

BMH Capital Campaign Goes Over the Goal!

More than \$2.8 million was raised for the BMH *“Building on Excellence”* Capital Campaign for which we owe the community many thanks; thanks to all the donors who dug deep into their pockets and made a gift to the campaign; thanks to the more than 60 community volunteers who attended numerous meetings and made visits and calls to solicit gifts from all the wonderful donors; thanks to the employees and physicians who gave so generously -- more than \$150,000 was raised by employees, and

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New BMH Outpatient Building Progress Is On Schedule



Despite record breaking snow falls this winter the new Outpatient Building is progressing well. This picture, taken from the helipad, shows the building with most of the exterior siding in place. Interior work is on track to permit the hospital to open the new 34,500 square foot outpatient center in January 2009 as planned.

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Degenerative Joint Disease and Osteoarthritis

by Nicholas H. Bartenhagen, MD

“He shoots HE SCORES !” The breakaway skater pumps down the rink. Slapshot’s whack. Black blur. Fluttering net. Arms upraised triumphant, the victor arcs slowly behind the leg-split goalie. Little does this young man know that the knee joint surfaces bearing him so swiftly and surely to the game’s final goal glided with no more friction than his skates upon the ice.

Pearly-white, translucent, elastic and compressible, yet exceptionally durable and smooth as glass, the cartilage that forms the surfaces of our joints is a bioengineering wonder, eons in the making . . . from Brontosaur to Baryshnikov. It’s where the rubber hits the road. Just consider the lifetime mileage we log on our feet, ankles, knees and hips. But unlike tires that simply wear out, our joint cartilage regenerates itself with live cells as its surface wears away. Embedded deep within the cartilage, rows of cells steadily exude the raw materials for new cartilage that rises slowly to the surface, replacing cartilage worn down when skating toward the winning goal or just ascending a flight of stairs for the umpteenth time.

How slippery is this cartilage of ours? If you’ve ever rubbed egg white between your fingers, you’ll know. A thin film of lubricating (synovial) fluid (see drawing on page 3) coats the glassy joint surface, further reducing friction. This fluid oozes into the joint cavity from the connective tissue (synovial membrane), a wispy layer of cells lining the walls of the joint capsule. The capsule itself is a boundary wall of thick, tough but elastic sheets that encircles the joint cavity, having enough strength to maintain joint stability. Yet it also has sufficient stretch to allow the flexion and extension required for hockey, ballet, yoga, tai chi, or just crossing the street.

Continued on page 3

New BMH Building Project & Renovation on Schedule

Continued from front page



In addition to the new Outpatient Building, the planned renovation of the Ambulatory Care Unit (ACU) for same-day surgery at BMH is also now happening. To keep construction and clinical activities separate, partitions have been put in place. As always, be assured that patient and staff safety are our chief concerns.

As of early December, the Oncology Department, the Comprehensive Care Clinic, pre-operative assessment and laser eye procedures were moved to the 2nd floor of the Medical Office Building. Patients are finding their way with the help of transportation volunteers who are positioned to help patients and families navigate the temporary moves. All of these departments will have spacious new quarters when the outpatient building is completed later this year. (See the side box for particulars on these temporary moves.)

The temporary waiting area for same-day surgery is located on the Sun Porch in the Pavilion area on the first floor of the hospital, near the Tyler Conference Room. When the first phase of the renovation is complete in mid-April, the Post Anesthesia Care Unit (PACU), a larger patient/family waiting area, and a new family consult room will be opened. Phase 2 of the renovations creates a new larger endoscopy suite and minor procedure room in the old PACU space.

The photo at left shows the construction of the new Ambulatory Care Unit waiting room as viewed from the hallway entrance where patients check in. The larger, more comfortable waiting room will feature windows and a play area for our patients' families to stay while a loved one is in surgery and recovering.

How BMH Is Accommodating ACU Renovations:

- The Oncology Department and Comprehensive Care Clinic (CCC) were moved to their temporary quarters in Suite 204 of the Medical Office Building (MOB).
- Pre-op Assessment and laser eye procedures have moved to Suite 202 of the MOB.
- Both Suite 204 and 202 are on the 2nd Floor of the MOB from the building's front entrance (please note that stairs must be climbed to get to the 2nd floor of MOB from that entrance).
- An option (for those still having to report to Admitting and/or needing assistance), is to use the main hospital front entrance as always. We have maps and people at Admitting and in the lobby to help patients get to the new temporary locations.

Information about the final phase of the ACU Renovation will appear in the Summer Healthwise.

The head of BMH Plant Engineering and the Construction Superintendent are meeting each week with the nurse leaders from the impacted areas, ensuring good communications to help minimize the impact of construction.

BMH is striving to make the exciting new changes to patient care as unobtrusive as possible, and we appreciate everyone's understanding. Again, we apologize for the inconvenience and noise this construction and renovation is creating. We hope you'll bear with it in the interest of a wonderful new facility for you and all of our patients. Thank you.

For more information, contact Prudence MacKinney, VP Planning, at 802-257-8367.

Healthwise is published for our patients and their families, our friends, and our community three times a year by Brattleboro Memorial Hospital.

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Please call the editor at 802-257-8316, if you have comments about this newsletter and/or suggestions for future articles. Thank you.

Mammography Scheduling

The wait time to schedule a mammogram is now under a month.

This time will continue to lessen with improved processes.

The Radiology Department under Director Lynne Cordery has added appointments and staff to address the long wait times women were experiencing previously. Thank you for your patience.

Degenerative Joint Disease and Osteoarthritis

Continued from front page

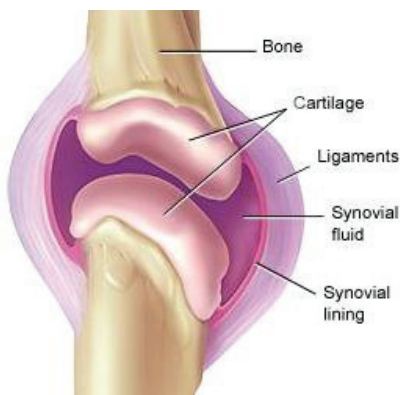
What a piece of work are they, our joints. And how unfortunate that the ravages of time, chance injuries, genetics, and cumulative caloric excess can shift the biological balance within our joints from regeneration to its opposite, degeneration. Hence, the term Degenerative Joint Disease (DJD), by far the most common type of arthritis, affecting or afflicting from one in six to one in eight Americans who are 60 years of age or older.

For various reasons, such as those mentioned above, over time the quantity and quality of the components that come together to form cartilage declines and deteriorates, resulting in greater loss of cartilage than the ageing cells can replace. Microscopic fragments of this inferior cartilage splinter off, creating a pocked or corrugated surface, with the shorn-off cartilage fragments acting like sand on ice. The excess wear is often uneven, throwing off joint alignment. In response to these events, the underlying bones may slowly widen, generating gnarled, “boney” knees or knuckles.

This process may take decades to evolve, and in degree may be only mild or moderate, noticed only as creaking, grinding, or stiffened joints, with little or no joint pain or swelling. Most such individuals need take only simple pain relievers, such as acetaminophen. And yet a friend or neighbor, also with DJD, suffers a good deal more pain and stiffness. And that person’s joints become swollen, warm and tender to touch. So what’s going on? Why this difference?

Inflammation – that’s what’s going on. The difference between them is how their immune systems react to the degenerative process. One inherited an immune system whose response to the degenerative process might be a lot less than another who inherited an immune system that reacts to the cartilage deterioration as though it were a torn ligament or a bacterial invasion. It calls up cells with many chemical and biological weapons in a well-intentioned but useless and ultimately counterproductive attempt to repair it.

In fact, the constant release of these chemical and biological weapons, designed to kill invaders that do not exist, actually causes injury to the very cells that maintain the joint structure and function. Cellular function is further compromised, speeding up cartilage deterioration. The connective tissue (see synovial membrane lining in drawing) gets swept up in the inflammatory fight, and also becomes basically unusable, exuding larger quantities of thinner, more watery fluid (joint swelling). The nerves within the joint capsule are chemically irritated and convey their distress to the brain (increasing pain and tenderness). Other chemicals cause the blood vessels within the joint to dilate, and blood surges in, carrying immune reinforcements into the fray (creating redness, warmth and more swelling). These individuals, who probably have osteoarthritis with significant inflammation, deserve treatment with anti-inflammatory medications, not only to reduce the symptoms of inflammation, but to reduce the damage to the cartilage created by the poisonous chemistry of inflammation.



Healthy Joint

Nicholas H. Bartenhagen, MD, a recent addition to the BMH medical staff, authored this article. Dr. Bartenhagen was trained in Rheumatology at Yale University Medical Center, and is Board Certified in both Internal Medicine and Rheumatology. His office is located at 53 Fairview Street; his phone number is 802-257-5000.



Please join Dr. Bartenhagen on Monday evening, March 31st, when, as part of the Wellness in Windham County Series, he will present a program entitled: “VITAMIN D – It’s Not What You Think, and Does More Than We Thought”. To register for this free seminar, call 802-257-8877.

Capital Campaign Goes Over Goal

Continued from page 1

more than 90% of our medical staff made gifts. All of you got us there, and for that we are grateful! As a result of all this hard work and outpouring of generosity, more than \$2.8 million was raised for the new outpatient building and the renovation of the Ambulatory Care Unit for same-day surgery at BMH.

We want to especially thank former Vermont Senator Bob Gannett and Mark Richards, co-chairs of this campaign. This was a full-time (plus some) job for each of them for the past 20 months. Their dedication and leadership helped pull together a strong volunteer committee, and then they set the pace. It has been a privilege for the staff to work and learn from such long-time and passionate BMH supporters!

Campaign gifts came from both the great and the small; from the large corporate and foundation gifts/grants of support – gifts such as \$625,000 from the Thomas Thompson Trust, \$250,000 from C&S Wholesale Grocers, \$110,000 from Chittenden Bank, and \$100,000 from The Jane’s Trust – to the many new BMH supporters who gave as a result of *The Richards Merry Bradley Challenge*. It included the broad-base community gifts which sometimes even meant children’s allowances! All this helped get us to our goal and is what makes BMH a true community hospital. **THANK YOU.**

ExitCare® Comes to BMH to Enhance Patient Education

In October, 2007, ExitCare® Patient Education System went live at BMH.

ExitCare® is in use by hundreds of hospitals across the country. This system allows healthcare professionals to provide our patients with current diagnosis-specific patient education materials. ExitCare® offers over 1600 diagnosis-specific topics to choose from and allows the healthcare professional to provide education materials that are personalized with the patient's name, the attending physician's name, and the BMH logo, as well as information to assist patients to learn about the management of their health care diagnosis. Providing patients and their families with information about their diagnosis encourages them to be active partners in decision-making related to their course of the healthcare experience.

The ExitCare® motto of, "Patient education is not an extra task.... It's the one thing you do that makes all your other interventions work" supports the BMH/SVHSC vision of "Best patient care experience/ every patient, every time."

NEW BMH NIGHT HOSPITALIST SERVICE

Brattleboro Memorial Hospital has initiated a Night Hospitalist Service which provides physicians specifically designated to cover hospitalized patients at night from 7:00 PM to 7:00 AM. These hospitalists dedicate 100% of their time to taking care of inpatients every night of the week, working as partners with the patient's primary care provider.

Hospitalist care at BMH represents one of the nation's fastest-growing new physician specialties. A doctor skilled in inpatient medicine, and called a hospitalist, is available nightly to respond to changing inpatient needs, along with urgent, critical, or emergency inpatient situations that arise during the night. Because hospitalists practice on-site in the hospital, they are on hand in case the patient or family member has a question regarding care during these off-hours. Having a physician in-house at night allows the care team – the nurses,

the doctors, and the therapists – to respond to any changes as they happen. It provides a better quality of care.

Carolyn Taylor-Olson, MD, a member of the hospital medical staff, has been appointed Medical Director of the new Night Hospitalist Service at BMH. In addition to working full-time as a night hospitalist, Dr. Taylor-Olson's roles focus on administration and operations related to this program. Other physicians currently serving as part-time hospitalists are Drs. David Albright, Reme Damasco, Amy Gadowski, Christopher Meyer, and Eric Pofcher. Each of these BMH medical staff members is also in private practice.

The BMH night hospitalist will collaborate with the patient's personal attending physician to provide in-hospital coverage for the general medical care of hospitalized patients 16 years and older, and to provide medical consultation to surgical patients, when needed. Hospitalists admit patients of that age range to the hospital in place of the personal attending physicians participating in the program. All medical,



Carolyn Taylor-Olson, MD

surgical, and pediatric specialists/sub-specialists are available to the hospitalist for telephone and on-site consultation as needed.

The overall quality of care delivered by the BMH Night Hospitalist Service is overseen by Dr. Taylor-Olson and Dr. David Albright, Chief Medical Officer, who will ensure high quality care, good communication, optimal collaboration, and consistent practices.

Hospitalists have been shown in recent studies to reduce mortality rates, improve clinical outcomes, reduce re-admit rates, and positively affect the quality of medical care and patient satisfaction. They provide a win-win situation for patients and their caregivers. BMH is pleased to be able to offer one of the fastest growing new services in health care.



BMH Chapel and Meditation Room To Relocate

The BMH Chapel and Meditation Room, until recently, was located just outside of the Emergency Department. A recent survey completed by the Centers for Medicare and Medicaid Services reported the need for a “safe” room located within the Emergency Department. To make room, the current chapel is being moved to an area near the Tyler Conference Room. The “safe” room is required to care for suicidal and/or violent patients. As a result of this survey the space that was used for the chapel has been renovated to comply with these standards.

Construction of a new Chapel and Meditation Room will begin very soon. This new chapel will be in the space currently occupied by the “ante-room” of the Tyler Conference Room. The space will be renovated to accommodate most of the same furnishings as the former chapel. A separate entrance to the Tyler Conference Room will be built to provide privacy to those using the chapel. The expectation is the new BMH Chapel and Meditation Room will open by summer. A re-dedication will be planned at that time.

Brattleboro Memorial Hospital announces the retirement of the Vice President of Patient Care Services Katherine Anderson, RN, as of February of this year. Kathy came to BMH in 1997, and during her 11 years provided leadership and direction to the Patient Care Services division as a compassionate and dedicated member of the administration. Kathy helped the hospital grow and develop into one of Vermont’s best community hospitals. She also served as interim president and CEO between the last two head administrators. Kathy’s future plans include teaching a master’s level course in healthcare administration at the Marlboro Graduate Center. She plans to stay in the area, along with her parents and younger daughter, Jennifer.



Mary Urquhart, VP, Patient Care Services

Mary Urquhart, RN, who was promoted to Assistant Vice President of Patient Care Services last year, has now assumed the role of Vice President. With her new title comes direct supervision of the Emergency Department and its physicians, the Department of Community Health & Hospital Education, Medical-Surgical, Special Care, the Birthing Center, and the Perioperative, CardioRespiratory, and Anesthesia Departments. Mary was the former Director of Nursing at Grace Cottage Hospital for eight years prior to coming to Brattleboro Memorial in 2002. Since coming to BMH, she has served as Director of Woman’s and Surgical Services and as Interim Vice President of Patient Care Service during Kathy’s term as Interim CEO.

BMH Celebrates Thompson Trust in Re-dedication of Memorial on Front Lawn

Brattleboro Memorial Hospital, in recognition of the many benefits afforded it by the Thomas Thompson Trust, recently re-dedicated the Thompson Memorial monument on the front lawn at the corner of Canal Street and Belmont Avenue.

At the ceremony in December, held immediately before the hospital’s Annual Meeting, BMH President and CEO Barry G. Beeman unveiled a new memorial stone in front of the standing monument which reads “Brattleboro Memorial Hospital: Incorporated 1904 – Thomas Thompson Trust – Founder and Steadfast Supporter”. Beeman also presented a plaque to the trustees of Thompson Trust.

On hand for the event, in addition to various hospital board members and corporators, were trustees of the Thompson Trust: William Tyler, Al Fortier, and Dan Fawcett, (shown in photo with Barry Beeman from left to right) and Susan Monahan.

A garden and wall with places for people to sit and enjoy the site are also planned, with completion due in the spring.



Hospital Performance Improvement Plan Focuses on Quality and Patient Safety

by Mary L. Morgan, VP Quality / Patient Safety

Performance Improvement is a process of systematically evaluating and developing functions and processes to ensure excellence and quality. These performance improvement activities occur not only to monitor quality, but also to continually improve care and demonstrate organizational effectiveness. *Performance Improvement* is a continual process of evaluating the processes and protocols we employ in our everyday operations to always look for ways to make changes that improve performance, ensure the quality of care received, maintain patient safety, and improve patient outcomes.

Brattleboro Memorial Hospital plans for the delivery of patient care through a systematic process of assessing, planning, designing, implementing, measuring, and evaluating the services it provides. The mission and vision of the organization drive this planning effort. The hospital's Performance Improvement Plan guides this process.

An instance of *Performance Improvement* at BMH is special services for the deaf. Federal regulations require that healthcare facilities provide equal access to all services for the disabled. Brattleboro Memorial Hospital strongly supports this goal. We are committed to providing the best patient care experience, every patient, every time. For deaf and hard of hearing patients this means interpreters and adaptive equipment made available at critical points in a hospital stay or visit including admission, discharge, any time medical information is communicated or medical procedures are explained, and when informed consent for treatment is obtained. Services provided at BMH may include an in-person interpreter or a new interpretation service, *Deaf Talk*.

In-person interpreters often take hours to arrange for and arrive. BMH

has developed an action plan to address this opportunity for improvement with the introduction of *Deaf Talk*, a video-conferencing American Sign Language interpretation Service, available 24 hours a day, 7 days a week. Using state-of-the-art, mobile video-conference equipment, *Deaf Talk* brings interpretation services when and where they are needed: in the Emergency Department, to the patients' bedside, to a meeting with the patient's medical team, to name a few.



Another opportunity to positively impact patient safety and quality of care is in the implementation of an Electronic Medical Record (EMR). Brattleboro Memorial Hospital is actively working toward implementation of an EMR. There are many challenges in instituting an electronic medical record. The hospital formed the Clinical Information Steering Committee (CIS) to oversee the long-term development of the Electronic Medical Record.

Since the implementation of the CIS Committee, BMH has achieved the following:

- Five year IT plan has been developed.
- The pharmacy has migrated to the same vendor as our main hospital system. This will assist in a more seamless sharing of information between pharmacy and the other disciplines.
- The Emergency Department has implemented T-sheet: paper documentation specific for the Emergency Department.
- Exit Care: a patient discharge instruction system has been implemented (*more about this on page 4 of Healthwise*).



Mary L. Morgan
VP Quality/ Patient Safety

- BMH has been a beta site for a scheduling system. This means working closely with a vendor to get input into the development and functionality of a system
 - SharePoint, a web-like intranet, is being piloted with plans to make this user-friendly system accessible to BMH staff.
 - Mobile computer carts have been purchased and BMH has begun electronic documentation online.
 - Radiology has implemented a voice recognition transcription system.
- As these initiatives demonstrate, *Performance Improvement* assists BMH in fulfilling its mission: ***“To provide community based quality health services delivered with compassion and respect.”***

Brattleboro Memorial Hospital will henceforth be publishing three issues of *Healthwise* per year: Spring / Early Summer / Fall. It will no longer be publishing a regular Annual Report. Hence, the Annual Fund Donor List will be published in the Spring issue (in this case, this issue), and anyone wishing to take a look at the hospital's financial statement can go to the BMH website at www.bmhvt.org and click on ABOUT US section at which the line: **CLICK HERE for 2007 FINANCIAL STATEMENTS & STATISTICS** will be at the bottom of the page. You may also call 802-257-8316 to request a copy.

BMH Begins Implementation of Electronic Medical Records

Brattleboro Memorial Hospital is actively working to implement a comprehensive Electronic Medical Records (EMR) system for all patients. An important phase in the development of the EMR rolled out in March with nurses on the Medical-Surgical and the Special Care Units beginning to document patient assessment information on portable rolling computer carts at the bedside.

To accomplish this important step, Clinical Analysts and a new Clinical Informatics Specialist in the BMH Information Services (computer) Department developed a clinical documentation tool. The BMH Nursing Administration worked with the IS Department to develop the electronic charts. They have trained the nursing staff at both a super-user and bedside level, and will guide them during this transition. Once this initial transition phase is complete, additional patient documentation will be added.

BMH has several existing components of online charts,

including patients' orders, lab results, and radiology reports. In addition, BMH has a PACS system (Picture and Archiving System) in the Radiology Department which makes viewing radiology images online available to physicians. Physicians now will be able to view the new nursing documentation online, much like they are currently able to see the orders, laboratory results, and radiology data. Physicians will also be able to view this documentation on their office computers.

The advent of Electronic Medical Records allows many improvements to the organization and easier retrieval of a patient's medical record. Advantages include improving accessibility of information to all members of the healthcare team, improving communication of vital information among caregivers, and enhancing patient safety. Patient information in a computerized format gives the healthcare team better ability to monitor quality standards and comply with regulatory requirements. In the future, viewing consistent information



Electronic Medical Records portable rolling carts ready to go to patients' bedside

can enhance patient care along the continuum from the physician's office through a hospital admission and back to other community-based services.

As always, BMH strictly adheres to the requirement of protecting the confidentiality of patient information.

BMH Board of Trustees ~ 2007- 2008



(front row, l to r): James F. Baker II, Vice Chairman; Nancy Heydinger; Jeffrey Morse, Chairman; Catherine Coonan; Richard C. Carroll (back row, l to r): Carl Lynde; Kirsten Beske, Secretary; John M. Meyer; Thomas Evans, MD; Paul Righi, MD*; Peter Gibbons, MD; Benjamin Taggard; Barry Beeman* *NOTE: * indicates ex officio members*

Third Nurse Midwife Joins Brattleboro Obstetrics & Gynecology

Judith H. McBean, MD, and James Bunker, MD, are pleased to announce that nurse midwife Meghan Arthur, RN, CNM, WHNP, MS, has joined their practice, Brattleboro Obstetrics & Gynecology.

Meghan studied at Ohio State University in Columbus where she received certifications in nursing, midwifery, and as a Women's Health Nurse Practitioner. Following her education, Meghan completed a fellowship at Holy Family Birth Center in Texas. Prior to midwifery, she received an undergraduate degree in chemistry from Grinnell College in Iowa.



Meghan joins fellow certified nurse midwives Lois Trezise and Raine Kane (flanking her left to right in photo above) in a new practice at Brattleboro OB/GYN called Four Seasons Midwifery. Meghan's area of special interest is "Centering Pregnancy" which offers selected group prenatal care and permits women to build connections with other women during their pregnancies. All three nurse midwives with Four Seasons Midwifery are certified by the American College of Nurse Midwives. Both Lois Trezise and Raine Kane are certified to teach HypnoBirthing®.

Four Seasons Midwifery provides personalized care for mothers and families in this, the area's first comprehensive nurse midwifery service. The three midwives provide personal attention and support throughout the maternity cycle, which includes 24/7 coverage for labor, making it the only round-the-clock nurse midwifery service in the area. Drs. McBean and Bunker are available for consultation throughout the pregnancy as well as 24-hour physician back-up.

Four Seasons Midwifery offers networking referrals for massage, acupuncture, and trained doula services for birth support in our community. But, the care doesn't stop with the pregnant mom. It also offers PAP smears, annual exams, and family planning. Four Seasons Midwifery provides healthcare for all seasons of a woman's life.

Call the office of Brattleboro Obstetrics & Gynecology, which is associated with Brattleboro Memorial Hospital, at 802-251-9965 for an appointment.

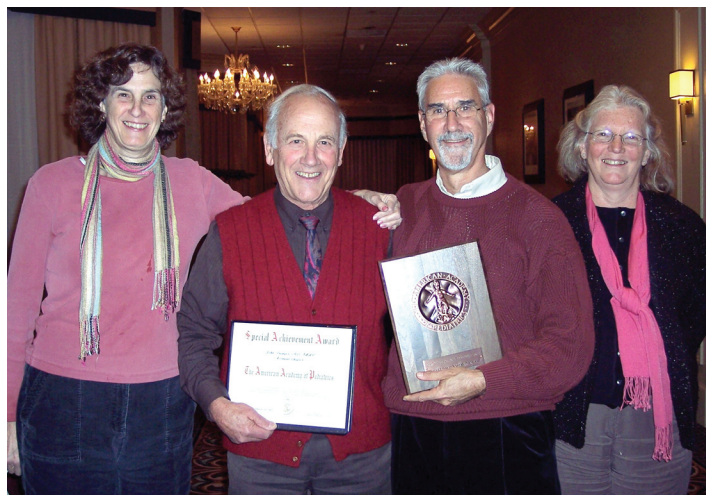
Dr. Nassau Recently Honored as Green Mountain Pediatrician of the Year!

The Vermont Chapter of the American Academy of Pediatrics honored Robert Nassau, MD, as Pediatrician of the Year at its annual meeting last November.

A member of the Brattleboro Memorial Hospital Medical Staff since 1971, Dr. Nassau 'retired' several years ago. That term is used loosely because he continues to work as needed at the pediatric offices of Brattleboro Primary Care where, as a member of the active BMH Medical Staff, he was in pediatric practice with Drs. John Trumper, Anne (Nancy) Haydock, and Lynn Herzog. He also works at Cornerstone Pediatrics in Bellows Falls when needed.

Also, since the year 2001, Dr. Nassau and his wife Nancy Storrow have been volunteering at Angkor Hospital for Children in Siem Reap, Cambodia. They returned there last year for their 7th straight year, expenses for which they personally bear.

Although the award is usually given in recognition of a Vermont pediatrician's contribution to children's health within the state, Dr. Trumper nominated Dr. Nassau for this honor. "Indeed, Dr. Nassau practiced in Brattleboro for 36 years, and served on the State Board of Medical Practice, but his tireless and outstanding work with and for these children and the pediatricians in Cambodia are what earned him this award," according to Dr. Trumper. He also said, "Dr. Nassau really deserved this recognition, and we hope that it will encourage other physicians to consider international work. Dr. Nassau and his wife get special kudos for the fact that they serve totally as volunteers." We all join in congratulating Dr. Nassau on this well-deserved award!



Drs. Lynn Herzog (l) and Anne Haydock, pediatricians with Brattleboro Primary Care, flank Dr. John Trumper (2nd from l.), retired pediatrician from the same practice, and Dr. Robert Nassau who was surprised by being named Pediatrician of the Year by the Vermont Chapter of the American Academy of Pediatrics.

BMH MEDICAL STAFF WELCOMES NEW SURGEON

General surgeon Thomas H. Lewis, MD, has joined the medical staff at Brattleboro Memorial Hospital. He was most recently a staff surgeon at the Veteran's Administration Medical Center in White River Junction (VT), and has been a *locum tenens* physician at BMH covering surgery on weekends for the past year.

In his role as full-time BMH physician, Dr. Lewis shares an office with fellow surgeon Joseph Rosen, MD, located on the 2nd floor of the Gannett Medical Building. Later this year, Dr. Lewis and Dr. Rosen will be affiliated in a practice with general surgeon Gregory Gadowski, MD, in the Medical Office Building. The group will provide surgical services to the community with fellow BMH surgeon John Bookwalter, MD.

After graduating *summa cum laude* from Manhattan College (NY, NY) with a bachelor of science degree in biology, Dr. Lewis attained his doctor of medicine at the College of Medicine at University of Vermont. He completed both his general surgery internship and residency at Dartmouth-Hitchcock Medical Center (NH). He also has a fellowship in colon and rectal surgery from Sansum Medical Center (Santa Barbara, CA).

Dr. Lewis is board-certified in general surgery and is one of only three surgeons practicing in Vermont who is also board-certified in colon/rectal surgery. He is a fellow in both the American College of Surgeons and the American Society of Colon and Rectal Surgeons, and is a member of the New England Society of Colon and Rectal Surgeons.

Dr. Lewis and his wife Marcia have three teenage children: Brian, Connor, and Ellie. They live in western Massachusetts on a gentleman's farm where they raise goats and have oxen. He enjoys maple sugaring, canoeing, skiing, and outdoor sports in general.

The newest BMH surgeon says he chose surgery because he likes being able to make a difference in people's lives; he enjoys the impact his expertise has on a patient's quality of life, bringing a patient's problem to closure as surgery allows him to do, saying it energizes him.

Dr. Lewis's office number is 802-254-5510.



Thomas H. Lewis, MD

BMH Surgeon Is Re-Certified

Joseph E. Rosen, MD, general surgeon on the Brattleboro Memorial Hospital medical staff, was recently re-certified by the American Board of Surgery. Dr.



Joseph Rosen, MD

Rosen, whose subspecialty is breast surgery, has now re-met the defined standard of education, training, and knowledge in the specialty of general surgery. Surgeons are required to receive their re-certification every ten years, and to maintain that certification, must demonstrate ongoing professionalism, show commitment to life-long learning through continuing medical education, and pass a written examination.

Dr. Rosen also received Breast Ultrasound Certification from the American Society of Breast Surgeons which entailed both a clinical and a written application. He is also trained in stereotactic breast biopsies, an advanced diagnostic instrument offered at BMH to patients with breast abnormalities.

Dr. Rosen is Medical Director of the BMH Breast Care Program.

Dr. Rosen was first certified by the American Board of Surgery in 1988, re-certified in 1998, and again this year. He received his doctor of medicine at Baylor College of Medicine (TX), and served his residencies at Baystate Medical Center and Providence Hospital (MI). Dr. Rosen has a fellowship in general surgery from Mt. Sinai Hospital (Hartford, CT) and, in addition to his membership in the American Society of Breast Surgeons, has been a Fellow of the American College of Surgeons.

Dr. Rosen's office is in the Gannett Building at 21 Belmont Avenue. His phone number is 802-257-3751.

Dr. Tortolani Receives Community People Award

Robert Tortolani, MD, was presented the Community People Award last October. The award was announced in the *Brattleboro Reformer* in early November. The award was presented at Dr. Tortolani's office on the hospital campus by George Haynes, former CEO of The Brattleboro Savings & Loan, and by Tim Johnson, news director at WTSA-radio.

Dr. Tortolani has practiced at BMH for more than 30 years and he presently serves more than 2,000 local residents in his family practice. A number of years ago, he was awarded the honor of being Vermont Family Physician of the Year.

Dr. Tortolani serves on the Vermont Medical Society board, and locally on the BMH physician's recruitment and retention committee. He is proctor to many medical students and residents, and has mentored many new doctors over the years. In addition, Dr. Tortolani has contributed his time and expertise to the Brattleboro Walk-In Clinic and to the Austine School, having served on their board for more than 25 years. He also served as Austine's attending physician at one time and continues to be available to the nurses for consultations as needed. More recently, Dr. Tortolani worked on behalf of the Fulflex Field Project, is currently involved with the Brattleboro Historical Society, and is a member of the camera club and Brattleboro Outing Club.

When not involved with the patients in his practice, Dr. Tortolani skis and plays softball among other activities. We congratulate Dr. Tortolani on yet another feather in his (baseball) cap!

From the Development Office

The BMH Development Office is raising \$150,000 in Annual Fund gifts to support the purchase of two digital mammography machines. The 2008 campaign, beginning this past October, has already raised more than \$80,000 toward this goal.

According to Dr. Rosen, *“Digital mammography will allow for faster mammographic screening, more efficient storage and sharing of pictures, as well as the ability to more accurately diagnose breast cancer in young, premenopausal, dense-breasted women. By bringing this new technology to our small rural community, Brattleboro Hospital continues to demonstrate its commitment to providing the highest quality, state-of-the-art breast care program.”*

Digital mammography replaces X-ray film, similar to digital cameras. The electrical signals are used to produce images of the breast that can be seen on a computer screen or printed on special films to look like regular mammograms. Digital mammograms are taken the same way as film or analog mammograms, (per the U.S. Food and Drug Administration). Some of the benefits of digital mammography include improvement in image storage and sharing of data between physicians; shorter exam times; less radiation than film mammography; 70% detection in symptomatic women, compared to 55% using film mammography in anyone under age 50; anyone with very dense breasts, or pre- or peri-menopausal women.

The addition of digital mammography builds on an already strong reputation of care. At BMH, patients will find excellent physicians attending to their medical needs. And they will also find the best in medical technology for diagnosis and treatment. **Providing our patients with the best is why, with the help of donors, BMH is investing over \$800,000 on the purchase of two digital mammography machines.**

If you would like to help bring digital mammography to the Brattleboro region and enhance the BMH breast care program, please call 802-257-8314, visit us on the web at www.bmhvt.org/giving, or return the attached tear-out card with your donation. Thank you. **We appreciate your support!**

Company Supports Charity by Wearing Jeans




Northeast Home Loan CEO Ed Sensor (l.) stands with his employees.

Brattleboro Memorial Hospital recently received an Annual Fund gift from a local business, Northeast Home Loan. With the check came a note stating that *“in an effort to support our community, the employees implemented a jeans day for the first Friday of each month.”* Brattleboro Memorial Hospital was the January 2008 recipient.

As we thanked Northeast Home Loan and asked to learn more about jeans day, Ed Sensor, President & CEO, explained, *“We do a charity Jeans Day the first Friday of each month and all employees chip in \$5 to wear jeans for the day. We rotate the choice of charity so that each employee can choose his or her favorite charity. We have 12 full-time employees, so it works out that each employee can allocate to their favorite charity once a year. This is our 8th year doing this program, so we have raised over \$5,000 for local charities.”*

We thank Ed and the employees of Northeast Home Loan for their gift to BMH and to the many other community charities they have supported over the past eight years. We appreciate their sharing this fun way for businesses and employees to support the essential work of community not-for-profits.

<input type="checkbox"/> Benefactors \$5,000 and above	<input type="checkbox"/> Patrons \$1,200 to \$4,900	<input type="checkbox"/> Fellows \$600 to \$1,199	<input type="checkbox"/> Associates \$300 to \$599	<input type="checkbox"/> Friends \$150 to \$299	<input type="checkbox"/> Donors \$1 to \$149	 Brattleboro Memorial Hospital <i>Caring for our Community</i>
I am pleased to make a tax-deductible pledge/gift of: _____						
Name(s) _____ <i>Please print name(s) as you would like to be listed in acknowledgements.</i>						
Address _____						
I prefer to make my contribution by credit card: <input type="checkbox"/> VISA <input type="checkbox"/> MasterCard						
_____		_____		_____		
<i>Card Number</i>		<i>Exp. date</i>		<i>VTC #(3 digit # on back)</i>		
_____		_____		_____		
<i>Print name on card</i>		<i>Signature</i>		<i>My phone number</i>		
<input type="checkbox"/> I prefer my gift to be anonymous						
This gift is made <input type="checkbox"/> <i>memory of</i> <input type="checkbox"/> <i>in honor of</i> _____						
Please send a commemorative gift announcement to _____						
Address _____						
Your gift is tax-deductible to the extent of the law. Please make your check payable to: Brattleboro Memorial Hospital. Mail contribution to: BMH Development Office, 17 Belmont Avenue, Brattleboro, VT 05301						



BMH Development Office Initiates Donor Newsletter

“*Contributions.....making a difference*” the new bi-yearly donor newsletter for Brattleboro Memorial Hospital made its debut last month. In it, BMH supporters are kept informed about the many ways they can support the hospital they love, and also read how their charitable dollars are *making a difference*.

In “*Contributions...*” there are pictures and articles about the new Affinity bed purchased for the Birthing Center with last year’s Annual Fund dollars, information about the Oncology Fund, an article about the new **1904 Legacy Society**, and pictures of the annual donor reception. *Contributions* highlights it all with a mix of pictures portraying the various events.

Copies of “*Contributions*” were mailed recently to all people who supported BMH during the past two years. It is also available on line at www.bmhvt.org/giving and copies can be found throughout the hospital. If you would like to be added to the mailing list, please call the Development Office at 802-257-8314.

Development Office Now On-Line

The Development Office is updating the www.bmhvt.org/giving website on a regular basis. This is a good place to find information such as designations for the Annual Fund, how the BMH Annual Fund drive is progressing, and what is happening with the new **1904 Legacy Society**. From supporter profiles to questions on how to make a gift of stock, the website covers it all. It is also an easy way to make a gift to BMH as, in the next few weeks, we will feature on-line giving. So please take a minute and visit us on line at www.bmhvt.org/giving, and if you have a story to share or have feedback, please give us a call at 802-257-8314.



Brattleboro Memorial Hospital

Caring for our Community

17 Belmont Avenue
Brattleboro, VT 05301

Mission

Brattleboro Memorial Hospital will provide community-based health services delivered with compassion and respect.

Vision

Best patient care experience-
every patient; every time
Best place to work-
employees / volunteers / medical staff

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If you have received more than one copy of Healthwise, we request that you consider passing it on to a friend or neighbor. Thank you.