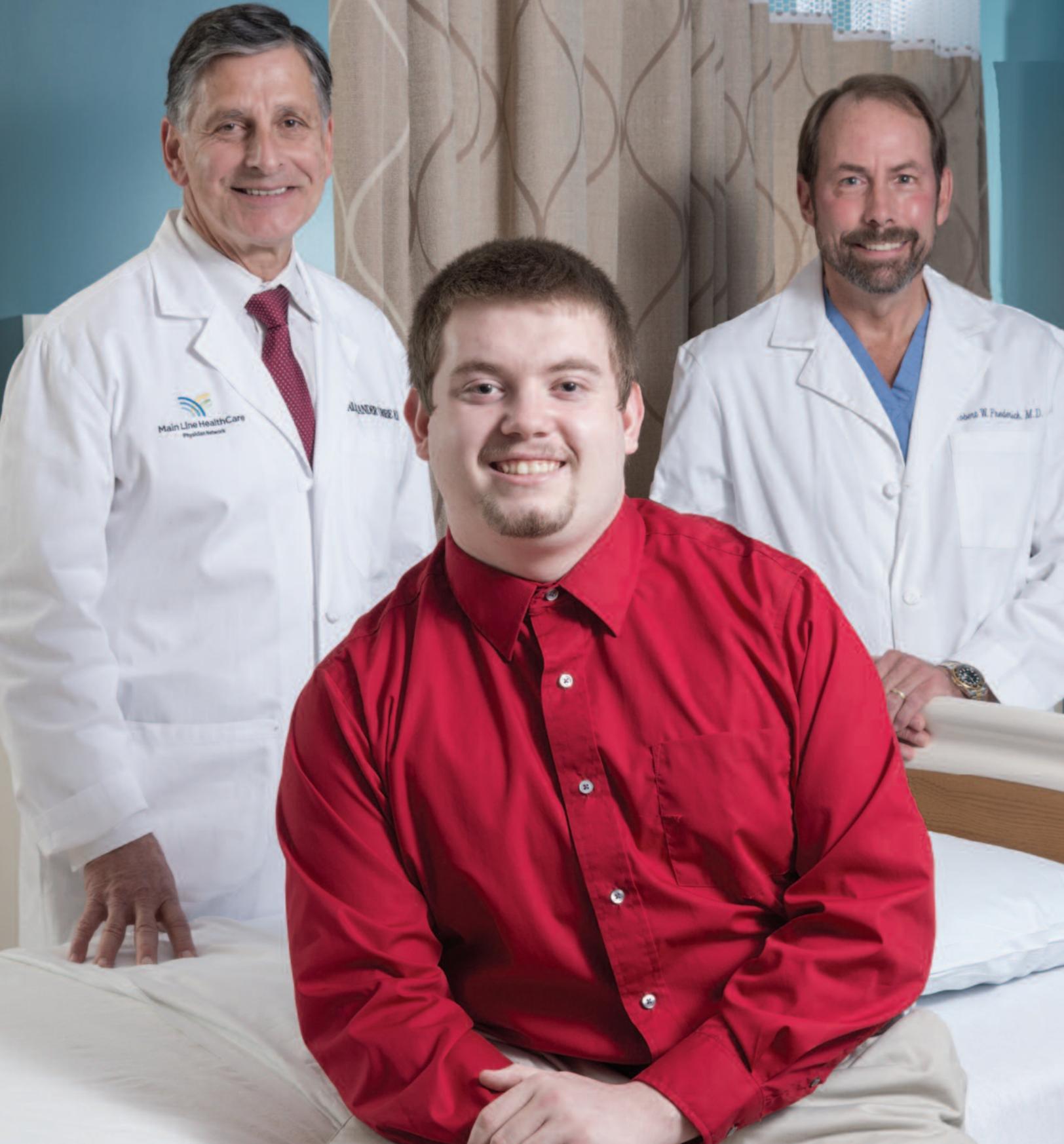


RIDDLE MATTERS

A Publication of The Riddle HealthCare Foundation Winter 2016



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Riddle Matters Winter 2016 Issue 9.1

On the Cover:

Jeff DiJacklin, of Bryn Mawr, with
physicians Alexander Uribe, MD,
Campus Divisional Chief of Vascular
Surgery and Robert Frederick, MD,
Orthopaedic Surgeon, Rothman
Institute

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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The Best Place to Receive Care... The Best Place to Give Care... It's All About Relationships

Many years ago, Riddle set a vision to be the best place to receive care and the best place to give care. We are very close to achieving that vision while continuing to raise the bar, which means there is always more to be done. How do we do this? There are numerous answers to that question, but it always comes back to one word: *relationships*.

Consider the stories in this issue:

- The new Interventional Suite is a major accomplishment (page 1), but not just for the bricks and mortar and the high-definition imaging equipment which allows our physicians to perform a wider range of procedures. This suite represents a new opportunity for enhanced teamwork and collaboration among disciplines beyond what has been traditionally found in some hospital settings. That's all about *relationships*.
- On page 4, we share a patient story which further illustrates the point. After a sports injury last spring, a young man visited our Emergency Department where staff members quickly called in an orthopaedic surgeon who recognized the need for a vascular surgeon before moving forward with the orthopaedic treatment. That is about expertise and *relationships*.
- Our commitment to emergency preparedness (see page 6) reflects multiple interactions between and among members of every department at Riddle Hospital, across the Main Line Health System and with representatives from a number of agencies and organizations in the community. More *relationships*.
- And our board members and other supporters in the community who do so much for Riddle—sharing their time, talent and treasure—may represent the best example of the power of *relationships*. The profile on board member Theresa Murtagh (see page 8) clearly demonstrates this important connection.

This issue centers around relationships...with our patients...family members...the community...and our ability to offer the best possible healthcare experience. We take this very seriously. Nice buildings and cutting edge technology are very important. But finding ways to meet the needs of our patients, to improve their experience and make a difference in their lives at a time when they need it most...that's what it's all about.

Thank you again for all that you do for Riddle. If you ever need us, we'll be here for you. That's the power of *relationships*.



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



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

New Interventional Suite: An Innovative Approach to Care

With new space and new technology, Riddle can offer the most advanced image-guided procedures to diagnose and treat diseases in nearly every organ of the body.



Interventional cardiologist Ancil Jones MD; vascular surgeon Alexander Uribe MD; and interventional radiologist David Smoger MD

In 1964, an Oregon radiologist performed the first recorded angioplasty when he used progressively larger catheters to unblock a femoral artery clogged with plaque—a condition known as atherosclerosis. The femoral artery feeds blood to the lower leg and foot, and although the patient’s foot tissue was painful and discolored, she had refused amputation. After this less invasive procedure resolved her symptoms, more physician-pioneers began searching for ways to replace major surgeries with catheter-based procedures that could access and treat the blood vessels, heart and other organs and tissues throughout the body.

Meeting the Need for Advanced Procedures

In the five decades since that first angioplasty, physicians have advanced their ability to thread sophisticated, image-guided catheters through even the tiniest blood vessels to address a range of medical problems. Known as “interventional medicine,” this approach offers many advantages over open surgery: smaller incisions, lower risk, shorter recovery time, fewer side effects.

It also spans different medical specialties. For example, interventional cardiologists work through blood vessels in the leg or arm to clear blocked coronary arteries and more recently repair heart valves. Electrophysiologists correct heart rhythm disorders by placing devices such as pacemakers and defibrillators, or using pulses of

energy to destroy small areas of heart tissue. Vascular surgeons correct blood vessel problems such as peripheral vascular disease, aneurysms and traumatic vessel injury, all of which impede critical blood flow. (See page 4 for a recent success story involving a patient who had emergency vessel repair at Riddle.) Interventional radiologists access some of the smallest vessels using tiny catheters and instruments to treat conditions throughout the body, ranging from cancer to blood clots to uterine fibroids.

Riddle Hospital recognizes the importance of providing specialists and their patients with the newest interventional equipment featuring the most advanced tools and imaging—especially because heart and vascular problems are common in people over 65, who comprise

more than half of the hospital's patient population. This past December, Riddle opened a new Interventional Suite on the first floor of Health Center 3, next to the MRI Suite that debuted in 2013.

It was several years ago that Janet Webb, Vice President, Administration, first saw the potential for bringing these different specialists together into one space dedicated to interventional medicine. Traditionally, Riddle's cardiologists, electrophysiologists and vascular surgeons used the Cardiac Catheterization Lab, while interventional radiologists

were housed in a separate Interventional Radiology (IR) Lab. These specialists required essentially the same equipment and they sometimes consulted with each other on complex cases, given shared expertise in the blood vessel system and catheter-based treatments. Webb's vision was to bring the physicians into one state-of-the-art lab suite with a team of nurses, technicians and other staff cross-trained to assist with the full range of interventional procedures.

Almost two years ago, Main Line Health leadership and governance approved the plan. Riddle's IR Lab was limited in space and in need of technology upgrades. The Cath Lab, though not outdated, was approaching a decade of use. Webb began working with Diane Curran, Director of Cardiovascular, Imaging and Neurodiagnostic Services, and the physicians and staff to plan a new Interventional Suite in Health Center 3. Webb and Curran knew that the latest generation of interventional medicine equipment would meet all of the specialists' needs.

"In the past, interventional equipment was often designed

for the part of the body it would image, such as the heart," says Diane Curran. "But the newest systems are amazing in their capability to do all interventional procedures, and we wanted that flexibility and upgrade for our patients."

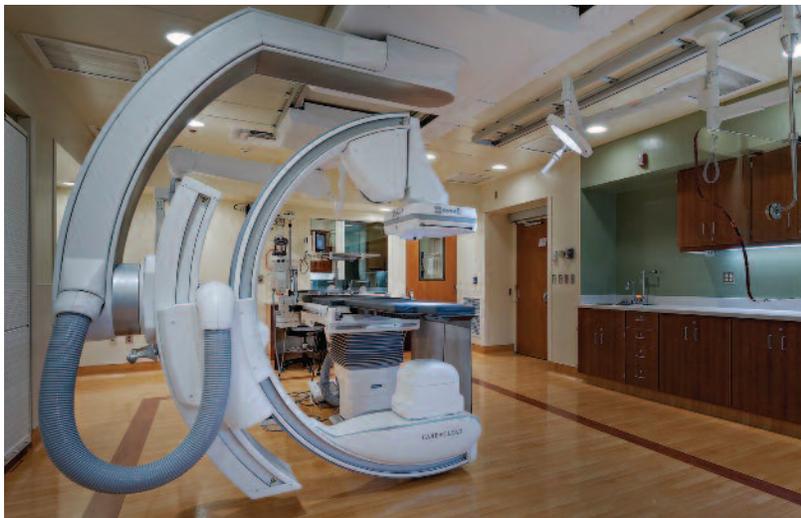
Riddle's New Space: Features and Benefits

Today, Riddle has a new 3,600-square-foot Interventional Suite featuring two identically equipped interventional labs with large glass panels that provide a clear sightline from one to the other. Since both labs can handle the full range of interventional procedures, the suite provides greater flexibility in accommodating emergency cases—a common example being the heart attack patient who needs immediate catheterization to open blocked coronary arteries. In the past setup, with separate cardiovascular and interventional radiology labs handling one patient at a time, emergencies sometimes delayed or interrupted elective procedures. With two treatment rooms in one place, Riddle is in a better position to deliver life-saving interventions quickly and provide other patients the treatments they need.

The new Interventional Suite also offers the opportunity to be more efficient, now that nurses, technicians and other staff have been cross-trained to assist with cardiac, vascular and interventional radiology procedures in this one location, instead of specializing in selected procedures. In addition, a single location streamlines the process for patients. Combining services in this way is now becoming a trend for hospitals, says Sherian Joyner, RN, BSN, MSN, Nurse Manager for Cardiac Catheterization and Interventional Radiology.

"In the past, interventional equipment was often designed for the part of the body it would image, such as the heart. But the newest systems are amazing in their capability to do all interventional procedures, and we wanted that for our patients."

Diane Curran, Director of Cardiovascular, Imaging and Neurodiagnostic Services



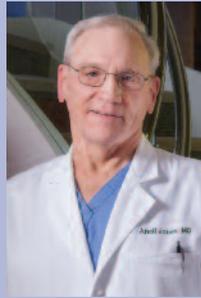
Rendering of new interventional lab

“We’re realizing this is not only a more efficient use of staff and resources, but it’s also better for patients,” Joyner says. “In the new suite, there are ample and comfortable bays for patient preparation and post-procedure recovery. Things can now move more quickly for patients. It also creates more opportunities for specialists from different areas to collaborate. In the past I have seen our specialists work together to access particularly challenging blood vessels. This new suite enables more of that.”

But perhaps the greatest benefit for patients is the new Siemens equipment, which was selected with the input of staff and physicians, including electrophysiologist Doug Esberg, MD, interventional cardiologist Ancil Jones, MD, interventional radiologist David Smoger, MD, and vascular surgeon Alexander Uribe, MD. With this system, they can view the blood vessels with stunning clarity and precision while using 30- to 50-percent less radiation than required in the past. They also can get clear images from head to toe, whether they need to visualize vessels in the heart, lungs, kidneys, outer limbs or another area of the body. All of the specialty teams—including about 15 physicians now using the suite—are excited about the new capabilities and higher level of care they can offer to the Riddle community.

“Getting these physicians from different specialties around the same table to plan this new space has been extremely gratifying,” says Janet Webb, administrative lead for the project. “More hospitals are now moving in this direction for interventional medicine, but at Riddle we have been considering this for a long time because we knew it made the most sense for the hospital and our patients. The physicians really came together to make this vision for our community a reality.”

In Their Own Words: Three Physicians’ Thoughts on the New IR Suite



A Better Patient Experience

“This is a significant investment, but it demonstrates that Riddle’s leaders are committed to keeping equipment absolutely up to date in terms of capability and safety. The experience for patients and families is better than before, both in terms of the waiting area and a recovery area with the latest monitoring equipment and technology. It allows us to keep providing the high level of service we want to give to this community.”

*Ancil Jones, MD, Medical Director,
Riddle Cardiac Catheterization Lab*

Expanded Capabilities in Interventional Radiology

“We can now give patients the full spectrum of interventional radiology services, offering even the most complex procedures that we couldn’t always do here before. The lab at Riddle now rivals that of any other facility in the region, including academic medical centers.”

*David Smoger, MD, Medical Director,
Interventional Radiology*



Clearer, Safer, More Efficient

“It’s a high-definition system so the images are better and much brighter, and it is more adaptable to wherever you need to use it on the patient. The table moves at wider angles and the image intensifier is larger and much more mobile. We have greater clarity in visualizing the vessels in the foot and arm and other organs outside the heart. And we achieve this with less contrast solution and therefore less radiation. Our procedures can be faster and safer.”

*Alexander Uribe, MD, Campus Divisional
Chief of Vascular Surgery*



Jeff Dijacklin:

A Leg-Saving Treatment, and Now on the Road to Recovery



Jeff DiJacklin, seven months after the rugby injury that brought him to Riddle's Emergency Department

Last March, Jeff Dijacklin of Bryn Mawr was a senior at Harriton High School in Rosemont enjoying the perks of senior year: wrapping up classes, thinking about his senior project, looking forward to prom and graduation, spending time with friends before going their separate ways. He also was excited to be trying the sport of rugby, having joined the

Narberth Rugby Football Club. As Jeff left home for his first tournament at Neumann University last March 15, a Sunday, his dad warned him, “Just don’t get hurt!”

That warning would prove prophetic. As Jeff carried the ball during a penalty play in his third and final game, he was tackled from behind by three players and felt his left knee

buckle backwards as they fell in a heap on the ground.

“All I remember is hearing four pops—now I know those were my ligaments tearing—and when I looked down my knee was literally on the side of my leg, with the foot splayed in the other direction,” Jeff recalls. “My teammate cupped his hand under my chin so I couldn’t look down. All I could think was, ‘My dad’s going to kill me!’”

Jeff’s parents, Tim and Victoria, received a call Sunday evening telling them that their son had been taken to Riddle Hospital’s Emergency Department with a dislocated knee. By the time they arrived at the ED, new information had come to light, suggesting a more serious injury.

“I heard Jeff ask the doctor, ‘Am I going to lose my foot?’ and the doctor replied, ‘It doesn’t look like it’—but it wasn’t a definite ‘no.’ And then I knew there was something else going on,” Victoria recalls. “His foot was so cold to the touch.”

The Emergency Department team had immediately called orthopaedic surgeon Mike Aynardi, MD, who discovered that Jeff’s popliteal artery, a main artery behind the knee, had dissected: its inner layers were torn and critical blood supply cut off. Jeff was moved to the Cardiac Catheterization Lab and met by vascular surgeon Alexander Uribe, MD, and his team, who had been called in to perform emergency vessel repair. Dr. Uribe threaded a catheter through a blood vessel in Jeff’s groin and placed a stent to repair the damaged

artery. Once blood flow was reestablished, Rothman Institute orthopaedic surgeon Eric Smith, MD, placed an external fixator on Jeff's knee. This metal device attaches rods and pins into the bone to stabilize the joint so it can heal.

"I was so impressed with the doctors at Riddle because I know that the vessel injury could have been missed," says Jeff's dad, Tim. "The orthopaedic doctor knew to check Jeff's pulse and immediately call in the vascular team. Jeff would be in a very different place if he had gone to an Emergency Department where they simply put his knee back in place and told him to see an orthopaedic specialist the next day. That very well could have happened."

Jeff spent the next two-and-a-half weeks at Riddle, unable to get out of bed at all during that time. He and his mom agree that the nursing care on 4 West made the time more bearable. "The nurses were just amazing—they were just the most incredible people," Victoria says. "We can't thank them enough."

Jeff's release from the hospital in April was only the beginning of a long journey that

continues to this day. Under the care of Dr. Rob Frederick of the Rothman Institute, Jeff went on to have several adjustments of the fixator followed by stints at Bryn Mawr Rehab Hospital.

When he wasn't at the hospital, he lived in a makeshift hospital room on the first floor of his Bryn Mawr home, where he received regular visits from a home health care nurse and physical therapist. Although this isn't how anyone would choose to spend their final months of high school, Jeff experienced some memorable surprises: a pre-prom visit from his friends to Bryn Mawr Rehab, complete with

"I was so impressed with the doctors at Riddle because I know that the vessel injury could have been missed. Jeff would be in a very different place if he had gone to an Emergency Department where they simply put his knee back in place and told him to see an orthopaedic specialist the next day."

Tim Dijacklin

formal wear and picture-taking, and graduation with his class at the St. Joseph's University arena, thanks to some advance scouting by his dad and a walker with a pouch for his diploma. He also completed and presented a senior project on the physical therapy profession, based on his many hours of direct experience with therapists. He now aims to join their ranks one day.

"I always wanted to be an engineer, but I've decided to become a physical therapist instead and hope to start taking prerequisites at Delaware County Community College soon," Jeff says. "Through this experience I also learned a lot about myself and what I am able to endure. I learned to communicate with many different types of people, which is a little unusual for someone my age. And I don't take small things for granted like walking, going upstairs and taking a shower."

Jeff is ahead of schedule with his recovery, now wearing just a knee brace and attending outpatient therapy sessions at Main Line Health Center in Broomall. He remains under the care of both Dr. Uribe and Dr. Frederick at Riddle and may need surgery to reconstruct the ligaments in his knee. Still, the Dijacklins are grateful to the physicians, nurses and therapists at Riddle and throughout Main Line Health whose quick thinking and exceptional care have helped him regain use of a leg that could have been lost.



Jeff Dijacklin with his family (L-R): his father Tim, his mother Vicki, sister Amanda and brother Chris.

Riddle's New Interventional Suite

Since Jeff's accident and procedure, Riddle Hospital has opened its new Interventional Suite (see page 1), giving physicians and staff even more advanced technology to care for patients in emergency situations like Jeff's.

Ready for Anything:

Papal Visit Demonstrates Riddle's Commitment to Emergency Preparedness



Members of Riddle's Incident Command Team in action

In November 2014, after Pope Francis announced that he would visit Philadelphia during the World Meeting of Families, the City began preparing for what would clearly be a high-security event drawing huge crowds to the region. By early 2015, Main Line Health also had started preparing, says Robert Feinberg, MS, EMT-P, PA-C, CHP, System Director of Emergency Management. Riddle's sister hospital Lankenau Medical Center would experience the greatest impact, given its proximity to the city and to Saint Charles Borromeo Seminary, which would house Pope Francis during his stay. However, the System's goal was to prepare every hospital for any scenario—from a small uptick in Emergency Department visits to a large

influx of patients due to an act of violence or terrorism.

"We have an emergency operations framework for the system, but it has to be adapted to meet the needs of a specific event," Feinberg says. "Preparing not only as a system but as a region is critical. Even if the actual scenario you face is different than what you planned for, everyone knows what to do and how to talk to each other."

Main Line Health spent several months putting plans in place for every possible impact, working closely with government agencies, public safety, and other hospitals throughout Southeastern Pennsylvania. Like the other Main Line Health hospitals, Riddle has an Emergency Operations Plan that

covers a range of situations, from hurricanes and snowstorms to power outages to mass casualty events. Riddle's planning committee had to tailor that plan to meet potential challenges related to the week-long World Meeting of Families and Papal Visit in late September. The first priority was making sure that current patients would be guaranteed safe, high-quality care throughout the week and especially over the weekend.

"A main question for this and any other event is: 'How do we ensure that we can continue to care for patients in the midst of a situation that may become abnormal?'" says Jeshahnton (Shaun) Essex, Vice President, Administration, who co-led Riddle's efforts alongside Dennis Burt, Director of Emergency

Management. Even though Riddle was geographically removed from the week's activities, the hospital knew that road closures could not only affect staff members' ability to get to work, but also interfere with deliveries of critical supplies such as medications, food and equipment. Essex led the charge in developing a backup transportation system from hospital to hospital, just in case they needed to share staff or resources. He also led the effort to put a series of contingency plans in place to deal with interrupted or cancelled deliveries.

Personnel schedules had to be adjusted as well. Managers were careful not to schedule clinical staff who would be affected by road closures and limits on public transportation over the weekend. About a dozen Riddle staff members volunteered to spend the weekend at the hospital, while several other physicians and staff chose to stay at nearby hotels.

Riddle prepared for a possible influx of patients through the Emergency Department and The Birthplace, whether due to expectant mothers not being able to get to Lankenau or their downtown hospitals, or to larger-than-usual weekend crowds at the Media train station. Even though the security in Philadelphia was intense, Riddle was also ready to handle potential mass casualties, realizing that city hospitals could quickly be overwhelmed or even hampered by in-town road closures in the aftermath of a catastrophe. The hospital's location close to I-95 would make it a natural destination for

"I was incredibly impressed by the sense of commitment and camaraderie I observed all weekend. Everyone got on board for this."

Dennis Burt, Director of Emergency Management

emergency vehicles leaving the city. Thanks to Riddle's new and larger Emergency Department with improved patient flow, as well as its own Emergency Medical Services teams and ambulances, the hospital was well-positioned to help—and also well-prepared.

"Over the summer, Riddle took part in two training exercises, one for Southeastern Pennsylvania and one for Delaware County, in which hospitals and other agencies practiced how to coordinate their efforts when faced with large numbers of people needing emergency medical services," Dennis Burt says.

"We also made sure that members of Main Line Health's Critical Incident Response Team were on call to provide psychological first aid in case of a traumatic event," adds Robert Feinberg.

As the weekend of September 25-27 approached, much of the region flocked to Philadelphia to be a part of history, watched the coverage on TV, or escaped to the shore or some other vacation spot. For many it felt like a holiday, but at

Riddle and throughout Main Line Health, administrative and clinical staff members were on high alert. Each site had an Incident Command Center staffed round-the-clock by hospital leaders who were ready to deal with any potential impact or incident. Here at Riddle, 53 physicians signed up to take first, second or third-level call throughout the weekend, just in case they were needed.

"This was an inconvenience for many of our staff, but I was incredibly impressed by the sense of commitment and camaraderie I observed all weekend," says Dennis Burt. "Everyone got on board for this."

"In the end, there's no substitute for being prepared," says Helen Kuroki, MD, Vice President of Medical Affairs. "We were assured knowing our patients were able to get the same level of safe, high-quality care that they've come to expect from Riddle Hospital, even during one of the biggest events the City of Philadelphia has ever witnessed. It was an honor to be here to make sure our community was served in this way."

Emergency preparedness never ends, though. As soon as the Pope departed on September 27, Robert Feinberg and his team had their sights set on Hurricane Joaquin, which fortunately steered out to sea. But if it had hit, Riddle would have been ready, and will continue to be ready for any event—including the Democratic National Convention, coming to Philadelphia this summer—that could affect the hospital's operations, its patients and staff, and the larger community.

Theresa and Paul Murtagh: The Power of Relationships



The Murtagh Family (L-R) Theresa and Paul with their children, Seamus, Colleen and Patrick

There is so much talk today about how busy we all are with our jobs and activities, our families and our everyday lives. But there are always certain people who find time to give back to their communities—people like Riddle HealthCare Foundation Board member Theresa Flanagan Murtagh and her husband, Paul, who live in Media. Theresa has deep ties in Delaware County. She grew up in Ridley Township and attended Cardinal O’Hara High School, Swarthmore College and Villanova Law School. She spent seven years based at the Media Courthouse as the county’s assistant district attorney. For two decades, she has performed with The Theresa Flanagan Band at local venues and events.

“I love the fact that I could run down to my local Wawa right now and run into someone I know,” she says. “That feeling is so important to me.”

Her husband Paul, originally from County Cavan in Ireland, has forged strong relationships over the past 30 years while building his general contracting business, Murtagh Construction, in Newtown Square. Theresa now works there part-time. Paul’s company is responsible for the beautiful home on Springton Reservoir in Media where the Murtaghs moved in 2008. They stay very busy raising three children, ages 13, 12 and 11, yet they make time to be actively involved with the Irish-American Business Chamber and Network and St. Mary

Magdalen Parish and School. Theresa also serves on the boards of Saint Charles Borromeo Seminary, Pennies in Action, and The Riddle HealthCare Foundation. When she was invited to serve on the Foundation Board in 2010, she saw it as an opportunity to serve the greater good while also expanding her local ties.

“When you’re asked to serve on a board, you feel proud and happy to be asked, but then you also think, ‘Wow, I am going to meet some great people.’ Not only am I helping, but I also am connecting with other residents who have like minds and like feelings about this community,” she says.

In addition to her board service, Theresa has served on Riddle's Quality and Patient Safety Committee and the Capital Campaign Committee. She and her husband have become enthusiastic supporters of Riddle while helping spread the word about the hospital's plans and progress.

"When we talked about Theresa doing this we thought, 'Well, if there is anything you are going to get behind in your community, what better than your local hospital?'" adds Paul.

Paul and Theresa certainly know their way around good causes—and even though their personal and professional lives would be considered a full plate by most people, they choose to do more, hosting events at their home to support local nonprofits. This all started with a 2008 benefit featuring the Three Irish Tenors to raise funds for Drexel Neumann Academy in Chester and La Salle Academy in Kensington, two independent Catholic schools serving students in low-income neighborhoods. Since then, they have hosted three to four fundraisers a year for many causes they care about, including Cityteam Chester, the Pro-Life Educational Fund and The Delaware County Veterans Memorial Association. Perhaps most notably, an annual event at their home has raised \$2 million for Pennies in Action, a nonprofit started by their next-door neighbor to advance a Penn researcher's work on a breast cancer vaccine therapy.

The Murtaghs also have hosted events for Riddle Hospital, including the first Samuel D. Riddle Society gathering in 2011 and a 2013 event for the Emergency Department Capital Campaign. These events played a key

role in building awareness and momentum around the Campaign.

"Probably about 90 percent of the people who benefit from these fundraisers we will never meet," Paul observes. "But if you're fit to make a change in someone's life, you owe it to them and to yourself to do that."

Next up for the Murtaghs, though, is an event that *will* directly benefit their friends and neighbors. Together they are serving as co-chairs of a fundraiser tied to the 50th anniversary of St. Mary Magdalen School, to be held at the Drexelbrook this April. Once again, they are eager to devote their time and talent to a worthy cause, drawing on the power of their relationships with friends, neighbors and colleagues. Like other people who are wired to give back, they see it as a pleasure, not a burden.

"Paul and I are social people. We love events and we love parties, and if we can combine that with something we care about, all the better," Theresa says. "When I became involved at Riddle, I was excited about its future as a Main Line Health hospital and so impressed with the other Board members and

with Gary Perecko, President of Riddle Hospital. I've been honored to witness the hospital's progress since then, from its many Joint Commission recognitions and Magnet® designation to the Emergency Department and other new facilities.

"Since Paul and I have become more philanthropic—and by that I don't mean giving huge gifts, but giving our time and our home—we have gained so much," Theresa adds. "Without a doubt, we have become happier and more successful, the more we have given."

"When I became involved at Riddle, I was excited about its future as a Main Line Health hospital...I've been honored to witness the hospital's progress since then, from its many Joint Commission recognitions and Magnet® designation to the Emergency Department and other new facilities."

Theresa Murtagh



Paul and Theresa Murtagh

Focus on Philanthropy

Pro-Am Golf Outing Raises Funds for Cancer Programs



The winning foursome from Bryn Mawr Trust Company at Riddle's Pro-Am Golf Outing (L-R): Matt Walsh, golf pro John Tyrell, Matt DiGiulio, Chris Smith, Main Line Health CEO Jack Lynch, Riddle Hospital President Gary Perecko, and Kurt Scheivert.

Riddle Hospital hosted the 33rd Pro-Am Golf Classic at the DuPont Country Club on a beautiful day in September. Over 100 golfers, including 20 pros and Philadelphia Flyers alumni, and 29 sponsors helped The Riddle HealthCare Foundation raise more than \$40,000 to benefit Riddle's cancer programs.

As always, there was some friendly competition in the air. Bryn Mawr Trust Company, led by Foundation board member Chris Smith, received the first place award. The Franklin Mint Federal Credit Union, hosted by Foundation board member John Unangst, came in a very close second, trailing by only one stroke.

"Many thanks to our sponsors, the golf committee and other volunteers, the folks at DuPont as well as the golfers who joined us on September 17 for creating another successful event," said Rich Wood, Foundation board member and Chairman of the Pro-Am Golf Committee. "We look forward to seeing everyone next year on Thursday, September 15, at the DuPont Country Club."

Members of The Samuel D. Riddle Society Enjoy A Heartfelt Thank You

The annual Samuel D. Riddle Society thank you gathering took place on Tuesday, October 6, at Terrain at Styer's in Glen Mills. Society members enjoyed the food and beautiful surroundings of the nursery as they listened to Riddle Hospital President Gary Perecko and Vice Chairman of The Riddle HealthCare Foundation Don Saleski speak about the exciting changes happening at Riddle Hospital.



Foundation board member David Thomas, DO, PhD, and his wife Jo Anne enjoy the beautiful evening at Terrain.

President Gary Perecko knows that charitable giving is a key component to Riddle's success. He thanked Society members for their ongoing support, which has a significant impact on the organization. Crucial investments in Riddle Hospital, such as the new Emergency Department, which opened in the fall of 2014, would not be possible without the generous contributions of Riddle Society members.



Bill and Sofia Clinger with George and Debbie Herker

The Society is named for Riddle Hospital's founder, Samuel D. Riddle, who grew up in Delaware County and knew how important it was to have a hospital in the area. In his will, he left his estate of \$2.2 million and 72 acres of land to establish Riddle Memorial Hospital.

Today, Mr. Riddle's charitable legacy continues with the Samuel D. Riddle Society, created in honor of his philanthropic spirit. The Society is an exclusive and diverse group of donors comprised of board members, doctors, employees and loyal community members who make annual contributions of \$1,000 or more to support Riddle Hospital's mission.

If you have any questions or would like more information about joining the Samuel D. Riddle Society, please contact Associate Director of Development Ellen Grill at 484.227.4701.



(L-R) Riddle Society members Virgie and Dr. Hassan Vakii, John and Gail Unangst

Creative Giving: The Man O' War Society

The Man O' War Society, named for Sam Riddle's famous racehorse, gives thanks and recognition to individuals who have made some provision to ensure that Riddle Hospital and The Riddle HealthCare Foundation will continue for generations. To be a member of The Man O' War Society, an individual will have planned a bequest, created a gift annuity, established a charitable remainder trust, or in some way planned a gift that will carry on after they are gone.

We call this "creative giving" and believe that the individuals who have had the foresight and generosity to plan a gift to the Foundation should enjoy the benefits of recognition during their lifetime. The Man O'War Society also allows donors to direct their gifts to those programs that are of the greatest interest to them.

On Thursday, October 29, The Riddle HealthCare Foundation hosted a luncheon for the members of the Man O' War Society at Riddle Village, which featured a presentation by Riddle Hospital President Gary Perecko.

The event was filled with laughter and fun while the members mingled and exchanged stories about why they love Riddle. Among those in attendance were Louis Essaf, a friend of Sam Riddle's and one of Riddle Hospital's first board members in 1963, and Dan Kennedy, former president and CEO of Riddle Hospital.

If you or someone you know may be interested in learning more about the benefits of planned giving or making arrangements to leave a planned gift to Riddle Hospital, please contact Steve Derby at 484.227.3651.

Emergency Department Donor Wall Recognizes Generous Contributions

When Gary Perecko arrived at Riddle as president in summer 2009, he quickly recognized the need for a new Emergency Department (ED). By early 2011, the Main Line Health and Jefferson Boards had approved the project, and members of The Riddle HealthCare Foundation Board and staff went to work planning a capital campaign to support the new ED.

The initial campaign planning study recommended a campaign goal of \$5 million. In 2012, the Foundation received \$2 million from Riddle's Associated Auxiliaries; a \$1 million pledge from Foundation Board Chairman, Tom Bruder, and his wife Kate; and another unprecedented \$1 million pledge from Wawa, Inc. After these incredibly generous gifts, the Foundation's Campaign Committee set the official campaign goal at \$7.5 million.



The new donor wall in Riddle's Emergency Department lobby

Board members knew it would be a stretch but felt it was important to make the effort.

Then an anonymous donor proposed a challenge to Riddle Hospital physicians, matching all new gifts up to \$250,000. The physicians responded overwhelmingly, contributing a total of more than \$1 million to the campaign.

These lead gifts, along with several other generous gifts from community members and staff,

resulted in a final total of \$7.9 million, which exceeded the campaign goal and provided more than half of the funding for the new ED.

Today, the names of those who contributed \$10,000 or more to this campaign can be found on Riddle's new donor wall, on display in the lobby of the ED. We are most grateful to all of our donors and are proud to acknowledge their generosity and support.

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 gift 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.

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

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Steven R. Derby, Vice President for Development



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 the mission and vision of Riddle Hospital.

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The Riddle HealthCare Foundation

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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.

American Nurses Credentialing Center

Magnet® Recognized for Nursing Excellence

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, 2013 & 2014)

US News and World Report

Ranked 8th in the metro area and 16th statewide, with high-performing specialty areas in Hip & Knee Replacement

The American Association of Critical-Care Nurses

Gold-Level Beacon Award for Intensive Care Unit

American College of Surgeons' Commission on Cancer

Outstanding Achievement Award 2013

Society of Cardiovascular Patient Care

Accredited Chest Pain Center with PCI

NICHE Hospital

Nurses Improving Care for Healthsystem Elders

National Accreditation Program for Breast Centers

American Heart Association

Gold Plus Performance Achievement Award and Honor Roll for Target Stroke



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Giving to enrich the lives of others

"When we visited Riddle Hospital for the first time, we were deeply impressed by the people providing care. The physicians, nurses and physical therapists were all truly committed to clinical excellence and compassionate care at a level we had previously not experienced.

I currently have privileges at eight different hospitals in the region and I choose to do the vast majority of my surgeries at Riddle due to the exceptionally high quality of care and the team of clinicians and staff members I work with there.

We are proud to support Riddle Hospital through The Samuel D. Riddle Society and are particularly interested in supporting capital projects so the facilities can keep pace with the other advances."

*Peter F. Sharkey, MD, of the Rothman Institute,
and his wife Sally of Villanova*



THE
Samuel D. Riddle
SOCIETY



FRIENDS OF RIDDLE

Help ensure Riddle Hospital delivers compassionate patient care, invests in the latest technology and medical programs, and builds a better quality of life in our neighborhoods through outreach programs by becoming a member of The Samuel D. Riddle Society with a gift of \$1,000 or more to The Riddle HealthCare Foundation. Become a Riddle Hospital supporter and join a community that shares a dedication to our mission.

Contact Ellen Grill, Associate Director of Development, for more information at 484.227.4701, or visit us online: mainlinehealth.org/rhgiving, to make a secure online gift.