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Saint Raphael Healthcare System, 1993 Annual Report

Saint Raphael Healthcare System

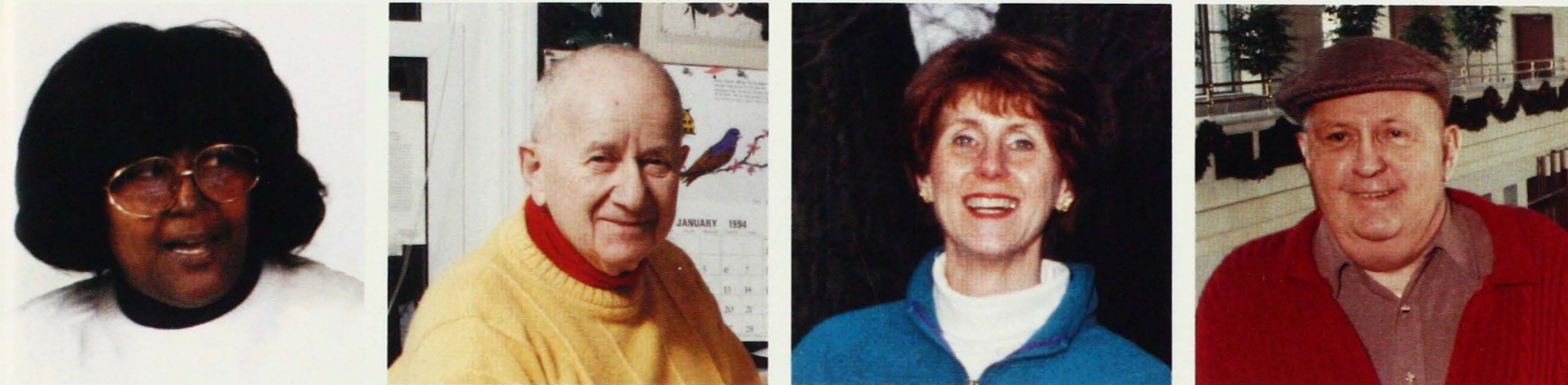
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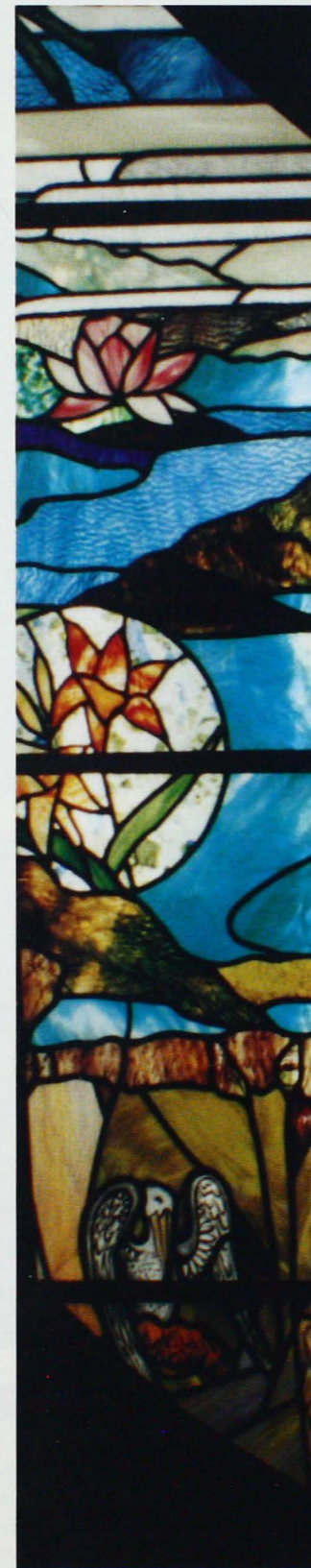
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SAINT RAPHAEL HEALTHCARE SYSTEM 1993 ANNUAL REPORT



Fifty Years
of Cancer Care
at Saint Raphael's

CONTINUING OUR MISSION OF HEALING



Dear Friend of Saint Raphael's,

It has been a year filled with hope and healing!

Our 1993 annual report to you, members of our community, focuses on cancer care services at the Hospital of Saint Raphael and our new Father Michael J. McGivney Center for Cancer Care. As you read the history and personal stories of our patients and dedicated professionals, we hope you better understand our commitment to caring and how excited we are about the new Center. As this report goes to press, we were blessed with a \$3 million gift from the Knights of Columbus, and we are proud the Center will bear the name of the organization's founder.

The Saint Raphael Healthcare System offers a wide range of health care services across a continuum of care. From health promotion and wellness services to long-term care, we touch the lives of hundreds of thousands of people each year. Whether through the Hospital of Saint Raphael, Saint Regis Health Center or one of the other entities within our system, we are here to serve you 365 days a year.

Health care reform is a popular issue these days. At Saint Raphael's, we believe access to appropriate health care services should be available to all. We are a community asset, here for you. And we'd love for you to help us help others. Some people choose to support us financially through our Foundation. Others give their time and talents as volunteers or Auxiliaries. Our mission of caring is very rewarding, so join us. You'll find our telephone number on the back cover.

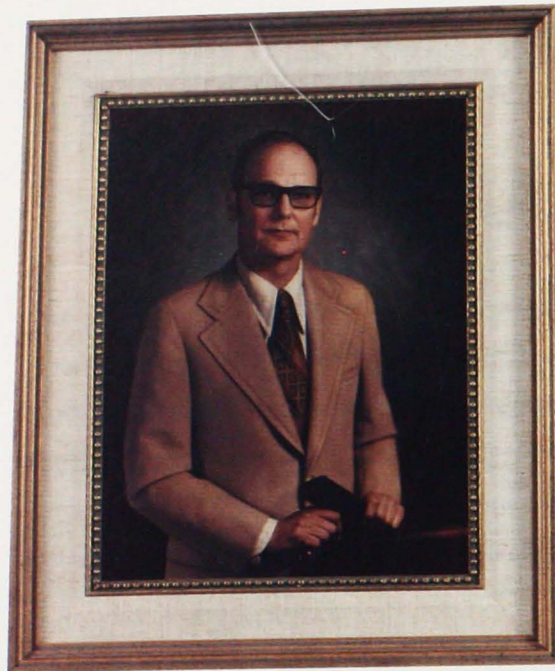
As you read this annual report, we hope you agree that we are a community resource. The facts and figures, social accountability section and other information are provided for you. Let us know how we are doing.

We look forward to the coming years, and for the changes in health care delivery and financing on the horizon. Our pledge to you is a continued commitment to caring and loving service, just as it was in 1907 when we began. Our wish for you is always God's blessings and better health!

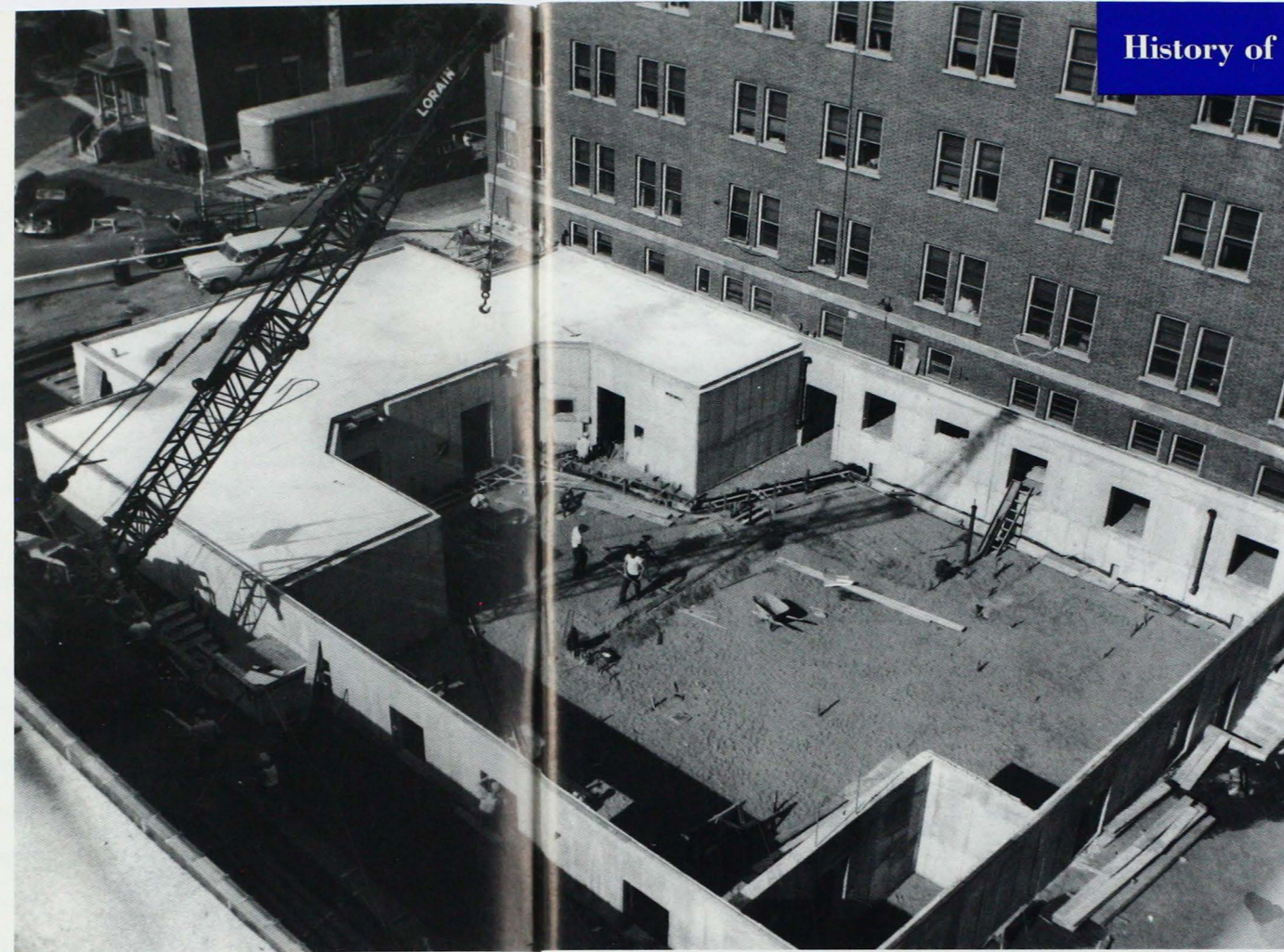
Sister Anne Virginia
Sister Anne Virginia
President
Saint Raphael Healthcare System

Jim Cullen
James J. Cullen
President
Hospital of Saint Raphael

One stained glass mural in the Center for Cancer Care includes a Pelican, the ancient symbol of Divine Love and a long-time symbol for the Sisters of Charity, founders of Saint Raphael's. The organization's emblem shows the Pelican with one wing outstretched as a sign of the all-embracing love of the Sisters of Charity reaching out to the world.



Dr. Wayne P. Whitcomb's expertise in radiation therapy was instrumental in building the region's first self-contained radiation therapy center, seen here under construction in 1956.



St. Raphael's To Install Cobalt Bomb X-Ray Unit
New Radiation Therapy Center Will Cost \$350,000—First in City—Permits Better Tumor Treatment

The Hospital of St. Raphael will install Connecticut's first complete radiation therapy center, hospital officials announced today. Bids will be advertised shortly and it is expected that work on the project will be started by June 1. It will cost about \$350,000.

The one-story structure, to be erected partly underground, will house a radioactive cobalt bomb which will deliver radiation equivalent to three and one-half million volts of X-ray.

Few In New England
 The center will be one of the few of its kind in New England, according to authorities at St. Raphael's. For the first time in any hospital in this area, all radiation equipment will be housed under one roof.

When complete, the center will provide complete radiation facilities for the greater New Haven area. It is expected that supervoltage equipment will be used to treat patients from all parts of Connecticut.

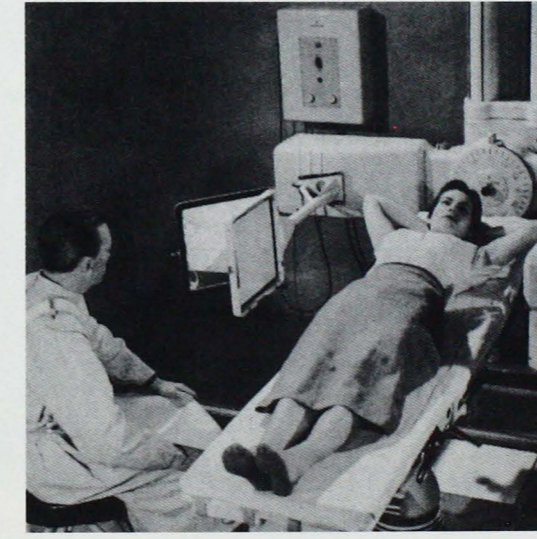
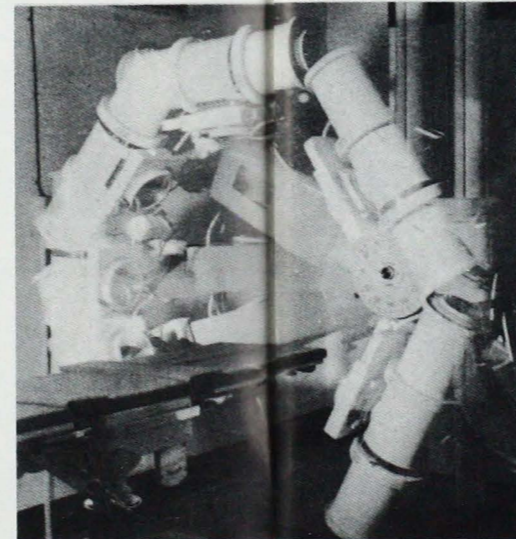
The center will specialize in the treatment of cancer patients. The project is being financed by a \$125,000 allotment from the New Haven Foundation, a Federal grant of \$83,333 under terms of the Hill-Burton Act which provides funds for diagnostic and treatment centers, part of the \$227,000 grant to the hospital by the Ford Foundation announced last fall and by private contributions.

Gets U. S. Approval
 The hospital received word yesterday from U. S. Senators Bush and Purtell and Congressman Crella that the U. S. Public Health Service has given final approval to plans for the center and the Federal grant.

Plans for the building have been drawn by Louis Walsh of Waterbury.

(Please Turn to Page 3)

Newspaper account heralds center's use of a supervoltage cobalt source equal to 3.5 million volts of X-ray. The center also featured two high-voltage X-ray units, including a pendulum unit that rotated a full 360 degrees.



Late 1940s	1950	1951	1956	1957	1960s	1969	1976	1978
Dr. Robert Shapiro, chairman of the Hospital of Saint Raphael's (HSR) Department of Radiology and Dr. Wayne P. Whitcomb, an associate radiologist, recognize the importance of using X-rays in treating cancer and improving the Hospital's position in this subspecialty. Until then, X-rays had been used mostly for diagnostic purposes.	Whitcomb awarded a fellowship by the National Cancer Institute to study radiation therapy at the Holt Radium Institute and Christie Hospital in Manchester, England. Whitcomb also visits cancer treatment centers in Scandinavia.	Upon Whitcomb's return, HSR begins planning construction of a self-contained radiation therapy center. Whitcomb, who is named director of the newly established division of Radiotherapy at HSR, will design the center.	HSR begins construction of a radiation therapy center. Funding comes from private donations and grants from the Ford Foundation, The Community Foundation for Greater New Haven (formerly the New Haven Foundation), and the federal government.	HSR opens Radiation Therapy Center, the first facility of its kind in Southern New England, featuring a supervoltage cobalt source equivalent to 3.5 million volts of X-ray. Whitcomb is named director of the center, which is designed to care for up to 250 patients a year.	HSR installs new cobalt source of 2,300 curies, replacing the old cobalt source, which originally contained 1,400 curies.	HSR becomes the first community hospital in Connecticut to install a 4 million volt linear accelerator.	<ul style="list-style-type: none"> At 56, Whitcomb dies, leaving his wife, Virginia, and four children. Dr. Arthur Knowlton named director of the Radiation Therapy Center. HSR establishes first oncology floor in its Saint Joseph Pavilion. 	Dr. Francis Cardinale, assistant director, joins the center's staff.

By the year 2000, cancer will surpass heart disease as the leading cause of death, with more than 1.6 million people diagnosed with the disease a year. The good news is that about half of all cancers can now be cured. Aggressive treatment plans, sophisticated chemotherapy drugs, advanced radiation therapy equipment and lifestyle changes are saving and prolonging the lives of thousands.

The Hospital of Saint Raphael has been a pioneer in cancer care from the 1940s when Dr. Robert Shapiro recognized the significance of radiation in treating cancer, to the founding of southern New England's first radiation therapy center in 1957, to the opening of the Hematology and Oncology Outpatient Treatment Unit in 1982. Saint Raphael's continues its tradition of combining compassionate care and high-quality medical services with the opening, in early 1994, of the Center for Cancer Care.

At the forefront of cancer care During the 1940s, Dr. Shapiro, chairman of the Radiology Department, and Dr. Wayne P. Whitcomb, an associate radiologist, recognized the importance of X-rays in treating cancer. Until then, X-rays were used mainly for diagnostic purposes. The United States trailed behind Europe in this emerging new field.

With Shapiro's backing, Whitcomb applied for and won a fellowship from the National Cancer Institute to study radiation therapy at the prestigious Holt Radium Institute and Christie Hospital in Manchester, England. He also visited treatment centers in Scandinavia. Upon Whitcomb's return, Saint Raphael's began plans to build a radiation therapy center, with funding mainly from the Ford Foundation. The center, the first in Southern New England, opened in 1957, with a supervoltage cobalt source equivalent to 3.5 million volts of X-ray.

"Many hospitals were competing for the Ford grant," says Virginia Whitcomb, who, with two of their children, accompanied her husband to England. "But Saint Raphael's had an advantage. Wayne had up-to-date knowledge about the latest treatments and equipment available to operate a radiation therapy center."

Saint Raphael's reputation as a leader in oncology grew. In 1976, the Hospital established an oncology floor to care for the



In 1990, Richard Fitzpatrick, Saint Raphael Foundation chairman, Jane Crowley, the Foundation's executive director, and Dr. Arthur Knowlton held plans for the new Center. In 1993, the parking lot behind the three became the construction site for the Center for Cancer Care. ➔



Peter Pearce, radiation therapy engineer, Dr. Francis Cardinale, and Vanna Dest, radiation oncology clinical nurse specialist, treat patients as a team. ➔



Artist's rendition of the Center incorporates aesthetic features. Construction moves forward as James Cullen, Dr. Arthur Knowlton, Sr. Anne Virginie and Dr. W. Bruce Lundberg gather for the ground breaking in 1992.



1979	1982	1986	1988	1991	1991	1992	1993	1994
Dedication of the Wayne P. Whitcomb Radiation Therapy Center at HSR.	HSR establishes the Hematology and Oncology Outpatient Treatment Unit for chemotherapy patients, marking the first time Hospital nurses begin administering chemotherapy. Oncology nursing becoming more of a specialty.	Dr. Joseph Cardinale, radiation oncologist, joins the center's staff.	HSR announces it will build a full-service center for cancer care that will consolidate under one roof radiation therapy services, chemotherapy, counseling, education and support programs currently scattered throughout the Hospital campus.	State Commission on Hospitals and Health Care grants HSR's application to construct \$22 million Center for Cancer Care.	Radiation Therapy Center handles 822 new patients and delivers 19,506 treatments. The Hematology and Oncology Outpatient Treatment Unit handles about 3,000 patient visits for chemotherapy and blood products.	Groundbreaking and official start of the Campaign for Cancer Care, a community-wide effort to raise at least \$5 million in philanthropy to help fund construction of the Center.	Dr. Knowlton named medical director of the Center for Cancer Care.	HSR will open the Center for Cancer Care.

increasing number of patients. In 1982 it opened the Hematology and Oncology Outpatient Treatment Unit for patients needing chemotherapy and blood products.

Though Saint Raphael's had the expertise and technology to treat patients, it sorely lacked adequate space. The Whitcomb center, originally designed to treat 250 patients, was handling 800 patient visits annually. The Hematology and Oncology Outpatient Treatment Unit, which initially treated about 15 patients monthly, was treating 15 or more a day. Cramped quarters offered little privacy and comfort, with patients forced to travel through the Hospital campus for services.

Coordinated cancer care And so, in 1988, Saint Raphael's launched plans to construct a \$22 million, dedicated cancer care facility to consolidate radiation therapy, medical oncology, nutritional guidance, social services and pastoral care under one roof, thereby making care easier and more efficient for patients. The Center is expected to handle more than 25,000 patient visits a year, with 90 percent of all patients receiving outpatient services.

The facility reflects changes in cancer care. Years ago, people were treated by one doctor. "Today, a multidisciplinary team from radiation oncology, medical oncology and general surgery work together to design complex and individualized treatment plans," says radiation oncologist Dr. Arthur Knowlton, the Center's medical director. A three-dimensional treatment planning system, three high-energy linear accelerators, and two treatment simulators will allow technicians to better focus on cancerous cells.

A promising future Saint Raphael's looks to the future with optimism. "We want to bring the most up-to-date and best-proven treatments to patients," says Dr. W. Bruce Lundberg, section chief of Oncology. "Our primary mission is patient care."

Future plans include working with physicians and the community to foster cancer awareness, taking part in national oncological research studies involving lung and esophageal cancer, and developing in-depth treatment management programs for breast, lung, and colon cancers incorporating national recommendations.

"The Center represents our spirit of hope," says Dr. Knowlton. "We're committed to remaining a leader in cancer care and to treating patients with compassion."



A long-time advocate for children, Eleanor M. Boyd spends time with Nia Smith, left, and Jeffery Manley in the Dixwell Community Ho

The Saint Raphael Healthcare System – Building upon its foundation to meet your healthcare needs.

The Saint Raphael Healthcare System, through its various affiliates, is developing a vertically integrated system of care to meet all the health needs of your employees. At Saint Raphael's, a full continuum of health related services will assure that high quality health care is provided in the most clinically appropriate and least intensive setting. The result: a cost-effective delivery system. And you benefit from offering your employees all the health services they need through a single low cost provider. Saint Raphael's physicians, representing every specialty, are located throughout each town in the Greater New Haven region.

What is a vertically integrated system of care?

It is a full range of interconnected health care services, encompassing preventive care, primary care, acute care, chronic care, rehabilitative care, and supportive care. These services are coordinated by a health care team so as to minimize interruptions, delays, inappropriate treatment, and confusion to the patient.

Why should my company choose a health provider that offers a continuum of services?

We know that you are under tremendous pres-

sure from your employees to provide comprehensive health benefits. We also understand your need to keep the cost of these benefits as low as you can. A system providing a full continuum of care accomplishes the following:

1. Gets people back to work sooner;
2. Minimizes inpatient hospital stays;
3. Promotes the pursuit of wellness, thereby reducing the incidence of illness and injury;
4. Minimizes your administrative costs of dealing with multiple providers;
5. Guarantees that your employees receive full service care of the highest quality with a lower cost to you.

How would this system of care actually work?

The Story of Mr. J.

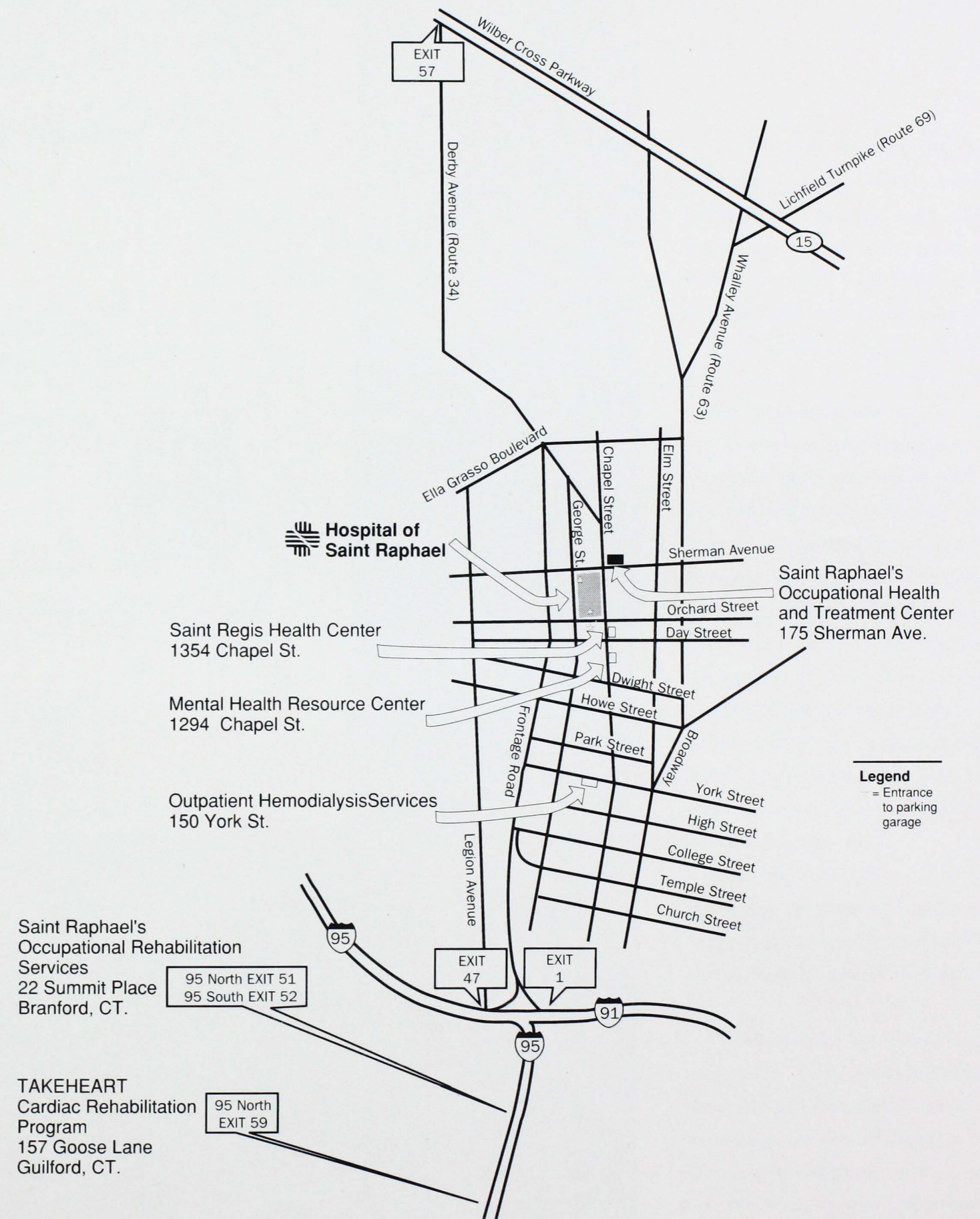
Take the case of Mr. J., a 54 year old long term employee of a large utility company. A smoker of thirty years, Mr. J. decides he needs help to give up his addiction. You suggest that he enter Saint Raphael's smoking cessation course, offered after work by the Community Health Department. While attending his third session, Mr. J. suffers a major heart attack. He is stabilized in the Emergency Room, and is transferred to the cardiac Care Unit for testing and observation. Specialized tests, available at only a handful of hospitals in the state, reveal that he is a candidate for a triple bypass operation. Following surgery, Mr. J. is transferred to the Cardiothoracic Intensive Care Unit, designed specifically for patients who have undergone open heart surgery. After two days in this unit, Mr. J. is transferred to a step-down bed where he continues to be monitored, but no longer requires the intensive, high cost treatment that he received while in intensive care.

It is at this point in his stay that rehabilitation begins for Mr. J.. Through a joint decision between his primary care physician and his cardiology specialists, Mr. J. becomes a TakeHeart patient. For the duration of his stay at Saint Raphael's, and for six weeks following his discharge to home, this employee has available to him the services of cardiology nurses, physical therapists, social workers, and nutritionists, all under the direction of a physician, to teach him to live a healthier lifestyle. They will even make a gourmet health food cook out of him!

Unfortunately the day before his discharge, Mr. J.'s wife is called to care for her elderly parents. He does not feel ready to care for himself at home, but Mr. J. no longer requires the inpatient services of the hospital. Saint Raphael's system of care comes to the rescue. Mr. J. is offered a full range of home care services through one of Saint Raphael's preferred provider companies (only those which meet our extremely high standards of care). Saint Raphael's job is hardly over. Our Continuing Care staff helps Mrs. J. with the long term care needs of her mother, placing her in Saint Regis, or 125 bed skilled nursing facility where she is restored to her highest level of functioning within six weeks. She is then discharged to home, under the care of her internist. As for Mr. J., he is back to work shortly after his surgery. But you hardly recognize him. He is smoke free and fifteen pounds thinner. And, most importantly, he is, again, one of the most productive employees in his company.

The family of Mr. J. has utilized many services along the continuum of care comprising the vertically integrated health system at Saint Raphael's. But the coordination of services has simplified the process for the family. And it has guaranteed the highest quality of care at the least intensive setting at each point along the course of treatment. **Because the Saint Raphael Healthcare System is uniquely designed to meet a full continuum of health care needs.**

Saint Raphael Healthcare System Program Locations





Eleanor M. Boyd credits her spirituality, an upbeat outlook, and a fast-acting team of surgeons and medical oncologists for giving her strength as she fights colon cancer. Within weeks of her diagnosis, Boyd underwent two operations at Saint Raphael's and began a 52-week chemotherapy regimen. So far, she's experienced few side effects.

"I believe there isn't anything you can't overcome if you put your mind to it. It's all about having a positive attitude," says Boyd, 65, a New Haven Board of Education supervisor and president of the Dixwell Community House board of directors.

The disease hasn't deterred Boyd from staying active. She returned to work after a brief sick leave and spends time with youths at the community house and her church. "There haven't been too many lifestyle changes," she says. "It's just a matter of pacing yourself."

Boyd, whose family has a history of cancer, says the "care of cancer patients has come miles" since her son died of the disease at age 10 more than two decades ago.

"It took weeks for the doctors to diagnose my son, and he had to be confined to the hospital for treatment," says Boyd. "Now things are very different. I get my chemotherapy Tuesday mornings and then head off to work. It's amazing the amount of progress that has taken place."

Dr. Arthur Knowlton, Medical Director

Center for Cancer Care

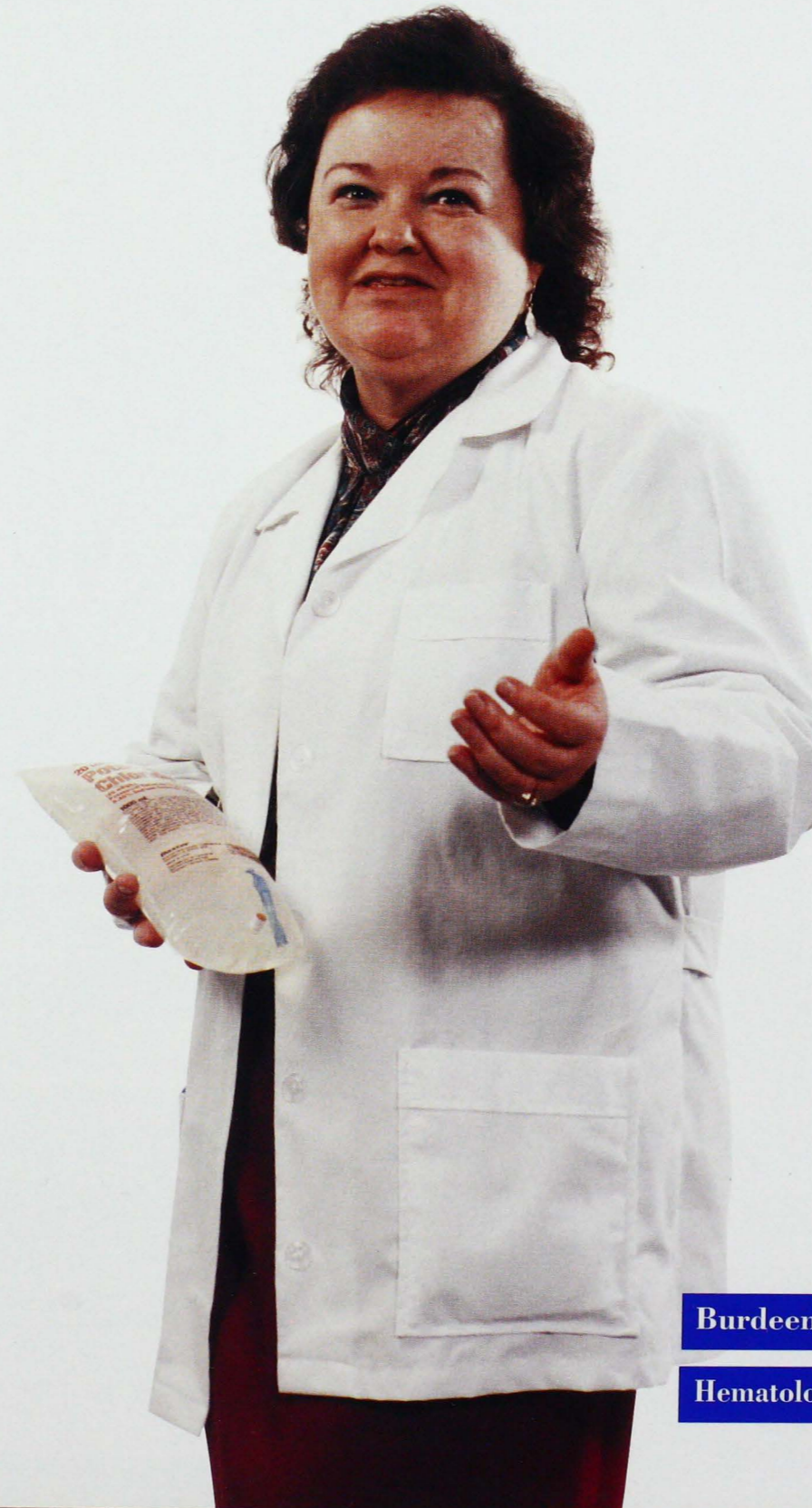


"People say it must be depressing to work with cancer patients. But I don't see it that way. We have the opportunity to make a major impact on the well-being of an individual. We're working every day to prolong lives and, in many cases, save lives. We can improve the quality of a patient's life. I find that both medically and emotionally satisfying.

"I think what sets us apart from other health care facilities is our belief on focusing on the total needs of cancer patients. That means tending to a person's physical and emotional needs."

"I believe the will to do well is better when people receive treatment on an outpatient basis. They can go on with their lives. They feel more independent and in control.

"We try to provide an atmosphere where they feel comfortable and know they're getting the best care possible. They can receive treatment in a recliner while watching television. They can bring family and friends. Some people even bring their computer so they can work while receiving treatment. We want to make this part of their treatment as easy as possible."



Burdeen Camp, P.A., Manager

Hematology and Oncology Outpatient Treatment Unit



New Haven's Union Station is a familiar place for former Conrail train master John O'Connell.

"I thought I was going to die," says John O'Connell, 68, recalling the day he learned he had cancer. A routine chest X-ray detected a spot on his lung, which doctors later diagnosed as cancer. Then came more bad news: the cancer had spread to his bones.

"I wasn't really stunned when I learned I had cancer because I had smoked heavily for 40 years," says O'Connell, who kicked the habit about a decade ago.

In the past 18 months, O'Connell has undergone radiation therapy and chemotherapy to destroy two lung tumors. Now he's fighting brain cancer, again with radiation therapy and chemotherapy. "The radiation doesn't bother me. You get tired, listless, you lose your hair. I can handle that," he says. "But with the chemo, you get very sick."

A retired train master, O'Connell says he misses the hustle and bustle of his past working days and is realistic about the future.

"I know for sure the cancer will kill me. I'm surprised I've lasted this long, to tell you the truth," he says. "But I try to get out as much as I can. It's important to stay active."

Dr. W. Bruce Lundberg

Section Chief, Oncology



"The intricacies of chemotherapy and the demand for outpatient care have created a need for specialized oncology professionals. In order to give chemotherapy effectively and safely, you must be aware of the technical complexities of the drugs. When should you administer the drugs and in what order? What dose is needed? What are the side effects?"

"That's why you need a sophisticated outpatient team. People don't want to be in the hospital. They want treatment on an outpatient basis so they can lead their lives. We're responding to that challenge."

"At first, people turn to me for help with practical matters, such as arranging transportation or finding a support group."

"But once they know me, the mask comes off and they begin to speak openly. Many patients put up a front with their families because they feel they must be strong. With me, they can be themselves."



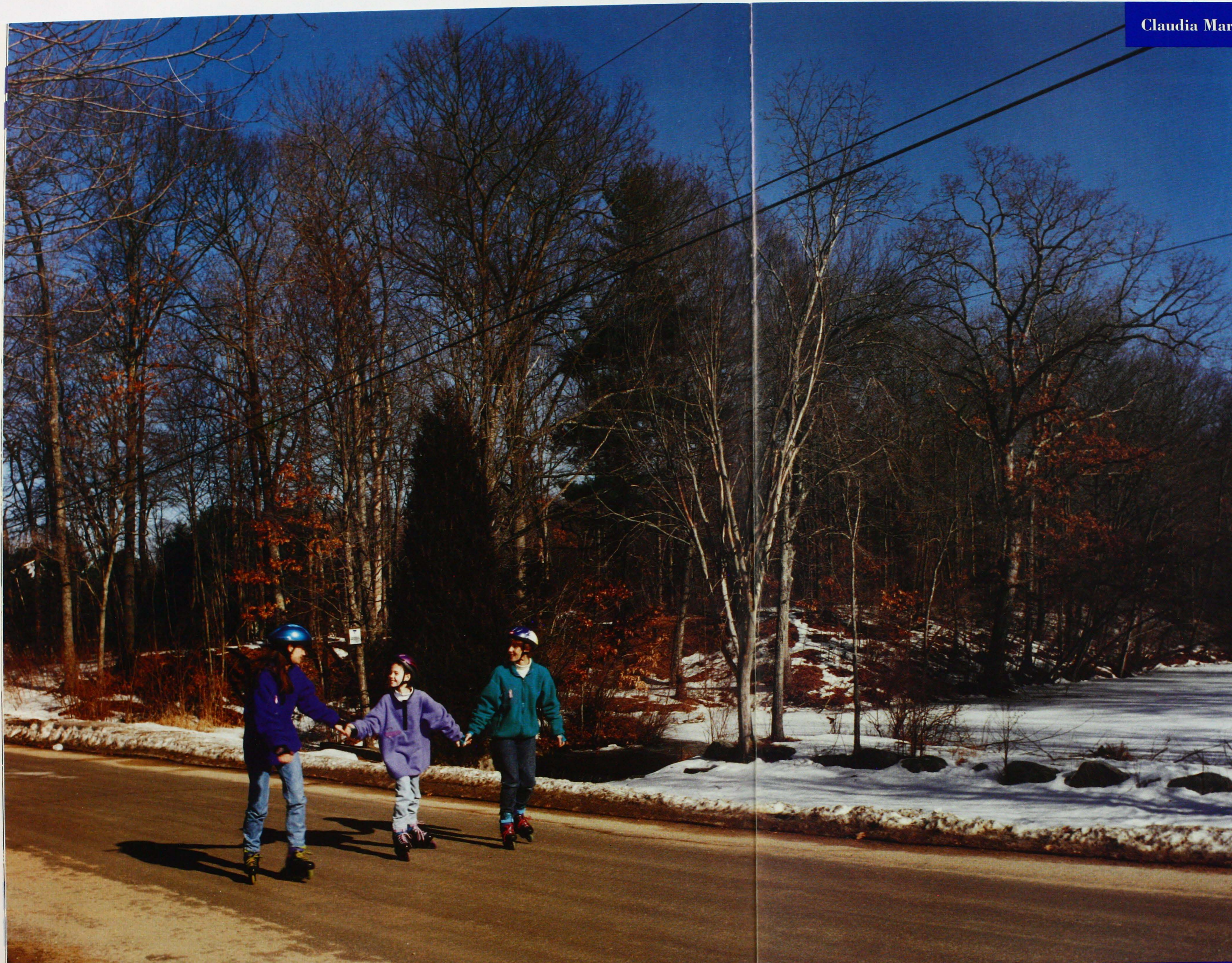
"I help patients make the transition to their home, extended care facilities, or Hospice. Hospice provides physical and emotional support for terminally ill patients."

We focus on the person's quality of life, no matter how short that span may be. We want to make all those last days count.

"My patients teach me the value of life, the preciousness of time, and the importance of tolerance."

Agnes Barba, M.S.W., Oncology Social Worker

Patty Zelinsky, R.N., Continuing Care Coordinator



Claudia Marks (right) stays active roller blading with daughters Ashley, 10 (center), and Kelley, 14 (left), at a park near their Madison home.

Two operations, 32 radiation therapy treatments, and six chemotherapy sessions to combat breast cancer haven't dampened the spirits of Claudia Marks.

"I have a 90 percent chance of being cured, so I'm very optimistic," says Marks, 43, a Southern New England Telephone Co. manager. "But I do worry about my two daughters. I worry about their future because breast cancer is hereditary."

Marks, whose mother died of breast cancer at age 50, wanted the facts on all treatment options once she discovered the tumor in her left breast during a self-examination.

"In the end, I chose to have a lumpectomy with radiation therapy, followed by chemotherapy. Why go the traditional route (mastectomy, followed by chemotherapy) when this approach is just as effective and will preserve the breast? I saw my mother undergo two radical mastectomies within a year-and-a-half. I didn't want to go through that if I didn't have to."

Marks says the honesty and positive attitude of the people at Saint Raphael's helped allay her fears. Now Marks spends time helping and educating others.

"I want people to know that you can have cancer and keep on living. You can see your kids grow up. You can enjoy life."

Dr. Randolph Reinhold, Chair

Department of Surgery



"We're seeing more collaborative and multidisciplinary approaches to treating cancer. Clearly, the combination of surgery, radiation therapy, and chemotherapy appears to give improved survival rates, and, in some cases, cures.

"Surgery remains a first line of defense in treating solid tumors. About half of all the surgery performed at the Hospital is related to the detection or treatment of cancer. Oncology has become a major discipline of medicine at Saint Raphael's."



"Patients and family members are nervous and frightened when they first come here. It's a very scary thing to go through. They need our care and understanding, and most importantly, they need to be treated with dignity as unique human beings.

"I try to inspire them with hope. Sometimes we pray together, sometimes we talk, sometimes I just listen. All I can do is love them and let them know I'm there for them."

Sister Marjorie Crean, S.C.

Chaplain, Pastoral Care



Irving Leveton works on a new sketch, surrounded in his studio by his artistic creations and the violin he is learning to play.

I don't feel like a cancer patient. I don't get up in the morning and think, 'Oh, I've got cancer.' I wake up and say, 'Hey, I've got another day to enjoy,'" says 77-year-old Irving Leveton, a graphic designer and painter.

Four years have passed since Leveton discovered he had prostate cancer. "I wasn't aware that men in their later years are prone to getting prostate cancer," says Leveton, remembering the day his doctor called him with the news. "It was a tremendous shock."

But Leveton was determined "not to look at the dark side" when he began a series of 37 radiation therapy treatments at Saint Raphael's. "I had heard such wild stories about side effects, illness, pain, nausea. But that didn't happen to me. I had very little discomfort or pain. I was a bit tired and nauseous for one or two days, but not enough to complain about it," he says. "It also helped that the people at Saint Raphael's were so caring, uplifting and positive. They made me feel great."

Today, Leveton continues creating paintings, drawings and cartoons. He's also taking violin lessons. "I just live my life and appreciate the many things in life that are wonderful. I don't want to take anything for granted," he says. "I'm a firm believer in learning to accept the hand that life has dealt you."

Martha Picone, C.M.D.

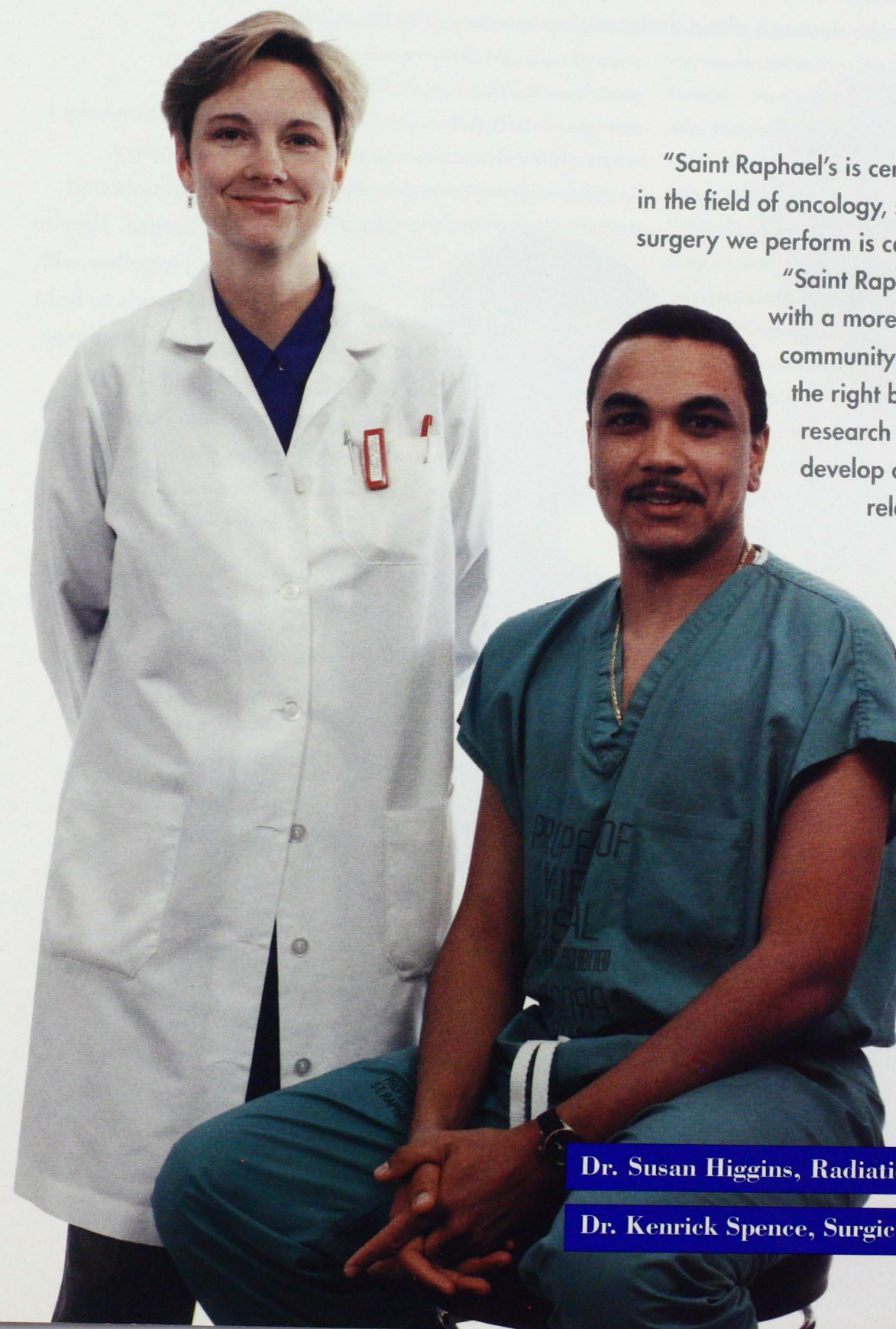
Dosimetrist



"My job is to find the optimal way to treat patients. We develop several treatment plans for each person, all designed to give the maximum dose of radiation to the tumor, while minimizing the dose to normal tissue. We custom-design every treatment plan because every patient is different.

"The cancer center's new three-dimensional treatment planning computer and treatment machines will enhance our ability to design sophisticated treatment programs. As computers become more intelligent, our treatment plans become more complex, allowing us to better care for our patients."

"As a researcher, I focused on how radiation could damage DNA and cause cancer. Now, as a radiation oncologist, I use radiation to treat cancer. In the future, I believe genetic and molecular biology will play a bigger role in the diagnosis and treatment of cancer. The more we know about what causes cancer, the better our chances of finding more effective ways to treat it."



"Saint Raphael's is certainly on the forefront in the field of oncology, since much of the surgery we perform is cancer-related.

"Saint Raphael's is providing me with a more realistic view of community medicine by offering the right blend of clinical research and the opportunity to develop close doctor-patient relationships."

Dr. Susan Higgins, Radiation Therapy Resident

Dr. Kenrick Spence, Surgical Resident

"I decided to specialize in oncology when I was a nursing student. There was a 23-year-old girl dying from kidney cancer. Many of the nurses felt uneasy caring for her.

"Now it's different. My nurses are highly trained and committed. They're here because they know they can make a difference. And patients today have choices. Patients have the right to know everything, so they can make decisions about their care."



"Some people question why I want to work in oncology.

"I think cancer patients and their families are special. They're so strong, working together with their families and friends to fight this illness. Even when they are very sick, I find that cancer patients have great inner strength."

Sherry Greifzu, R.N., O.C.N., Head Nurse, Oncology Unit

Teresa Bennett, R.N., Oncology Nurse

Highlights of 1993

The Saint Raphael Healthcare System remained focused in 1993 on its commitment to provide the highest quality care to all persons in need. Guided by the values of the Sisters of Charity of Saint Elizabeth and the Roman Catholic Church, our goal is to enhance the health status of our community by working with our affiliates and with other organizations to provide the people we serve with a comprehensive range of services along a continuum of care.

These include in- and outpatient cancer services, wellness programs, in- and outpatient acute care services, rehabilitation, and long-term care. We recognize the importance of community-based partnerships that allow us to use our resources effectively and efficiently. By working together in a health care delivery system, we can offer the best care in the most clinically appropriate and cost-effective environment.

Keeping our community healthy Our commitment to our community includes promoting health by providing health education and wellness activities, and offering basic primary and preventive care in the most cost-effective settings. To make care more accessible, it is

becoming common for this care to be provided in the community, rather than at a hospital. And wellness knows no age — we teach soon-to-be-moms parenting skills and offer exercise programs for the young at heart, even if they are 80 years old! This commitment to health often prevents future, costly illnesses.

Working together with business and community leaders, Saint Raphael's Occupational Health & Treatment Center was created to help employers provide quality medical care for their employees. In 1993, the employees of 238 companies accounted for more than 24,000 visits.

Collaborative efforts with the city of New Haven allowed us to better serve two ends of the age spectrum. Our Project ElderCare provides primary care and other health services to residents in two low-income, elderly housing complexes—the Edith Johnson Towers and Crawford Manor. The ElderCare sites handled more than 1,333 patient visits in 1993.

A partnership with local boards of education resulted in school-linked and school-based clinics at the Troup Magnet Academy of Sciences, a middle school in Saint Raphael's neighborhood, and the Branford Intermediate School. Work is under way to begin a similar program at New Haven's



Occupational health nurse Lucille Clark examines Anna Savino's hand at Robby Len Fashions in New Haven. More than 200 companies receive services from Saint Raphael's Occupational Health & Rehabilitation Services.

Highlights of 1993

Dwight Elementary School.

Project MotherCare, a mobile van providing primary and prenatal care in New Haven's neighborhoods, expanded its service area to include West Haven. Almost 3,270 children, pregnant women and other adults were treated in 1993.

Like cancer, heart disease is one of this nation's leading killers, and Saint Raphael's has responded with a wide range of programs to keep hearts healthy. An important component is our cardiac rehabilitation program, TakeHeart, which opened a successful satellite site in Guilford.

Through a Parish Nurse Program, we are identifying nurses who volunteer to provide health education and screenings to church or synagogue members. The program received \$3,500 from the Sisters of Charity Ministry Grants Program to buy equipment and supplies, enabling the start-up of the program at three inner city parishes.

As part of our commitment to New Haven, Saint Raphael's implemented a comprehensive plan to help stabilize and improve our neighborhood. The plan, created



Brukeia Williams, a fifth-grader at Troup Magnet Academy of Sciences, and Sheila Tanner, a Saint Raphael employee, have developed a special friendship through a mentorship program that pairs Hospital of Saint Raphael employees with middle school children in New Haven.

in partnership with residents and city leaders, focuses on career counseling, job skills training, employment, youth activities, and neighborhood beautification. We've begun a community reading room in the Dwight Police Substation staffed by Saint Raphael employee volunteers and a mentorship program linking employees with New Haven school children.

Growth of outpatient services Saint Raphael's is responding to the nationwide trend of providing the most appropriate level of care in the most convenient, cost-effective setting. Demand for outpatient surgery grew by six percent in 1993, while the number of patients seeking primary care at our clinics also increased. Expanded clinic hours and additional treatment locations boosted clinic visits to 42,500 in 1993 - a 6.7 percent increase from the previous year.

In another effort to most appropriately provide care, the Hospital received approval to develop an Adolescent Psychiatric Day Hospital. This program, which received financial support through a community-wide concert sponsored by the Saint Raphael Foundation, is a more cost-effective, appropriate alternative to hospitalization.

Saint Raphael's also received approval to move and increase much-needed outpatient dialysis services to a York Street site in 1994. The convenient new location will be more comfortable with its 28 patient care stations. The space formerly used by dialysis at the Hospital will be converted to a medical/surgical inpatient unit, helping to ease the demand for acute care inpatient beds.

Excellence in acute health care Because we are a teaching hospital offering sophisticated services, demand for acute care services was extremely strong in 1993.

The new Center for Cancer Care, fulfilling a long-time commitment to our patients and community, topped the list of enhanced or expanded services. To support the Center's acute inpatient and outpatient programming, the Saint



Occupational therapist Donna Latella works with patient James Manual at Saint Regis Health Center, where a restorative care program helps people return home or enter intermediate care facilities.

Raphael Foundation initiated a major, community-wide campaign in fiscal year 1992.

A 16-bed medical transitional area was created to serve as a stepping stone for those Emergency Department patients who are awaiting placement on a nursing unit. This allows us to care for these patients in an environment that respects their dignity.

To best utilize our inpatient acute care beds, the Hospital formalized a relationship with Saint Regis Health Center, Saint Raphael's 125-bed nursing home. Patients no longer needing acute hospital care but waiting for placement in the nursing home of their choice are transferred to Saint Regis, allowing the Hospital to use inpatient beds for acutely ill patients. By providing care more efficiently, the Hospital's average length of stay was reduced, enabling the Hospital to care for more people.

Helping older citizens enjoy life Our CareCard senior membership program, offering education programs, screenings, exercise programs, and social activities, grew to almost 4,000 members. The program's goal is to keep people 55 and older healthy and active.

For elderly people who no longer need the Hospital's acute care, but are not yet ready to return to an independent lifestyle, Saint Regis developed a restorative care program. Its goal is to help people return home when possible or move to the most clinically appropriate and cost-effective setting. The program provides chronically ill elderly patients with aggressive rehabilitation services and offers support and intervention for those who no longer need acute care but are still too medically fragile to be cared for at home or by most other nursing homes.

The generosity of our community Leadership from Bilco Company Chairperson Robert J. Lyons, and pacesetter gifts of \$500,000 from the Hospital Auxiliary and \$900,000 from Saint Raphael employees propelled the successful Campaign for Cancer Care, which raised \$6.7 million in 1993 for the Center for Cancer Care. This success was heightened in early 1994 with a \$3 million gift from the Knights of Columbus. These were just some of the philanthropic dollars the Saint Raphael Foundation raised through the Annual Appeal and special events. As a result, the Foundation transferred \$1.9 million to the Hospital and

Highlights of 1993

\$100,000 to Saint Regis. Due to their generosity, about 400 individuals and corporations qualified for the Presidents' Circle, an increase of 84 donors over 1992, and enjoyed the Presidents' Ball.

With financial support from the Saint Raphael Foundation, our affiliate Xavier Services Corporation assumed oversight of a new patient television system for the Hospital that offers patients a free basic level of service and expands our opportunities to provide patient and staff education programs.

Giving back to the community Saint Raphael's provided more than quality care. In 1993, more than 1,026 students from 46 medical, nursing, allied health and other programs at 38 different schools received training on our campus. These include interns, residents and fellows in our graduate medical education program, physical and respiratory therapists, pastoral care students, medical office assistants, and nurse practitioners.

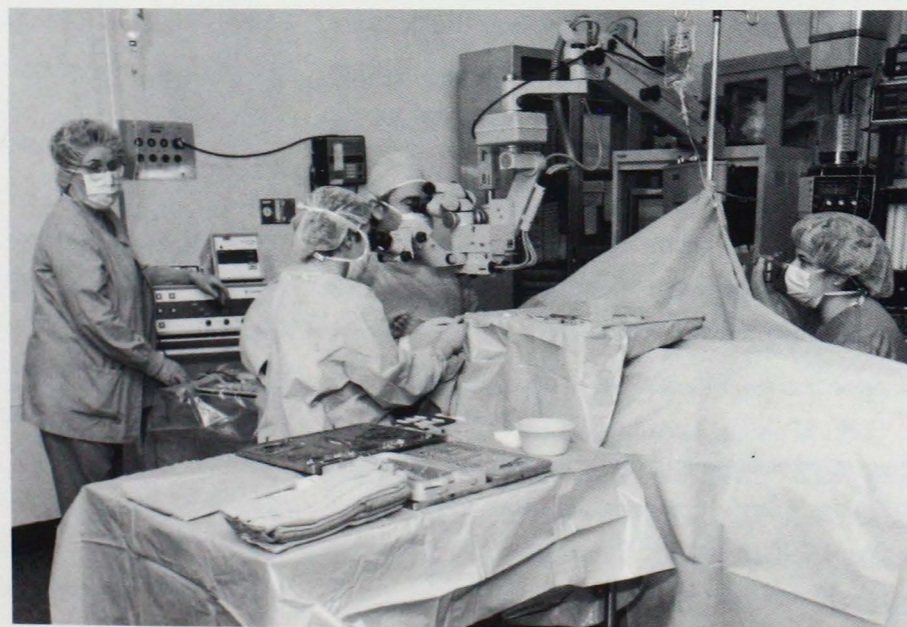
The Saint Raphael Healthcare System is proud of its initiatives and the progress made in 1993. We look forward to another year of working in partnership with the community to strengthen our ministry of caring.



Patients in 1993 not only got new televisions, but also a free level of basic television service thanks to a collaborative effort between Saint Raphael Foundation and Xavier Services Corporation.

Information for this report was compiled by the chairs of the Saint Raphael Healthcare System, which includes the Hospital of Saint Raphael, Saint Regis Health Center, Saint Raphael Foundation, Xavier Services Corporation, Better Health Pharmacy, Seton Real Estate, and DePaul Health Services Corporation.

An outpatient surgical team, headed by Dr. S.P. Sprotzer (second from right), performs an ophthalmological procedure. Patients return home the same day.



1993 Board Members

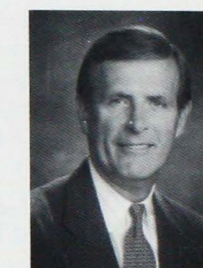
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Chairperson, Caritas Insurance
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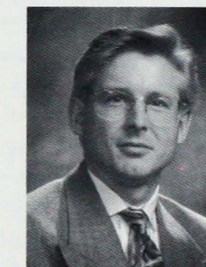
Sister Mary Canavan
Sisters of Charity
of Saint Elizabeth
Chairperson, Saint Raphael
Healthcare System



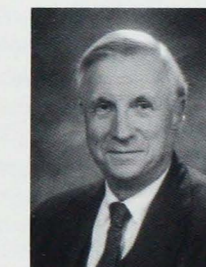
Leo Connors
Founders Bank
Chairperson, Saint Raphael
Foundation



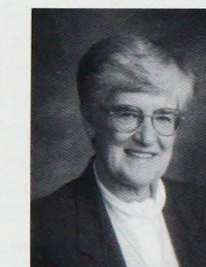
James Cullen
Hospital of Saint Raphael
President, Better Health
Pharmacy



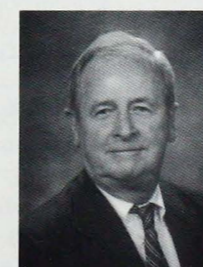
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President, One For All Fund



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Attending Physician
President, Hospital of
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Medical Board Report

The medical staff in 1993 made great strides in strengthening the relationship between its attending physicians and the Hospital of Saint Raphael. We began working with the Hospital on this integration process in 1993 and are committed to further exploring vehicles for closely combining our interests with that of the Hospital. In particular, we will develop a vehicle to deliver managed care together.

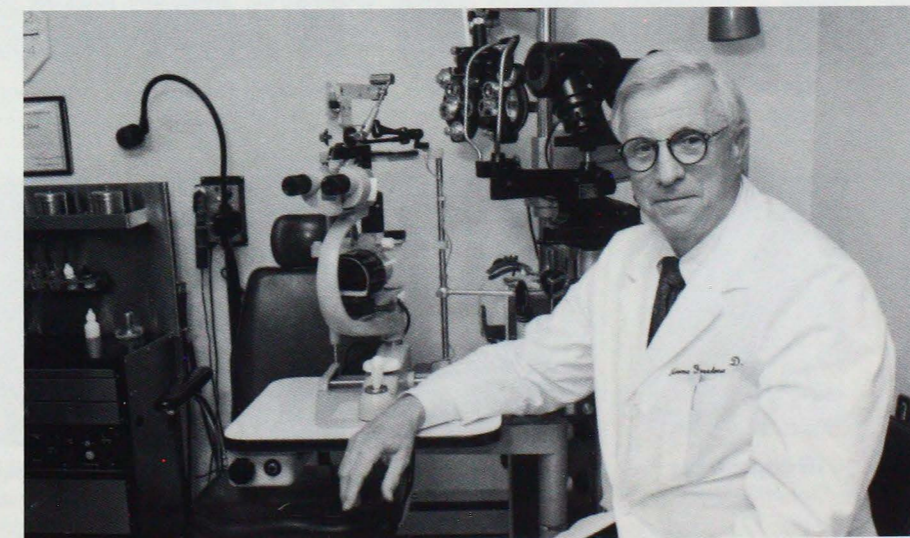
Continuing our tradition of teaching excellence, all programs for the more than 100 members of our housestaff — medical residents, interns, and fellows — remain accredited during a time of close scrutiny by the Accreditation Council for Graduate Medical Education. Most of our attending physicians participate in our medical education program and contribute to its success. Full-time medical directors also were hired to provide leadership on nursing units, conduct housestaff rounds, help residents develop diagnostic and procedural skills, and oversee the efficiency and appropriateness of care.

The expertise of our medical staff extended be-

yond their clinical area. We increased medical staff representation on Saint Raphael Healthcare System boards, with Dr. Kenneth Ciardiello, former president of the medical staff, chairing the Hospital's Planning Committee. This is the first time a physician has chaired a standing board committee. Two new section chiefs, both long-time staff members, were appointed in 1993, Dr. Ronald Vender, Gastroenterology, and Dr. John Aversa, Orthopedics, in addition to new medical director and service chief appointments.

Lastly, we are pleased the Center for Cancer Care opens with Dr. Arthur Knowlton as medical director. Dr. Knowlton, a well respected member of the staff, has been an attending radiologist and director of Radiation Therapy since 1976. We look forward to the Center providing better patient care management by designing disease-oriented programs that integrate the health care delivery team.

We look forward to strengthening our partnership with Saint Raphael's as we strive to provide quality care to all. — Dr. Jerome Freedman, Medical Board President



Dr. Jerome Freedman, an ophthalmologist and president of the Hospital of Saint Raphael's Medical Board, is committed to strengthening ties between the Hospital and its attending physicians.

Saint Raphael's 1993 Medical Staff

Officers



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James J. Sabshin
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Chairpersons



Petar Lujic
Dept. of Anesthesiology



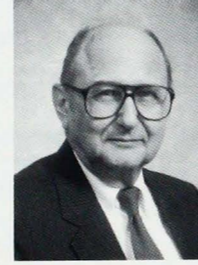
Paul Krochmal
Dept. of
Emergency Medicine



Peter Herbert
Dept. of Medicine



Wilfred Reguero
Dept. of Obstetrics/
Gynecology



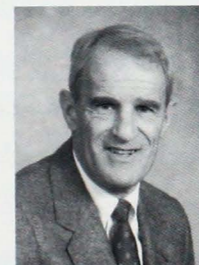
Romeo A. Vidone
Dept. of Pathology



Richard Young
Dept. of Pediatrics



Thomas Stewart
Dept. of Psychiatry



Jack L. Westcott
Dept. of Radiology



Randolph Reinhold
Dept. of Surgery

Section Chiefs

DEPT. OF MEDICINE



Richard Mangi
Allergy,
Infectious Diseases



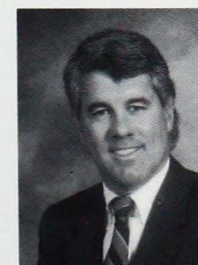
Philip Fazzone
Cardiology



Kalman L. Watsky
Dermatology



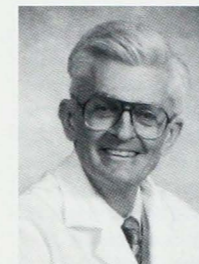
Barr H. Forman
Endocrinology



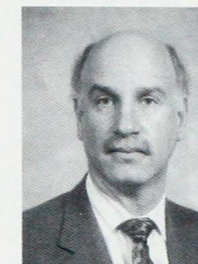
Ronald Vender
Gastroenterology

Section Chiefs

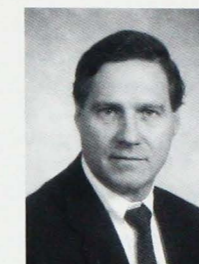
DEPT. OF MEDICINE (CONTINUED)



John Merritt
Geriatrics



Evan M. Ginsberg
Internal Medicine



W. Bruce Lundberg
Hematology/Oncology

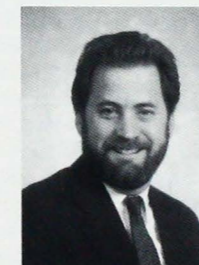


Frederic Finkelstein
Nephrology

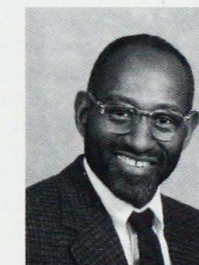


Bruce Haak
Neurology

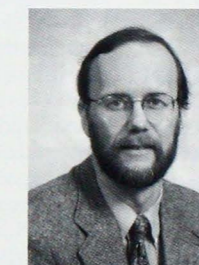
DEPT. OF PSYCHIATRY



John W. O'Brien
Physical Medicine



Herbert Knight
Pulmonary

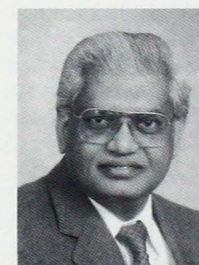


Gordon Hutchinson
Rheumatology

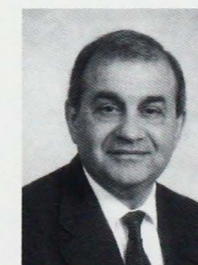


Daniel Koenigsberg
Child Psychiatry

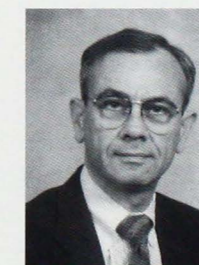
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Vasant Khachane
Cardiothoracic Surgery



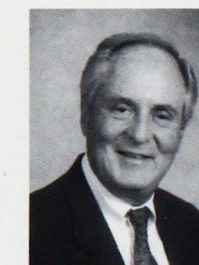
Kenneth Ciardiello
General Surgery



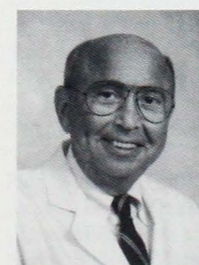
Walter Kwass
Vascular Surgery



Isaac Goodrich
Neurosurgery



Michael Fezza
Ophthalmology



Bernard Levine
Oral and Maxillofacial
Surgery



John Aversa
Orthopedics



Keatjin Lee
Otolaryngology



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Leon A. Goldstein
David Goodkind
Danuta Jaworska
James R. Lyons
Gary Mombello
John Persing
Irving Polayes
Gary Price
Jeff Salomon
Henry M. Spinelli
Richard S. Stahl
Robert Tross
Mark Weinstein

Auxiliary Report

The Auxiliary proudly celebrated its 85th anniversary in 1993, reflecting on our tradition of service and philanthropy to the Hospital of Saint Raphael and Saint Regis Health Center.

Thanks to widespread support from the community this year, the Auxiliary expects to meet its five-year pledge of \$500,000 toward the new Center for Cancer Care within four years.

Total donations from the Auxiliary equaled \$192,000, including \$125,000 for the cancer facility and \$52,000 to Saint Regis Health Center. We bought furniture, equipment and toys for the pediatric clinic, distributed immunization booklets to mothers, and funded the production of health information videos.

The Auxiliary's commitment to the Hospital of Saint Raphael went beyond philanthropic endeavors. Our volunteers offered support to people waiting for loved ones being treated in the surgical intensive

care unit and recovery room. And we served as ambassadors for the Hospital, providing information about our services to the community.

We continued fund-raising ventures that support the community. Through the Orchard Street Thrift Shop we donated clothing to patients in the Emergency Department, the Hospital, and Saint Regis. The Art Corridor beautifies the Hospital, raises money, and promotes local artists. Other fund-raising efforts included the Glass Door Gift Shop; the Annual Men's and Women's Golf Tournaments; jewelry sales; a Day at the Volvo tennis tournament; the baby photo project; and a brunch, auction and fashion show. We celebrated our 85th anniversary with a gala.

Inspired by the mission of caring, the Auxiliary will continue responding to the needs of Saint Raphael's and the community. — Corinne Schioppo, Auxiliary president



Auxiliary President Corinne Schioppo (right), shows an immunization booklet to Laura Tatun and her son, Ernest, in the pediatric clinic at the Hospital of Saint Raphael. The booklet is just one of the many projects funded by the Auxiliary.

Foundation honors major donors for 1993

During 1993, Saint Raphael supporters once again demonstrated their commitment to caring by giving generously to support services, programs, and capital equipment acquisitions at the Hospital of Saint Raphael and at Saint Regis Health Center, the Saint Raphael nursing home.

Throughout the year, the Saint Raphael Foundation's Campaign for Cancer Care was a major area of emphasis, gaining significant support from individuals, organizations, foundations, and corporations alike. In addition, a major gift directed to the development of a garden atop the Hospital's new Center for Cancer Care will provide much-

needed green space for the entire Saint Raphael community - patients, visitors, and staff alike. As always, donors continued their giving ways to special events, gifts in remembrance, and the annual appeal, supporting the ongoing needs of the Saint Raphael Healthcare System. Saint Raphael's is deeply grateful for this generosity of spirit.

Listed here are members of the Presidents' Circle for fiscal year 1993 (October 1, 1992 through September 30, 1993). Through their high-level support, these donors have played a special role in sustaining Saint Raphael's ongoing efforts on behalf of people in need.

1993 Presidents' Circle

Membership is based on cumulative gifts of \$1,000 or more in fiscal year ending September 30, 1993

Platinum

\$10,000 and over

Individuals

Fred Apuzzo
Dr. Samuel & Barbara Bobrow
Mr. & Mrs. M. Joseph Canavan
Drs. Effic Chang & Jacob Loke*
Mr. & Mrs. James J. Cullen
Drs. Stephanie & Leonard Farber
Dr. & Mrs. Philip R. Fazzone
Carole Brown Fischer
Dr. & Mrs. Il Song Hahn*

Sin Hang Lee, M.D.*
Dr. Arthur & Betty Levy
Drs. Esther & Irwin Nash*
Drs. Ronald & Teresa Ponn*
Dr. & Mrs. Richard K. Shaw*
Dr. & Mrs. Romeo A. Vidone*
Dr. & Mrs. Richard S. K. Young*

Corporations & Professional Corporations

Anesthesia Associates of New Haven, P.C.
Centerbank
Cosgrove Construction Company
Dorr-Oliver Incorporated
Fleet Bank
Knights of Columbus
Levett, Rockwood & Sanders, P.C.
Merrill Lynch & Co., Inc.

Miles, Inc.
New Haven Savings Bank
Neurosurgical Associates of New Haven, P.C.*
A. Prete & Son Construction, Inc.
SNET
Sargent & Company
Starter Sportswear, Inc.
United Aluminum Corporation

Organizations

Amity Club, Inc.
Auxiliary of the Hospital of Saint Raphael
HSR Physician Services Fund
Saint Raphael Employees One For All Fund

Foundations

The Community Foundation for Greater New Haven

Trusts

Armtck Corporation
Dr. Luca E. Celentano

Estates

Florence & Biagio Anthony Abbatello

Gold

\$5,000 - \$9,999

Individuals

Mrs. William J. Berg
Dr. & Mrs. Joseph G. Cardinale
Dr. Vicente J. Caride
Dr. David P. Colley
Mary Dessert
Mr. & Mrs. Alfred E. Fasulo
Mr. & Mrs. John A. Figurelli
Dr. Gerald Fishbone
Dr. & Mrs. Malcolm B. Friedman
Dr. Shelby J. Galloway
Lee H. Greenwood, M.D.*
Dr. Peter N. Herbert
Dr. William D. Kerin
Dr. Arthur H. Knowlton
Mary Kuncas-Day
Dr. K.J. Lee
Dr. & Mrs. Paul H. Levesque
Dr. Michael A. Luchini
W. Bruce & Delaney Lundberg
Mr. & Mrs. Robert J. Lyons, Jr.
Mr. & Mrs. Frederick J. Mancheski*
Dr. & Mrs. C.P. Noel McCarthy
Dr. & Mrs. Christopher M. McLaughlin
James N. Mitchell
Dr. & Mrs. Edward K. Prokop
Paul Palis
Dr. & Mrs. Jeffrey M. Sumner
Dr. Mary M. Tse*
Matthew & Christine Van Vranken
Dr. Jack L. Westcott
Dr. & Mrs. Eiji Yanagisawa
Dr. J.E. Fredrik Zetterberg*

Corporations & Professional Corporations

American Medical Response of Connecticut
Arthur Andersen & Co.
Brennan Construction Company
Connecticut Heart Group, P.C.
Cardiothoracic & Vascular Group, P.C.*
Enthone-OMI, Inc.
First Security Services Corporation
Marlin Firearms Company*
New Haven Orthopaedic Group, P.C.*
Pilot Pen Corporation
Sachs, Berman & Shure, P.C.
Southern Connecticut Gas Company
T.P.A. Design Group

Estates

Pauline Richard

Silver

\$2,500 - \$4,999

Individuals

Employees of Anesthesia Associates
Dr. & Mrs. Jose Asis
Dr. & Mrs. John M. Aversa
Burdeen Camp, P.A.
Dr. Francis S. Cardinale
Mrs. Barbara Cooley-Wareck
Michael Dimenstein
Dr. Leonard A. Fasano
Caren Genovese
Charles Gignac
Dr. & Mrs. Scott Kantor
Jonnie Lewis-Thorpe
Janeanne Lubin-Szafanski
Mr. & Mrs. George W. Lyons, Jr.
Mr. & Mrs. Stephen McPherson
Dr. & Mrs. Ernest D. Moritz
Joseph Pajor
Eric C. Palluotto, M.D.*
Mr. & Mrs. Edward Petraiuolo, Jr.
Mr. & Mrs. S. Terry Philcox
Dr. & Mrs. Wilfred Reguero*
Dr. Randolph B. Reinhold
Dr. & Mrs. Charles E. Riordan
Patricia Rosenbaum
John Sforza
Gregory Stanton
Mary Elizabeth Stewart
James Thibeault
Dr. & Mrs. Frank J. Troncale
Dr. & Mrs. Ronald J. Vender
Cindy von Beren & Fred Frassinelli
Dr. & Mrs. Mark H. Weinstein



(Above) At this year's Presidents' Ball, Donald Calcagnini, chairman of the board and chief executive officer of Lafayette American Bank, was presented with Saint Raphael's Archbishop Henry J. O'Brien Award by James Cullen (left), president and chief executive officer, Hospital of Saint Raphael, and Sister Anne Virginie, president of Saint Raphael Healthcare System. (At left) Sister Louise Anthony, former administrator of the Hospital of Saint Raphael, congratulated Calcagnini, a long-time friend and associate, on receiving the award in recognition of 22 years of volunteer commitment, including service as chairman of the Hospital Board from 1987 to 1991.



A highlight of the 1993 Presidents' Ball was the announcement that Carole Brown Fischer and her three daughters would fully fund the addition of a garden on the roof of the new Center for Cancer Care to serve the entire Hospital community. Shown following the announcement are Carole; Matthew Van Vranken (center), the Hospital's executive vice president and chief operating officer; and Leo Connors, President of Founders Bank and chairman of the board of the Saint Raphael Foundation.

Maureen Q. Wolyniec

Corporations & Professional Corporations

Ann Taylor, Inc.
Ed-Mor Electric, Inc.
The Equion Corporation
Glaxo, Inc.
HSR Obstetrics & Gynecology
Medical Oncology & Hematology, P.C.
Perkin-Elmer Corporation
Shawmut Bank*

Southern New England Ear Nose Throat & Facial Plastic Surgery Group
Urology Group, P.C.
Wiggin & Dana

Organizations

Catholic Charity League
Connecticut State Police Golf Tournament
Sisters of Charity of Saint Elizabeth

Foundations

The Raible Foundation

Bronze

\$1,000-\$2,499

Individuals

Margaret Acampora
Dr. & Mrs. Marvin S. Arons
Gloria Astarita
Dr. & Mrs. David I. Astrachan
John Bakoussis
Georgianna Bakshys

Foundation honors major donors for 1993

David Balogh
Dr. William L. Battema*
Rev. William J. Baugh
Dr. & Mrs. Charles B. Beckman
Mr. & Mrs. John A. Beirne, Jr.
Rev. Robert L. Beloin
Mr. & Mrs. Jess L. Belser*
Steven Bilodeau
Dr. Gary M. Bloomgarden
Gerald Bowman
Dr. Myron H. Brand
Mrs. Genevieve B. Brophy*
Mr. & Mrs. Nicholas J. Bua*
Bernice Buck
Ann Burnett
Dr. Thomas S. Byrne, Jr.*
Mr. & Mrs. Donald P. Calcagnini
Kathleen Cantello
Mr. & Mrs. Alexander N. Caplan
Angela Cappucci*
James Casertano
Mark Chudwick
Dr. James J. Ciarcia
Dr. & Mrs. Kenneth A. Ciardiello
Victor Cimino
Angela & Joseph Cimerol*
Dr. Elena Citkowitz*
Mr. & Mrs. Robert G. Colby, Jr.
Mr. & Mrs. Leo M. Connors
Dr. Ricardo F. Cordido
Brian Cosacchi
Daphne A. Cox* +
Rev. Biagio Cretella*

Jane D. Crowley
Kim Czepiga
Dr. & Mrs. Richard S. D'Agostino
Dr. Joao Paulo de Azevedo
Dr. & Mrs. Ralph J. DePonte*
Gabriel DeRosa
Dr. Ralph J. DeVito
Mrs. Mildred DiChello*
Dr. & Mrs. Donald S. Dock
Mrs. Genevieve Dolan
Dr. & Mrs. James M. Dowaliby
Dr. & Mrs. Michael Dzuby*
Frances Falsey
Dr. & Mrs. James H. Farmer*
Mrs. Gerald G. Fellows*
Drs. Lucky & Kumu Fernando
Dr. Andrew J. Fezza
Dr. & Mrs. Michael L. Fezza
Dr. Fredric O. Finkelstein
Dr. & Mrs. Paul D. Fischer
Jane Fitchett
Mr. & Mrs. William L. Fivek
Susan Flannigan
Marguerite M. Flannery
Dr. & Mrs. Barr H. Forman
Dr. & Mrs. Jerome K. Freedman*
Mr. & Mrs. H. Roger Funk
Dr. Alphonse F. Gencarelli*
Mr. & Mrs. Salvatore B. Giaimo
Gary R. Ginsberg, Esq.*
Dr. John Ann Golia
Dr. & Mrs. Isaac Goodrich*
Mrs. John H. Griffin

In Memory of
John H. Griffin, M.D.
Dr. Sabet W. Hashim
Jack Hauser, M.D.*
Dr. & Mrs. George R. Herr
Dr. & Mrs. Ronald H. Hirokawa
Dr. Nina R. Horowitz
Mrs. Phyllis Horton
Gloria Iadarola
Dr. Raymond J. Ippolito
Mr. & Mrs. David M. Jaffe
Lucille Janatka
Mr. & Mrs. Harry T. Jensen*
Mary Joyce
Dr. & Mrs. Martin E. Katz
Mr. & Mrs. Frank Kenna*
John J. & Ruth M. Kennedy*
Mr. & Mrs. John T. Kimberly
Dr. & Mrs. Alan S. Klinger
Robert D. Knapp*
Michael Koff
William Kohlhepp
Ann Koncevic
Dr. Siegfried Kra*
Kristina Krail
Dr. & Mrs. Nicholas F. LaFemina*
Mr. & Mrs. Edward F. Lapides*
Mr. & Mrs. Leighton Lee, Jr.
Dr. & Mrs. Richard P. Lena*
Dr. & Mrs. Bernard Levine
Carmel Limoncelli
Dr. Daniel Lombardo
Dr. Phillip & Kate Luchini*
Dr. & Mrs. Petar Lujic*
Mr. & Mrs. John M. Lyons*
Mr. & Mrs. Robert J. Lyons*

Dr. & Mrs. Anthony D. Mancini*
Emily L. Mantilia
Judith Marzullo
Dr. & Mrs. Norman J. Marieb
Barbara Masciantonio
Roger Matyka
Diane Mazar-Roberts
Sheila McDonough
Michael McEvoy
Dr. & Mrs. John A. Merritt, Jr.*
Dr. & Mrs. Gary E. Mombello
Jessie Moore
Mrs. Marjorie Morris
In Memory of
John McLean Morris, M.D.
Barbara Morrison
Dr. Robert F. Morrison
Mr. & Mrs. Donald A. Myers
Dr. Viswa B. Nathan
Dr. & Mrs. Philip J. Noto
Eileen O'Connor
George M. Oliver*
Dr. Jeffrey Orell
Dr. Robert B. Ostroff
Dr. Wayne T. Panullo
Mr. & Mrs. Sabino A. Panza
Dr. & Mrs. Nicholas M. Passarelli
Mr. & Mrs. Raymond J. Peach
Barbara Pearce
Dorothy Peccerillo
Dr. Barbara Perina
Mary Ann Perry
Martha Picone
Jay Pinsic
Frank Pocius
Mr. & Mrs. Donald M. Priest*
Jean Raccio
Philip Radding
Dr. Andrew M. Rashkow
David L. Reynolds, Esq.*
Dr. Brian F. Rigney
Tamrah Riley
Elaine Rinsland
Most Rev. Peter A. Rosazza*
Dr. Alan F. Ruskis
Peter Rzasa
Mr. & Mrs. Stephen L. Saltzman
Maureen Scala
Dr. & Mrs. Dominic B. Schioppo
Dr. John F. Schmidt
Dr. Jonathan A. Schneider
Dr. & Mrs. Mark H. Schoenfeld
Dr. & Mrs. Charles F. Scholhamer, Jr.
Dr. Richard J. Schulten
Mary Scully
Rev. James Shanley
Mrs. Robert Shapiro
Mary Sheehan

James O'Connor Shea, Esq.
Dr. Myer B. Shimelman
Dr. & Mrs. Bernard S. Siegel*
Dr. Rajinder S. Sikand*
Morton H. Silberstein, M.D.*
Loretta M. Spigno
Dr. Venkatchala & Nagarathna Sreenivas
Dr. Stephen Alan Stein
Dr. & Mrs. Harold Stern*
Thomas D. Stewart, M.D.
Bruce Stuckey
Dr. & Mrs. Martin L. Sumner*
Dr. & Mrs. Thomas F. Sweeney, Jr.
Mr. & Mrs. Louis F. Tagliatela, Sr.*
Mr. & Mrs. John H. Tatigian, Jr.
Joseph Tatta
Edward Thomas
Penny Timbie
Peter Timbie
Mr. & Mrs. David Trout*
Dr. David M. Van Ess*
Dorothy Ventriglio
Annie Wallace
Susan Walsh
Dr. Kalman Lewis Watsky
Mr. & Mrs. Frederick R. Weber
Mrs. Wayne Whitcomb*
Juanita Wright
Mr. & Mrs. Mario J. Zangari
Christine Ziomek

Corporations & Professional Corporations
1294 Chapel Street Associates
Architectural Hardware Company
Arrhythmia Center of Connecticut, P.C.
Bailey, Moore, Glazer, Schaefer & Proto, C.P.A.*
BEA Associates
The Bilco Company
Blumberg, Whitten & Sherry, Inc.
Connecticut Refining Company
Captain's Galley
Cardiology Associates of New Haven, P.C.*
C. Cowles & Company
Crest Lincoln-Mercury
DeLio and Associates
The Delker Corporation
J. Donovan Associates, Inc.
Deloitte & Touche
Ducci Electrical Contractors
Duff & Phelps Investment Management Co.
Founders Bank
Fox Asset Management
Gallagher, Gallagher & Calistro

Dr. Moshe Hasbani & Dr. Samuel Bridgers, P.C.
Marvin & Palmer Associates, Inc.
O.F. Mossberg & Sons, Inc.
O'Connor Financial Service, Inc.
Oak Hall Capital Advisors, Inc.
H. Pearce Real Estate Company, Inc.
Pratt & Whitney*
Gary J. Price, M.D., P.C.
Pulmonary Associates of New Haven, P.C.
Statewide Meats & Poultry Inc.
Stop & Shop Companies
Thoracic & Cardiovascular Associates of New Haven, P.C.
Timex Corporation

Organizations
I.B.E.W., Local # 90*

Foundations
Allstate Foundation
The Walter Camp Football Foundation
Catlin Family Foundation*
Margaret Forsythe Charitable Fund
Michaels Jewelers Foundation

Estates
John C. LaSala
Francis J. O'Grady
Elizabeth B. Reynolds
Katherine R. Russell

*Includes 1993 Annual Fund donation of \$1,000 or more.

+ Deceased

Saint Raphael Society
Cumulative lifetime gifts of \$20,000 or more through September 30, 1993

Excalibur
\$1,000,000 or more

Individuals
The Brown Family

Organizations
Auxiliary of the Hospital of Saint Raphael
Sisters of Charity of Saint Elizabeth

Foundations
The Community Foundation for Greater New Haven

Founder
\$500,000 - \$999,999

Corporations & Professional Corporations
E & F Construction Company
Echlin Inc.

Organizations
Knights of Columbus
Saint Raphael Employees One For All Fund

Regent
\$250,000 - \$499,999

Individuals
Dr. Jean Hippolitus Celentano

Benefactor
\$100,000 - \$249,999

Individuals
Fred Apuzzo
The DiMeo Family

Corporations & Professional Corporations
Anesthesia Associates of New Haven, P.C.
The Bilco Company
Fleet Bank
Lafayette American Bank & Trust Company
New Haven Savings Bank
SNET
Sargent & Company
Shawmut Bank*
Trimount International
Union Trust Company

Organizations
Archdiocese of Hartford
HSR Physician Services Fund

Trusts
Armtex Corporation

Sponsor
\$50,000 - \$99,999

Individuals
Dr. & Mrs. Charles B. Beckman
Dr. & Mrs. Philip R. Fazzzone
Dr. & Mrs. Il Song Hahn*
Dr. & Mrs. Vasant B. Khachane
Dr. K.J. Lee
Sin Hang Lee, M.D.*
Mr. & Mrs. John M. Lyons*
Mr. & Mrs. Robert J. Lyons*
Drs. Esther & Irwin Nash*
Dr. Howard W. Smith
Dr. & Mrs. Romeo A. Vidone*
Dr. & Mrs. Eiji Yanagisawa

Corporations & Professional Corporations
Bank of Boston - Connecticut
Blue Cross & Blue Shield of Connecticut
Centerbank
Cosgrove Construction Company
Dorr-Oliver Incorporated
First Federal Bank
Merrill Lynch & Co., Inc.
New Haven Register
Neurosurgical Associates of New Haven, P.C.*
Olin Corporation Charitable Trust
Southern Connecticut Gas Company
United Aluminum Corporation
United Technologies Corporation

Member
\$20,000 - \$49,999

Individuals
Dr. & Mrs. Marvin S. Arons
Dr. & Mrs. John M. Aversa
Dr. Samuel & Barbara Bobrow
Mr. & Mrs. M. Joseph Canavan
Dr. & Mrs. Joseph G. Cardinale
Dr. Francis S. Cardinale
Dr. Vicente J. Caride
Dr. John P. Chandler
Drs. Effie Chang and Jacob Loke*
Dr. David P. Colley
Mr. & Mrs. James J. Cullen
Dr. & Mrs. Donald S. Dock
Dr. & Mrs. Anthony Fappiano
Drs. Stephanie & Leonard Farber
Dr. Leonard A. Fasano
Dr. Gerald Fishbone
Dr. Shelby J. Galloway
Mrs. Francis Paul Guida
Mr. & Mrs. Louis E. Guyott
Mrs. Gil G. Job
Dr. Arthur H. Knowlton
Mr. & Mrs. Edward F. Lapides*
Dr. Arthur & Betty Levy
Dr. Michael A. Luchini
Dr. W. Bruce & Delaney Lundberg
Mr. & Mrs. Frederick J. Mancheski*
Dr. & Mrs. Norman J. Marieb
Dr. & Mrs. C.P. Noel McCarthy
Dr. & Mrs. Gary E. Mombello



Virgil Dechant, Supreme Knight of the Knights of Columbus, and Frederick Mancheski, chairman and chief executive officer of Echlin Inc. (center), share a few moments of serious discussion at the Presidents' Ball with Sister Anne Virginie, president and chief executive officer of the Saint Raphael Healthcare System and president of the Saint Raphael Foundation. Both corporations, which have been high-level members of the Presidents' Circle and Saint Raphael Society since the conception of these donor recognition groups, were among members honored at this year's Presidents' Ball.

Foundation honors major donors for 1993

Saint Raphael Foundation Named Funds

Donors wishing to perpetuate their charitable gifts to Saint Raphael's may establish named endowment funds at the Saint Raphael Foundation. Such gifts are invested to ensure regular interest income which is distributed annually or as directed by the donor. While we prefer unrestricted funds, funds can be designated for a purpose of special interest to the donor. New funds may be established with an investment of \$5,000 or more, and donors may add to their endowments at any time. Donations also may be made to the Foundation Endowment Fund. For more information about named funds, contact the Saint Raphael Foundation at 789-3242.

Named Endowment Funds

Florence & Biagio Anthony Abbatello Fund: Established in October 1992 for the benefit of children who are patients of the Hospital, by a \$20,000 bequest of Florence Abbatello.

Clinical Pastoral Care Fund: Established in 1987 for the Hospital's pastoral care training program, with gifts of \$5,330 from various donors.

Hendrick Charitable Trust: Established in 1978 for coronary care, respiratory care, and alcohol treatment, by a \$2,965 bequest of Hobert and Mary Hendrick.

Mrs. C.T. Lee Fund: Established in 1989 for annual education to encourage a better understanding of the healing ministry of Christ, with a gift of \$25,000 from Dr. Keat-Jin Lee in memory of his mother.

Santa Maria Assunta Fund: Established in 1983 for unrestricted purposes of the Foundation, with a gift of \$40,000 from the Santa Maria Assunta Society of Woodbridge, Inc.

Joseph A. Weibel Fund: Established in 1978 for the general purposes of the Hospital, by a \$25,000 bequest of Joseph A. Weibel.

Clarence & Lillian Westerberg Fund: Established in 1990 for indigent care, by a \$100,000 bequest of Clarence Westerberg.

Sharon White Memorial Fund: Established in 1985 for pediatric cardiac care, with a gift of \$5,000 from the Sharon White Foundation.

Mr. & Mrs. Nicholas F. Pallotti
Dr. & Mrs. Nicholas M. Passarelli
Dr. Irving M. Polayes
Mrs. Ronald & Teresa Ponn*
Dr. & Mrs. Edward K. Prokop
Dr. Brian F. Rigney
Dr. Robert S. Rosnagle
Mrs. Joseph A. Schiavone
Dr. Solomon S. Schwartz
Dr. Venkatachala & Nagarathna Sreenivas
Dr. & Mrs. Martin L. Sumner*
Dr. & Mrs. Frank J. Troncale
Dr. Jack L. Westcott
Dr. & Mrs. Richard S. K. Young*
Dr. & Mrs. Joseph H. Zelson
Dr. J.E. Fredrik Zetterberg*

Corporations & Professional Corporations
American Medical Response of Connecticut
Arthur Andersen & Co.

Bic Corporation
Blakeslee, Arpaia, Chapman, Inc.
Blumberg, Whitten & Shery, Inc.
Cardiothoracic & Vascular Group, P.C.*
Joseph Cohn & Son, Inc.
C. Cowles & Company
Ed-Mor Electric, Inc.
Enthone-OMI, Inc.
Founders Bank
G & O Manufacturing Company
Grand Light & Supply, Inc.
IBM Corporation
Insilco Corporation
Levett, Rockwood & Sanders, P.C.
Marion Merrell Dow, Inc.
Marlin Firearms Company*
Miles, Inc.
O.F. Mossberg & Sons, Inc.
New Haven Orthopaedic Group, P.C.*
New Haven Radiology Associates, P.C.
New Haven Terminal, Inc.

A. Prete & Son Construction, Inc.
The Upjohn Company

Organizations
Amity Club, Inc.
Knights of Columbus Russell Council #65
Santa Maria Assunta Society

Foundations
The Walter Camp Football Foundation
Carolyn Foundation
Catlin Family Foundation*
Harvey Hubbell Foundation
Louis & Dora Mohill Foundation

In Memoriam Founder
Irving J. & Alice M. Brown

Regent
Elizabeth D. & Frank S. Butterworth, Jr.
Dr. Luca E. Celentano
Richard S. Jackson

Benefactor

John C. LaSala
Louis J. Piantino
Clarence Westerberg
Robert C. & Marion D. Young

Sponsor

Dorothy Lenz Andrus
Bernard S. Brody, M.D.
Geraldine M. Brown
Alice Meehan
Frances H. Nicklas
Orlando Pelliccia, Jr., M.D.
Rose V. Pelliccia
Elizabeth B. Reynolds
Pauline Richard
Henry R. Roche

Member

Florence & Biagio Anthony Abbatello
John F. Abeel, Sr.
Pierino F. D'Elia, M.D.
Father James E. Dargan
Aldo DeDominicis
Mabel A. Deegan
Joseph DiSesa
Rosalind B. Dillon
Kathleen Doherty
Robert M. & Irene A. Engberg
Edward D. & Martha H. Goldman
Gil G. Job, M.D.
Thomas R. LoRicco
Frederick & Mac Merliss
Fannie & Nathan Pycone
Ralph J. Russo
Joseph A. Weibel

*Includes 1993 Annual Fund donation of \$1,000 or more.

Honorary Members of the Saint Raphael Society 1990

K.J. Lee, M.D., F.A.C.S.
The Honorable Richard C. Lee
Frederick J. Mancheski
Philip Paolella
Sister Anne Virginic

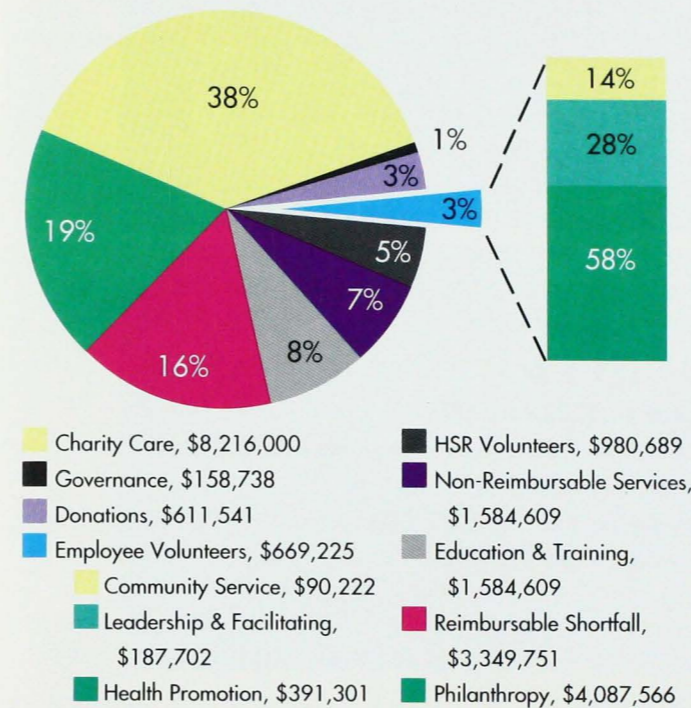
1991
Sister Louise Anthony

1992
Petar Lujic, M.D.
Robert J. Lyons

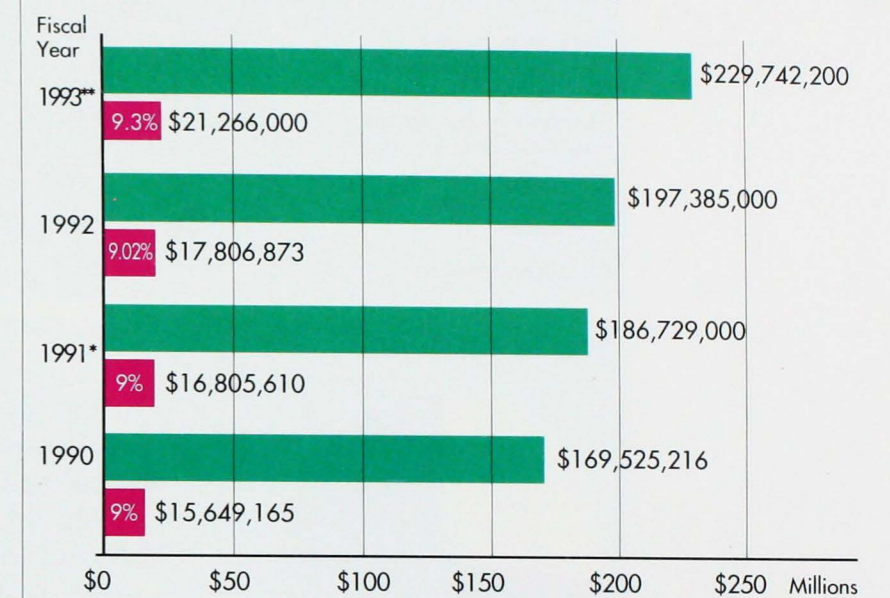
The relationship between our mission and being tax-exempt

Saint Raphael Healthcare System, Inc. Fiscal Year 1993 Social Accountability Activities

Equivalent to \$21,390,464



Saint Raphael's Social Accountability History



*Estimates based on available data

** First year to include Saint Regis Health Center

Saint Raphael's regards the tax-exempt status of its clinical facilities as a privilege, and not an entitlement. To be considered a charitable health care facility, Saint Raphael's is required by law to operate a full-time emergency room and provide care regardless of the patient's ability to pay. Also important is Saint Raphael's use of resources to provide programs and services to the community.

The two largest entities in the Saint Raphael Healthcare System are the Hospital of Saint Raphael and Saint Regis Health Center, serving all members of society, including the underserved, the poor and the elderly.

The System's commitment to the community is motivated by the values of charity, justice and stewardship of our founders, the Sisters of Charity of Saint Elizabeth. Our daily fulfillment of this mission is referred to as "social accountability."

Each year, the System evaluates how well it is fulfilling its mission. Using the Catholic Health Association's "social accountability inventory" as the measuring tool, Saint Raphael's documents the fulfillment of the mission under the categories "charitable care for the poor" and "benefits to the community."

Based on this inventory, the Hospital and Saint Regis during 1993 spent the equivalent of about \$21.4 million toward social accountability, including cash, donations and

in-kind contributions.

The Hospital provided \$8.2 million in charity care to people unable to pay. The Emergency Department, with more than 47,256 patient visits, contributed more than \$1 million in charity care, or 13 percent of the Hospital's total.

Services and activities for the community sponsored by the Hospital and Saint Regis also are part of social accountability. In 1993, the equivalent of \$13.2 million was spent on programs ranging from training students, to blood pressure screenings, to providing scholarships to minority nursing students.

The social accountability budget excludes medical education expenses, which are included in the Medicare reimbursement rate. However, Saint Raphael's commitment to training health care professionals brought 1,026 medical, nursing and allied health students to the Hospital and Saint Regis for training.

In summary, about 9.3 percent of the Hospital's and Saint Regis' combined operating expenses were used to provide social accountability services to the community. As a tax-exempt organization, Saint Raphael's conservatively dedicated \$4.25 to fulfilling its caring ministry for every \$1 it would have potentially paid in taxes.

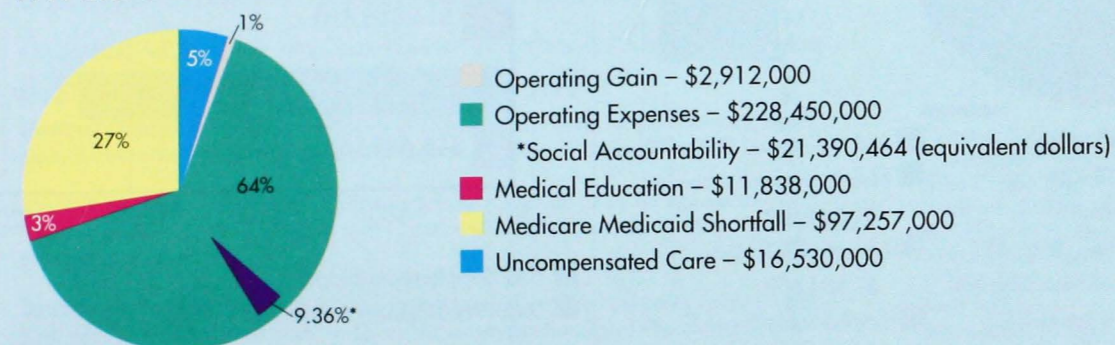
The System remains committed to its mission by reaching out to those in need.

Financial performance for the Saint Raphael Healthcare System, Inc.*

1993 Operating Highlights

	1993	1992
Net patient revenue	\$238,229,000	\$226,699,000
Net operating expense	<u>235,317,000</u>	<u>223,369,000</u>
Income from operations	2,912,000	3,330,000
Non-operating revenues	<u>3,543,000</u>	<u>4,726,000</u>
Funds available for new technology, capital expenditures, and debt retirement	<u>\$6,455,000</u>	<u>\$8,056,000</u>
Operating Margin	1.2%	1.5%

1993 Uses of revenue



Operating Statistics and Ratios for the Hospital of Saint Raphael

	1993	1992	Increase(Decrease)	
			Units	%
Patient Days	160,595	163,649	(3,054)	1.9
Average length of stay	7.5	7.8	(.03)	3.8
Percentage occupancy	86.1	87.5	(1.4)	1.6
Patient discharges:				
Governmental	11,885	11,513	372	3.2
Non-governmental	<u>9,418</u>	<u>9,458</u>	40	0.4
Total discharges	<u>21,303</u>	<u>20,971</u>	332	1.6
Emergency Department visits	47,256	45,640	1,616	3.5
Ancillary services:				
Operating room (Cases)	7,007	6,978	29	0.4
Short term surgery (Cases)	7,839	7,412	427	9.1
Laboratory (Tests)	1,533,954	1,576,945	42,991	2.7
Full-time equivalent employees	2,800	2,729	71	2.6
Case Mix (Intensity index)	1.40	1.40	—	—
Equivalent discharges (Inpatient and outpatient)	25,822	24,864	958	3.9
Volume adjusted for intensity	34,343	33,252	1,091	3.3
Volume per employee	12.3	12.2	.01	.08

Patient Service Statistics for Saint Regis Health Center, Inc.

	1993	1992
Percent occupancy	99.7%	99.7%
Total patient days	45,495	45,627

*The Saint Raphael Healthcare System includes the Hospital of Saint Raphael, Saint Regis Health Center, Saint Raphael Foundation, Xavier Services Corporation, Better Health Pharmacy, Seton Real Estate, and DePaul Health Services Corporation.



**Saint Raphael
Healthcare System**

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