashion, and it involves many different people—from emergency medical technicians in the field, to nurses, to Emergency Department physicians and the neurologist, to CAT scan technicians, to the pharmacy,” notes Dr. David Thomas, chair of neurology. “And it all has to happen within three hours of the onset of symptoms. So really it was about training everyone with reference to this goal.”

“Certainly we always knew what to do, but we have smoothed out the logistics of it, and now there is a stopwatch going,” adds Michael Goodyear, DO, chair of emergency medicine at Riddle, who also served on the stroke committee. “Everyone is on the same page to get patients from the ED to the CAT scan to the neurologist quickly—and that is hard to do until you have a planned-out process that everyone has agreed on and had input into. Now when you hear a ‘Stroke Alert’ called, it’s like flipping a switch and everything goes into motion.”

Whether or not a patient can receive tPA, he or she also must be treated in accord with the American Stroke Association’s “Get With The Guidelines” program—ten care steps that have been shown to improve long-term outcomes for people with stroke.



*Michael Goodyear, DO
Chair of Emergency Medicine*

These range from what kinds of medication should be given and when, to what topics stroke education should address with patients and their families. According to Bev Stollsteimer, RN, patient care facilitator for Riddle's stroke unit, Riddle had all of these services in place but needed to make sure they were delivered in keeping with the guidelines. “As we follow the guidelines, we know that we are in line with what other hospitals are doing to give the best stroke care, the care becomes more uniform, and patients have better outcomes,” Stollsteimer says.

After Lankenau Hospital, Riddle became the second Main Line Health hospital to achieve Gold certification from The Joint Commission.



“Everyone involved met this challenge with real motivation and a sense of personal responsibility,” says Dr. Thomas. “This was their gift to the community. In keeping with the Main Line Health brand, our aim really was to put this community ‘well ahead’ when it comes to stroke care.”



Wawa CEO Howard Stoeckel: *Wawa and Riddle, Never Standing Still*

The year: 1967. The place: John Wanamaker's Department Store. New college graduate Howard Stoeckel is passing time at the soda fountain before a job interview in Philadelphia. He notices a sign for the employment office and decides to investigate as a way of practicing his interview skills. Long story short: He is offered a job and accepts it on the spot, beginning a 14-year career with Wanamaker's that led to an executive position in human resources.

Seizing new opportunities for change and growth would become a theme in the career of Wawa CEO Howard Stoeckel, who went on to gain experience in two very different industries—a utility company and a large apparel retailer—before arriving at Wawa in 1987. There too he has always been on the move, holding leadership positions in human resources and marketing before being named CEO in 2005. He says that Wawa's culture is the perfect fit for him because it “embraces change” (one of its six corporate values) as it fulfills its mission of simplifying customers' lives—with just a few recent innovations including TouchScreen food ordering, new prepared food offerings, gasoline

service, and surcharge-free ATMs. Stoeckel firmly believes that change is the lifeblood of success for executives and their organizations, perhaps now more than ever.

“In today’s world, you can’t stand still,” he says. “In business you have to keep learning, stay young, stay refreshed, keep trying new things.”

He credits that attitude with the longevity of Wawa, which operated as a dairy for most of its 200 years before shifting its focus to convenience stores in 1964. It opened its first store in Folsom and a headquarters right off Route 1 on the estate of the company’s founding family, the Woods. That same year, just three miles up the road, the newly-founded Riddle Hospital was beginning to meet the health care needs of Delaware County residents. Stoeckel points out that the two organizations have “grown up together” over nearly five decades, which made it especially meaningful for him to serve on the Riddle Hospital Board of Directors from 2002 until mid-2010, acting as board chair from 2004 to 2007.

“I was the fourth executive from Wawa to serve in a governance role at Riddle,” Stoeckel says. “It started with Grahame Wood, who founded the convenience store business here at Wawa and joined the Board in the late 1960s. He was followed by my predecessor, CEO Dick Wood, then CFO Ed Chambers, and then I served for eight years. So there has been someone from Wawa on the Riddle Board for almost its entire 47-year history.” That tradition of Board service at Riddle will continue, as Richard D. Wood, III, recently joined the Foundation Board.

But it was more than just tradition that motivated Stoeckel to join the Riddle Board. He wanted to learn about health care, contribute to a vital community service, and help Riddle position itself for longevity. He credits former Riddle CEO Dan Kennedy and the entire executive team with the courage to embrace change as they contemplated the best path for Riddle, ultimately deciding to affiliate with Main Line Health. Having a

front-row seat to that process while also providing advice and guidance was “an incredible privilege” for Stoeckel.

“We talk here at Wawa about being built to last, about sustainability, taking a long-term point of view,” he stresses. “Similarly, the decisions made by the leadership team at Riddle during my years on the Board solidified the organization for the long-term. It really was an exciting time for me to serve.

“Today Riddle has the best of both worlds,” Stoeckel adds. “It still feels small, intimate, and just like the community hospital it is, but now it has the advantages and support of a large, progressive, successful organization in Main Line Health. Riddle had a strong brand reputation and was well-respected, but an independent community hospital does not have access to resources such as capital and infrastructure, and that can be challenging—particularly in the competitive world of health care. And I can’t help but compare that to Wawa. We have 575 stores in five states. Each one is small, it is part of its own community, and it focuses on serving one customer at a time. But as we have grown, we have added the support and infrastructure that is needed to allow the stores to succeed.”

After Riddle joined Main Line Health in 2007, Stoeckel also became a member of the health system’s Board of Governors, gaining further insight into the workings of a larger health care organization and observing a transition for Riddle that he describes as “smooth, seamless, and people-focused.” Soon he took on yet another leadership role that would prove key to Riddle’s future: chairing the search committee for the hospital’s new president.

“The Main Line affiliation was one of those transformational milestone events that you don’t get too often in business,” Stoeckel says, “so then to be able to participate in bringing the right leader in for Riddle—Gary Perecko—was a special opportunity.”

“Today Riddle has the best of both worlds. It still feels small, intimate, and just like the community hospital it is, but now it has the advantages and support of a large, progressive, successful organization in Main Line Health.”

What also makes Stoeckel’s relationship with Riddle special is the fact that the hospital is a primary source of health care for so many Wawa associates who reside in Delaware County. Wawa has been a generous supporter of Riddle Hospital over the years, most recently making a significant gift toward Emergency Department improvements. Although the company already has numerous community service projects of its own, it teams up with Riddle every year to support Operation Warm, a fundraising effort to provide winter coats to Delaware County children.

“In my eight years on the Board, I hope I helped make Riddle better, but I know for sure that Riddle made me better,” Stoeckel says. “Board membership is a two-way street: It’s an opportunity to serve, but also to learn. By reaching out and serving others and participating in other businesses, you become a richer person. I am more effective in my role at Wawa today because of the opportunities I had at Riddle.”

Howard Stoeckel is not standing still. He continues the tradition of innovation at Wawa, balancing that role with a busy family life centered around his wife, Lita, three grown children, and four grandchildren. And don’t be surprised if you see Howard Stoeckel the patient wending his way through Riddle’s Health Center 1 and 2.

“I have a great group of doctors over there who are incredibly patient-focused,” he says, “and it really couldn’t be any more convenient!”

A Focus on Philanthropy

Building Riddle's Future Together



Peter Sharkey, MD

Discovering a New Home and a Bright Future at Riddle

During nearly two decades with the Rothman Institute, orthopaedic surgeon Peter Sharkey, MD, has earned high regard internationally for expertise in hip and knee replacement—publishing papers, participating in professional organizations, training fellow physicians, and most importantly, helping countless patients get back to the lives they once knew. Today he is also earning high regard right here at Riddle Hospital. In addition to seeing patients and operating here full-time since 2008, he became medical director of the Rothman Institute at Riddle when it opened last fall.

It's hard to believe that as recently as five years ago, Dr. Sharkey knew nothing about Riddle Hospital.

"Mike West, the CEO of Rothman, came to me in 2005 and said that a number of suburban hospitals out here were interested in opening a Rothman office," recalls Dr. Sharkey, who had opened new locations before. "I had experience with all of

them but I didn't know anything about Riddle. So I said let's go out there and take a look."

Almost immediately, he knew he had found Rothman's newest home.

"The facility wasn't quite what we needed, but once I started meeting the people at Riddle, I knew this was a place where we could be really successful," Dr. Sharkey says. "I was so impressed by the hospital's leaders, the nurses, the therapists, the anesthesiologists. My thinking was, 'We can always upgrade the facility, but the right people are already here.' I could see the potential and it turned out to be the right choice. My patients get phenomenal care, and I work with a great surgical team."

Today, Dr. Sharkey heads up the thriving Rothman Institute at Riddle, with more than a dozen orthopaedic specialists in Riddle's new Health Center 4. He also feels more committed to the future of Riddle Hospital than ever. In addition to

joining The Riddle HealthCare Foundation Board last year, he made a \$25,000 unrestricted gift to the hospital—a level of generosity he plans to continue.

"I have bought into this place hook, line, and sinker," Dr. Sharkey says. "This is a great hospital with amazing people. Now we need to make sure the physical plant matches the quality of the people—their ability, their talents, their energy. The new Health Center 4 was just the linchpin in a master plan that can transform the entire facility. And I want to be a part of that."

Dr. Sharkey says he joined the Foundation Board because he wants to "have a voice" in the hospital's continued growth and improvement. And he urges colleagues and community members to consider supporting Riddle.

"People want to make sure they are giving to a good cause, the money is truly needed, and it will be used appropriately," he says. "I can say for sure that Riddle is a worthy cause, the funds are needed, and the end result will be better care for the people of Delaware County." He adds that attracting young physicians to build their careers at Riddle also depends on having first-rate facilities and technology.

"Riddle has accomplished so much recently in a relatively short amount of time," Dr. Sharkey adds. "I firmly believe that some day we will look back and say, 'We thought we had come a long way in 2010, but just look where we are now!'"

"I can say for sure that Riddle is a worthy cause, the funds are needed, and the end result will be better care for the people of Delaware County."



Health Seminars for Business

Keeping Employees Healthy, Happy and Productive

Within one mile of Riddle Hospital, Pilot Freight Services, housed in the Old Lima School, is a growing and thriving international business that solves problems associated with moving freight for other businesses.

CEO Richard “Rich” Phillips leads the company’s 217 employees in a position that he took over from his father. An attorney who served at the Department of Justice and later as counsel to Senator Kennedy and then Senator Leahy, Rich learned an important lesson from his dad about the overwhelming power of people.

“If people are motivated and confident; if they feel respected and appreciated, if they feel they have a mission, and if they feel they are part of a team, they can do absolutely anything,” he says.

This is the philosophy behind a partnership recently developed between Riddle and Pilot in which Riddle will deliver customized health seminars to Pilot employees as part of our “Well Ahead” outreach to area businesses to build awareness of preventive measures everyone can take to stay healthy. The seminars give employees a better understanding of how important personal decisions are in promoting good health.



Pilot Freight Services wants healthy employees because they are better workers, miss work less often, and are more productive. Employees spend a large part of their waking day at work and a healthy environment is an asset. “If you don’t act as if you are employing the entire person, then you will never do all that you can for the community,” says Rich. “We feel lucky to have Riddle so close to us. By bringing the seminars to the workplace, we can offer this opportunity to many more people.”

As a result of this collaborative relationship, Pilot recently became a corporate member of the Foundation’s Samuel D. Riddle Society.

If you think your company would be interested in a partnership with Riddle, contact The Riddle HealthCare Foundation, at 610.627.4701.

Nancy and Harry Most

A Grateful Couple Gives Back

Nancy and Harry Most lived on a farm in Chester Springs, raising their beloved German Shepherds and enjoying the outdoors. For years Nancy was very active with the Great Valley Nature Center, welcoming inner-city children to the educational programs she hosted on their farm.

When the work on the property became too much for them to manage, they found a new home at White Horse Village in Gradyville, PA. They chose Riddle Hospital for their medical care and Dr. Michael Shank attended to their medical needs. When they became too frail to travel to Dr. Shank, he visited them in their home.

Nancy and Harry had been donors to Riddle since moving to Gradyville and it was a natural extension of their giving to direct a significant bequest in the amount of \$84,000 to The Riddle HealthCare Foundation upon their passing within a few months of each other in 2009.

Harry’s sister, Georgette Most, also lives in White Horse Village, is a donor to Riddle and receives her medical care from Dr. Shank. “We use Riddle and love the care,” she said in a recent phone conversation, “and it makes sense to give back to the place you care about.”

Riddle Events 2009-2010



Main Line Health introduces new branding

At precisely 1:30 pm on September 15th, employees of all Main Line Health hospitals gathered at their respective workplaces to unveil the new *Well Ahead* mission and logo. Riddle's celebration featured senior leaders with hula hoops, balloons, healthy snacks and introduced the *Well Ahead* dancers. With music of The BeeGee's and "Stayin' Alive"

pumping out of speakers, the corps of employee-dancers received cheers and applause for their routine, choreographed by Mary Beth Powell, a nurse here at Riddle. Gary Perecko addressed the crowd with comments on the new branding (see Gary's letter on the inside front cover) and Ralph Lardieri, Wellness Manager for

Wawa Inc., pumped up everyone with his positive message of living a healthy lifestyle. Riddle employees lined the pavilion staircase and upper levels of Health Center 3 to view the event, then joined others below to sign the *Well Ahead* banner—showing their commitment to the new mission and vision for Main Line Health and Riddle Hospital.



Board of Directors Cocktail Reception

The Annual Cocktail Reception hosted by the Boards of Directors of Riddle Hospital and The Riddle HealthCare Foundation was held at the Overbrook Golf Club in Villanova on Sunday, October 24. Attended by more than 200 guests, the event raised over \$15,000 to benefit The Fund for Nursing Excellence which provides resources to increase professional development activities for Riddle nurses and supports innovative grants that help to improve patient satisfaction, safety and collaboration.



A rare glimpse of Riddle nurses out of uniform as they enjoy an evening of fun at Overbrook, hosted by Sue and Jim Walsh. Front row sitting: Jean Groswith, Louise Hummel, Donna Meehan, Sharon Wilson, and Renee Postles. Back row standing: Nancy Valentine, Senior Vice President and Chief Nursing Officer, Main Line Health, Annette Pierdomenico, Eileen Phillips, Lisa Magargal, Matt Magargal, Sue Walsh, Jim Walsh, Maryse Carrenard, Lisa Sanfilippo, Elaine Dunn, Beverly Militello, Fiona Duffy, and Ann Marie Brooks, Vice President, Nursing, Riddle Hospital.

Golf Outing



The winning foursome at The Riddle HealthCare Foundation's annual Pro-Am Golf Outing, held at the DuPont Country Club in September, included (L-R) John Rayer, Rev. Larry Smoose, Dr. David Thomas, Golf Pro Mike Tobiason and Dr. Jerry Francesco. More than \$37,000 was raised at this year's event to benefit Riddle's new Comprehensive Breast Center.

Man O'War Gala



Great smiles say it all

Joe and Cathy Granger join Gary and Cindy Perecko



Theresa Murtagh, Christine Acchione, Paul Murtagh



Liz Gragg, Kristen Smith, Sally Sharkey, Maureen Lewis, and Kim Russo



Sue and Jim Walsh

RIDDLE DOWNS—

“Building Riddle’s Future..... Together!”

The spirit of philanthropy was alive and well during our 2010 Riddle Downs Employee Giving Campaign. A steering committee of eight worked with 50 volunteer “jockeys” representing nearly every department, to run the campaign, raising \$65,000 for Riddle.

Gifts were received from 445 employees and 17 departments boasted 100% participation.

Steering Committee members included: Laurie Maddesi, Katie Rodriguez, Christine Noah, Leslie Pellini, Rosemary Mignogna, Bill Newcomer, Liz Gragg, and Nadrah Hassan.

Outstanding jockeys included: Anthony Bishop, Donna Hihn, Lynn Nichols, Betty O’Leary, Mary Beth Schievert and Marcia Sudol.



Staff of Short Procedure Unit—always the 1st of our 100% Participation Departments !

We get mail!

Dear Riddle Hospital,
I was a patient in August, 2010 following spinal surgery performed by Dr. Jeffrey Rihn. Having been in various hospitals over the years, never have I received the quality of care that I did at Riddle. The care was without a doubt the best.

The nurses and techs were so efficient and compassionate, I felt like a celebrity! In today’s world that is quite unusual.

*G. Genzone
Ringo, NJ*



Riddle joins with State Farm to help save lives.

Students witness a powerful presentation by community emergency personnel.

By 9:30 am the parking lot at Penncrest High School was full of emergency fire and ambulance vehicles and their crews, police, crashed cars and injured youth. Gathered on the grass to witness an accident scene unfold before their eyes were 550 seniors and juniors.

This was a staged reenactment of an accident scene involving two cars driven by teens. The drivers and their passengers all suffered mock injuries in a crash caused by a drunk driver. Responders had full gear and actual equipment used at accident scenes to extract the victims.

An indoor presentation by the Cruisin’ Not Boozin’ Program of Bryn Mawr Rehab Hospital followed the outdoor segment. Ray Lavois, a Penncrest High School graduate and an actual accident victim, shared his story of bad decisions, consequences, injury and recovery.

For the third year in a row, The Riddle HealthCare Foundation was awarded a grant from State Farm Insurance Company as part of The National Teen Driver Safety Initiative to help stage the Mock Crash.

“Motor vehicle crashes are the number one cause of death among teens in this country. One in four

crash fatalities involve a 16- to 24-year old driver. State Farm, along with our partners here today, are working hard to change these alarming statistics. With driver safety education and increased supervised drive time behind the wheel, we can have a positive impact on our kids’ decisions that help prevent risky behavior and hopefully save lives.” said Dave Phillips, Public Affairs Specialist at State Farm.

“In the past two years, students have shared with me that seeing their classmates in this Mock Crash had a real-life impact.” said Eric Bucci, Assistant Principal at Penncrest. “We hope that this presentation will help save lives.”

Following the expansion in 2009 of Henderson High School in West Chester, Riddle will turn this unique program over to Paoli Hospital to expand into its service areas in Chester County. Riddle can then concentrate on bringing the presentation to more communities closer to our campus and ensure that more Delaware County students will hear this important message of safety.

“In the past two years, students have shared with me that seeing their classmates in this Mock Crash had a real-life impact.”

Dr. David Bosacco honors his mother with a scholarship fund

A mother's love is powerful and continues for generations. Such is the case with Mayre C. Bosacco, the mother of Dr. David Bosacco, one of Riddle Hospital's legendary surgeons. Growing up in Glenolden as the oldest of four boys, he attended Lebanon Valley College on a football scholarship. He went on to pursue medicine at Hahneman, and then to the Air Force Medical Program at Langley, where he built the orthopaedic department during the Vietnam War. Soon he was back in Delaware County practicing at Riddle as a surgeon, eventually focusing on a spine and joint practice. In 1972 he became chief of the Orthopaedics Department, a title he holds to this day.



Dr. Bosacco understands the importance of philanthropy and has made generous donations to various funds at Riddle over the years. He began contributing to the Nursing Scholarship Fund in 2001 after years of working alongside outstanding nurses and recognizing how many also were enduring expensive educational costs. Specializing in orthopaedic surgery he wryly stated "Nurses are the spine of healthcare and take care of everything if they are well trained!" His wife, Priscilla, who is a nurse, also influenced his decision.

In 2004, he named the fund in memory of his mother. This year six Riddle nurses, Thomas Felizzi, Mary Fursman, DeSales Foster, Maureen Lewis, Stephan McDonald and Kristin Norko, were awarded the Mayre C. Bosacco Memorial Scholarship in support of their continuing education.



Priscilla and David Bosacco, MD

Meet the New President of the Associated Auxiliaries



Kathy Warren always planned to join the Associated Auxiliaries of Riddle Hospital upon her retirement from Riddle, but the role of president was not what she had in mind. Still, ready to meet any challenge, she hit the ground running in June.

"The challenge ahead for Riddle's Auxiliaries is to build membership and strength. One way we are looking to accomplish this is by joining forces with the employee activity group, STAR, to engage our employees even more."

Kathy started with Riddle as a nurses' aide, then became an RN while going to college with assistance from the hospital's tuition reimbursement program. She continued at Neumann for her BSN and on to Widener University for her MBA.

Kathy eventually became Assistant Director of Nursing at Riddle, then Riddle Village Director of Nursing and finally returned to Riddle Hospital in the Pre-Admission Testing Department until her retirement this year. "I couldn't have accomplished all this without the financial help from Riddle," Kathy noted, "now it's time to give back."

The Riddle HealthCare Foundation gratefully acknowledges the hard work and dedication of all members of the Associated Auxiliaries, who helped raise more than \$400,000 in FY2010.

2010 Officers

Mrs. Catherine Warren, President
Mrs. Alycia Mallon-Buhle, Vice President
Mrs. Sandy Jaeger, Treasurer
Mrs. Janice Duryea, Assistant Treasurer

2010 Report to the Community

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(As of June 30, 2010)

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The Riddle HealthCare Foundation

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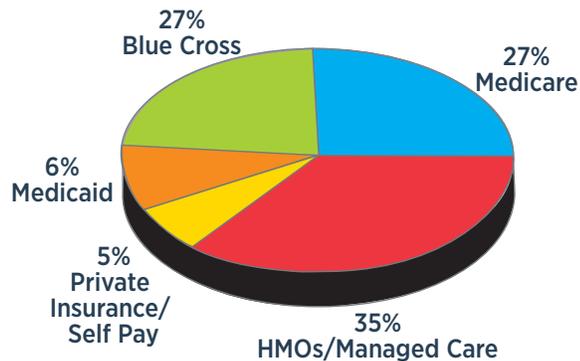
The Riddle HealthCare Foundation Board members gather to review FY2011 plans. (L-R) Standing: David Thomas, DO, PhD, John Unangst, Richard Wood, III, and Don Saleski (L-R) Sitting: Catherine Warren, Catherine Granger, Thomas Bruder, Peter Sharkey, MD, Albert Berman, and Theresa Murtagh, Esq.

Financial Report

Fiscal year 2009 - 2010

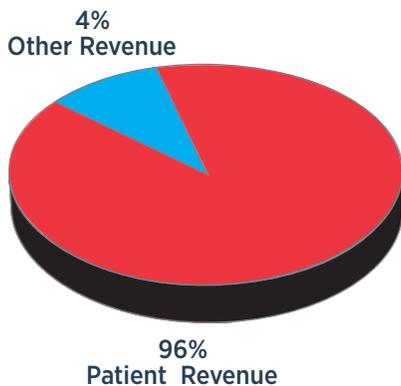
Patient Care Revenue

Medicaid	6%
Private Insurance/Self Pay	5%
Blue Cross	27%
HMO's/Managed Care	35%
Medicare	27%
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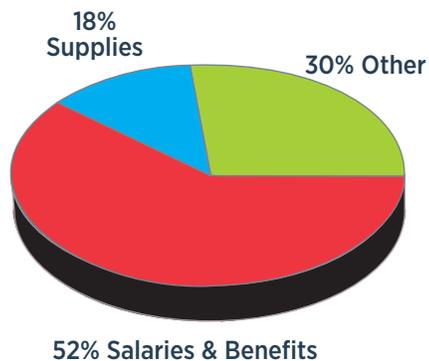
Operating Revenue & Expense

Operating Revenue



Net Patient revenue	164,829
Other revenue	6,592
Total	171,421

Operating Expenses



Salaries & benefits	91,782
Supplies	31,643
Other	53,444
Total	176,869
Funds for Reinvestment	(5,448)

(In Millions)

Hospital Facts

Licensed beds:	207
Bassinets:	24
Admissions	11,883
Births	950
Emergency Department Visits:	32,934
Inpatient Surgical Procedures:	3,599
Outpatient Surgical Procedures:	6,600
Full Time Employees:	1,169
Physicians:	Active: 409
	Courtesy: 123
	Total : 532
Number of Volunteers:	361
Volunteer Hours:	52,923
Avg daily census:	132
Patient days:	54,868
Length of stay:	4.3

The Samuel D. Riddle Society

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Dr. N. Susana Yaron and
Mr. Barak Yaron

2010 Donor Recognition Clubs

The Samuel D. Riddle Society

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Recognizes the most substantial contributions to Riddle. We are especially grateful for the outstanding leadership of these donors. An annual gift of \$10,000 or more acknowledges membership in this club.

Trustee's Council

Recognizes annual gifts of \$5,000 to \$9,999

President's Council

Recognizes annual gifts of \$2,500 to \$4,999

Society Member

Recognizes annual gifts of \$1,000 to \$2,499

Friends of Riddle

Associate

Recognizes annual gifts between \$500 and \$999

Friends of Riddle Associates

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Women's Health Care Group of PA—
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The Riddle HealthCare Foundation received more than \$1.8 million in cash to support programs and services at Riddle Hospital last fiscal year (July 1, 2009 to June 30, 2010). Donors who made gifts of \$500 or more are listed in the printed version of this issue of Riddle Matters.

In order to be better stewards of our resources, which include your charitable donations, we now list the full Donor Report online rather than in print. To view the complete list please visit giving.riddlehospital.org and click on our online 2009-2010 Report to the Community.

You will also see lists of donors to Main Line Health, along with all tributes and memorials. Very special thanks to the very generous donors who have supported Riddle and helped us provide quality healthcare and superior service in order to promote the quality of life in our communities.

Please contact Ellen Grill at 610-627-4701 or grille@mlhs.org if you have any questions.

A Lasting Legacy

The Man O'War Society

If Riddle is already included in your will, you qualify for membership in The Man O'War Society. Your future gift to Riddle presents an extraordinary opportunity for you to make a lasting contribution and continue the legacy of Samuel D. Riddle for generations to come. For further information about becoming a member, please contact the Development Office at (610) 891-3651.

Man O'War Society Members

Ms. Mary Anne Bogie
Dr. and Mrs. David N. Bosacco
Dr. and Mrs. Robert C. Brod
Mrs. Emily Dannaker
Mr. Steven R. Derby
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Riddle Hospital Medical Executive Committee

As of June 30, 2010

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Kenneth J. Boyd, MD

Vice President
Joseph D. Hope, DO

Treasurer
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Secretary
David A. Thomas, DO, PhD

Member-at-Large
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Past President (ex-officio)
Robert J. DiGiovanni, MD

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Emergency Medicine
Michael H. Goodyear, DO

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Medicine
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Obstetrics & Gynecology
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Pathology
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Pediatrics
Russel C. Applegate, MD

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Surgery
Hassan C. Vakil, MD

Hospital Administration:

President
Gary L. Perecko

Vice President of Nursing
Ann Marie Brooks, RN, DNSc, MBA

Main Line Health System Leaders

We gratefully acknowledge the donors in this category, who are recognized for their contributions to more than one entity in the Main Line Health System, at the level of \$10,000 and above, in total.

In fiscal year 2009 (July 1, 2009 - June 30, 2010), these grateful patients, community friends, employees, physicians, corporations and foundations supported programs and services at two or more of the following entities: Bryn Mawr, Lankenau, Paoli, Riddle Memorial and Bryn Mawr Rehabilitation Hospitals; Main Line Health; the Lankenau Institute for Medical Research; or special events supporting these organizations.

Gifts of \$1,000,000 and above
Dorrance H. Hamilton Charitable Trust

Gifts of \$500,000 to \$999,999
Mr. Gary and Mrs. Patricia Holloway
Lucille Mellon Holloway Trust

Gifts of \$250,000 to \$499,999
Mrs. J. Maxwell Moran
Mr. and Mrs. John J. Mullen
The W.W. Smith Charitable Trust

Gifts of \$100,000 to \$249,999
Mr. and Mrs. James M. Buck III
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The Women's Board of Lankenau
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The Gift Shop
The Hamper Shop
Ladies Aid Society
Nurses' Alumni Association

Gifts of \$50,000 to \$99,999
The Ball Family Foundation/
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Mrs. W. Perry Gresh
The Kanter Foundation
Mrs. George Conrad McFarland
St. Jude Medical Foundation
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Gifts of \$25,000 to \$49,999
Mr. and Mrs. Stephen Berman
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The Zisman Family Foundation

Gifts of \$10,000 to \$24,999

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Mr. and Mrs. William G. Warden III

Donors to Main Line Health, The Parent Entity

We gratefully acknowledge the donors listed below, who chose to support Main Line Health, the System's not-for-profit parent entity. These gifts of \$500 or more helped to underwrite programs and services throughout the System.

Gifts of \$100,000 to \$249,999
Mr. and Mrs. N. Peter Hamilton

Gifts of \$10,000 to \$24,999
M & S Foundation
Gifts of \$5,000 to \$9,999
Ellen D. Harvey and Tad G. Sperry

Gifts of \$1,000 to \$2,499
Gary S. Daum, M.D. and
Jennifer A. Daum
Ms. Annamarie DeRoberts
Mr. and Mrs. Peter H. Havens
Mr. and Mrs. Kenneth E. Kirby
Drs. David and Esther Nash
Roberts Communications Services, Inc.
University of North Carolina at
Chapel Hill

Gifts of \$500 to \$999
Vlasta Zemba-Palko, M.D.

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 you could choose the convenience of making your secured credit card gift online at www.mainlinehealth.org/riddle. Just click on (1) “About Riddle,” (2) “The Riddle HealthCare Foundation,” and (3) “Make a Gift.”

Depending on other assets you own or 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 remainder trust or 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 it is offered. Check with your human resources department and if the program is offered, fill out the matching gift form and enclose it with your gift.

Memorials and Tributes:

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

For more information on any of these giving options, please call Steve Derby, Vice President for Development at The Riddle HealthCare Foundation, 610-891-3651.

The Riddle HealthCare Foundation Development Office:

Steven R. Derby
Vice President for Development
610-891-3651
derbys@mlhs.org

Ellen Y. Grill
Associate Director for Development
610-627-4701
grille@mlhs.org

Sandra L. Swank
Executive Assistant
610-891-3504
swanks@mlhs.org

Martha Grieco
Development Assistant
610-891-6286
griecom@mlhs.org

We got mail!

Dear Riddle Hospital,
In September 2010, my husband and I were in the area to attend a reunion of WW II veterans who served on the USS Weeden destroyer. We were staying at a local hotel when he became woozy and passed out. An ambulance was summoned and took us to Riddle Hospital. He received wonderful care in the emergency room, getting Xrays and CT Scans. He then was admitted overnight and provided with wonderful care by outstanding staff. We were able to rejoin our reunion friends the next day, thanks to your hospital. We were blessed to receive such wonderful service.

*Mrs. W. Butterfield
Willoughby, Ohio*

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.



**The Riddle HealthCare
Foundation**

Main Line Health

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September 17, 2010 —Gathered on the hospital campus to celebrate the 50th Anniversary of the original groundbreaking were—(L-R): Dr. Helen Kuroki, Nina Cruice, Doris Jensen, Kathy Warren, Gary Perecko, President, Dr. Ernest Tremblay, Tom Bruder, Dr. Marian Laufer, Dr. Joseph Hope, Margaret Pinkerton, Dr. Ann Marie Brooks and Dr. Joseph McCadden.

50th Anniversary of Groundbreaking

Some distinguished members of the Riddle community gathered for the camera on September 17, 2010 to duplicate a scene from 50 years ago, September 17, 1960, when the shovel broke ground to officially announce the building of a community hospital on land that Sam Riddle had bequeathed in trust to Delaware County.

The original photo included representatives from the business community, lawyers, physicians, bankers and engineers as well as nurses, volunteers and auxiliaries who were all raising money for the new hospital. The new photo features four physicians and nurses who were members of Riddle's staff in the 1960's, and many others who support the work of Riddle Hospital today including Gary Perecko, president.

As a true community hospital, Riddle will always honor its roots and the people who have dedicated their lives to building, running and growing the hospital.



September 17, 1960—Front row, L-R: Robert Beatty, Judge Irvin, Mrs. William Watson, Mrs. Don Cooper, Charles McCafferty, Mrs. Ruth Gregg Horting, Mrs. Arthur Marlowe, Mr. Herbert Loveman. Back row, L-R: Clarence Warden, Stuart Brown, Dr. Batt Speaker, Marvel Wilson, Paul Skelly, Frank Jelinek, William Long.