Our Mission

With humanity, humility and honor, to heal by providing exceptionally intelligent and responsive healthcare and education for as many as we can reach.

Our Vision

Einstein Brilliance and Compassion In All We Touch.

Barry R. Freedman (L) and Richard C. Shere
Dear Friends,

Welcome to Albert Einstein Healthcare Network’s annual report for fiscal year 2010.

As we reflect upon the past year, we are motivated by the progress we have made and energized by what lies ahead. We understand that the future of healthcare is one of ongoing uncertainty, but remain inspired by our collective ability to stay true to our mission, stay on course, and together, move forward.

In fiscal year 2010, Einstein’s thoughtful corporate strategy preserved our path of success. We focused on carefully managing our resources, growing our business where we could and positioning ourselves for long-term stability. However, Einstein continued to be challenged by the financial realities of a depressed economy and unfavorable changes in the way insurance companies reimburse hospitals for services.

While it is difficult to know exactly how aspects of healthcare reform will play out, we believe Einstein’s commitment to quality, our integrated approach to patient care, our attention to keeping costs down and the continuum of care already represented in our network, will help us adjust to any significant changes and put us ahead of our competition.

We’re proud that Einstein again earned the Premier Award for Quality – this year with two awards, for our flagship medical center and for the network overall. This achievement recognizes the entire Einstein team for its dedication to quality day in and day out.

The spirit of innovation continues to flourish as our physicians and clinical teams explore and create new ways to identify, treat and heal our patients. This year, we prepared for the December 2010 launch of the first phase of Albert Einstein Clinical Information System (AECIS), which will enhance our ability to provide safe, patient-focused, high-quality healthcare and improve how we deliver and document care for our patients.

This year, Einstein made great strides in the development of the new regional medical center in Central Montgomery County, Pa. Einstein secured a commitment from the U.S. Department of Housing and Urban Development (HUD) to insure the new facility’s mortgage loan and, soon thereafter, sold $310 million in Federal Housing Administration (FHA) insured bonds, the proceeds of which will be used to fund the construction of the new medical center. These milestones advance the vision of the Einstein-Montgomery partnership to create a modern healthcare destination with the latest clinical services and highly trained physicians and staff, committed to providing care to local families right in their own community.

Preserving the health and well-being of the people in our communities is what drives all of us, every day. It is a privilege to serve you and the network, and we appreciate the time, energy and commitment of everyone in the Einstein community.

Sincerely,

Barry R. Freedman Richard C. Sheerr
President and Chairman
Chief Executive Officer Board of Trustees
Einstein has persevered through challenging times
Albert Einstein Healthcare Network is on track to bolster its position as a driving force in healthcare in the Philadelphia region. Fueled by a passion for excellence in patient care and education, along with a commitment to health and wellness, the entire Einstein team advanced the position of the network in fiscal year 2010.

Like other healthcare institutions this year, Einstein was challenged by a depressed economy and significant changes and delays in insurance reimbursements. We worked hard to stay on course and continued to follow our vision for a successful future.

Einstein is proud to have a strong heritage of excellence in patient care and a long track record of innovation in medicine. Our mission — to provide exceptionally intelligent and responsive healthcare and education for as many as we can reach — has motivated us for 145 years and, now more than ever, propels us forward, as we bring compassionate care and cutting-edge medicine to more families in the region.

The depth and breadth of experience among Einstein physicians, nurses and clinical staff, as well as our dedicated administrative and support services professionals — enables the organization to move ahead. As caregivers, advisors and clinical experts, we guide our patients on the path of recovery for optimal health and an improved quality of life.

In the pages that follow, we celebrate our achievements. Our collective commitment to patient care will sustain our momentum for future accomplishments, discoveries and success.
Every day, on every shift with every patient, Einstein clinicians strive to create a positive patient experience for those we touch. Einstein is consistently recognized by industry peers and healthcare organizations for its quality achievements.

Now, more than ever, it is critical that healthcare institutions are prepared and ready to adapt to the sweeping changes of healthcare reform. The Patient Protection and Affordable Care Act demands that healthcare providers deliver higher quality care, increased efficiency and improved clinical outcomes. Albert Einstein Healthcare Network is well positioned to address the challenges of accountable care while keeping costs down.

**Award-Winning Quality**

This year, Albert Einstein Healthcare Network and Albert Einstein Medical Center each were recognized by the Premier healthcare alliance as winners of the Premier Award for Quality. The 2010 award is the second consecutive Award for Quality given to Albert Einstein Medical Center and the first for the Einstein network overall – in the very first year Premier has evaluated healthcare systems for quality awards.

Einstein is the only independent academic medical center and the only healthcare system in the Philadelphia region to have earned the awards. Quality award winners included just 21 hospitals and three health systems – the top 1 percent overall – of 3,788 eligible hospitals and 346 eligible health systems nationwide.

Premier’s Award for Quality measures top performers at the overall hospital level and is distinguished by its consideration of performance based criteria, including clinical quality outcomes, clinical process indicators and resource utilization outcomes. The Premier healthcare alliance is a consortium of thousands of hospitals that work together to achieve high quality, cost-effective care.
Collaboration for Patient Safety

Often, patients awaken during the night and, though advised not to, will attempt to get out of bed. If the bed is not in the proper low position, or the room’s night light is out, or if the patient can’t reach the bathroom easily, he or she might fall and get hurt. The nursing staff took it upon themselves to solve the problem of patient falls on Einstein’s medical-surgical floors. They analyzed what conditions were causing falls and committed to creating individualized plans for a patient environment that reduced the chance of falls. To optimize their problem solving, they engaged leadership for support and established accountability for improvements.

“Once we banded together and had the support of leadership, the nurses ‘owned’ this initiative to reduce patient falls and made a huge difference,” said Terry Stine, RN, MBA, Director of medical-surgical and dialysis nursing. “Our nursing teams applied critical thinking to our patient cases to analyze what conditions might produce falls and what we need to do to prevent them.”

These nursing innovators were phenomenally successful: in the first year of the falls-reduction initiative, the rate of incidence of patient falls was cut in half. The initiative ultimately involved about 200 nursing staff and nursing leaders, deployed on patient floors throughout Einstein’s medical center, as well as a quality coordinator on each unit. The success of this initiative enhances Einstein’s ability to protect patients and reinforces a collective commitment to safety and quality.

Terry Stine, RN, MBA (standing left), explains the safety precaution of lowering the patient’s bed with Thao Nguyen, RN, BSN (left), and Antonetha Donatus, RN, BSN, on Tower 4, the orthopedics/trauma unit.
Minimally invasive, image-guided technology is the fastest growing area of interventional oncology/radiology at Einstein. With these procedures, radiologic images are used as a roadmap to enable a radiologist to guide a catheter through the body to reach specific areas containing a disease. A radiologist can diagnose and treat a patient’s pathology with the least invasive technique possible, minimizing physical trauma to the patient, risk of infection and recovery time.

Minimally invasive techniques enable physicians to locate and isolate the delivery of treatment into a cancerous tumor or cells. This “sharp shooting” maximizes the impact of the treatment, minimizes exposure to nearby healthy cells and decreases the amount of drug exposure to the patient’s other organs. Einstein clinicians are using minimally invasive procedures to both embolize (block the flow of blood to) and to administer chemotherapy drugs into malignant tumors in the liver. Other techniques are used to insert probes to burn or freeze tumors in the liver, bones, kidneys and lungs.

While the most effective way to treat most cancerous tumors is to surgically remove them, some cancer patients – many with liver cancer, for example – aren’t candidates for surgery due to the size, location of the tumor or their condition. One solution is transarterial chemoembolization or transarterial radioembolization, in which a physician delivers tiny beads filled with cancer-killing chemotherapeutic agents or radioactive spheres to the blood vessels feeding a cancerous tumor. The beads deliver chemotherapy or radiation and cut off blood supply to the tumor.

“There are many patients, such as those with liver, kidney or lung cancer, who don’t want or can’t tolerate conventional surgery. For these patients, a minimally invasive embolization or ablation solution is not just an ideal solution but the only option,” said Paul Brady, MD, Director, Vascular and Interventional Radiology at Einstein.
Autism is a neurobiological diagnosis that affects communication, socialization and behavior. Children with autism may lack eye contact and language skills, as well as an intuitive sense of how to respond to different social settings. Imagine the disorientation a child with autism feels when confronted with the loud noises, strange sounds, bright flashing lights and crowds in an airport.

After a young Einstein patient with autism was unable to make the return flight home from a family vacation, Wendy Ross, MD, FAAP, Director of Einstein’s Department of Developmental Medicine, was inspired to develop a unique program. The first of its kind, Autism Explores™ coaches autistic kids through the process of air travel by having them experience it, right at the airport – checking in at the ticket counter, going through security, waiting at the gate, boarding the plane, buckling into the seat and more.

“Familiarizing these children with the process of air travel and showing them firsthand all the steps, goes a long way in increasing their comfort level,” said Dr. Ross.

Autism is officially considered a disability, but without a wheelchair or crutches, how do you know a child needs special attention? The program is designed to educate families, airline employees and airport security personnel about how to work together to create a less stressful travel experience when dealing with children who have special needs.

Autism Explores was launched in collaboration with Southwest Airlines, Philadelphia International Airport, the Transportation Security Administration, University of the Sciences in Philadelphia and The Gray Center in Michigan. As a result of the early success of the pilot program, there are plans to expand the program to other airlines and airports and to make the educational materials available in multiple languages.
Clinical Excellence

Surgery to Sustain Life

Reported around the world last year was news about the innovative cardiac device implanted in the heart of former Vice President Dick Cheney. Weeks prior to that announcement, Einstein cardiac surgeons had implanted the same type of device in a patient in Philadelphia. Known as a ventricular assistive device (VAD), this mechanical circulatory pump pushes blood continuously throughout the body of a patient who has limited heart function.

Some VADs are intended for short-term use, typically for patients recovering from heart attacks or heart surgery. Other VADs are implanted in patients who have congestive heart failure for long-term use – months, years or in some cases, for life. The device often serves as a bridge to sustain life until a patient can receive a heart transplant. Because the device supplements the amount of blood pumped through the body, most patients with a VAD implant are able to be functional despite a serious heart condition. After the device is implanted, patients generally feel more energetic and are able to resume many activities they were unable to do prior to receiving the implant.

“With a comprehensive heart failure program, including devices like the VAD and other medical therapies, Einstein cardiovascular specialists have yet another way to manage patients with poor heart function whose hearts are just too damaged to pump on their own,” said D. Lynn Morris, MD, Chairman of Cardiovascular Disease and Director of the Einstein Institute for Heart and Vascular Health. “Enhancing quality of life and extending life for our patients is the real benefit of having the latest treatment innovations.”

“Now I can walk and go up and down the stairs at my house without having trouble breathing,” said Emma Edwards who has a VAD implant.
Enhanced Solutions for Heart Disease

Some cardiology patients have structural heart disease, which affects the heart muscle itself and changes the architecture of the heart. Structural heart disease can be present from birth or can develop as a person ages. It can present in various conditions, such as atrial septal defects, ventricular septal defects and heart valve disease, or disorders such as valvular regurgitation or valvular stenosis (narrowing of the heart valves).

In the past, patients with structural heart disease required open-heart surgery. Today, cardiologists and cardiac surgeons employ percutaneous approaches that utilize special catheters and devices inserted through the skin, in one or more small puncture sites — replacing the large incisions required in older, traditional heart or vascular surgery.

Einstein cardiologists and cardiac surgeons are adept at these minimally invasive techniques in patients needing valve repair or valve replacement surgery, coronary artery angioplasty and stenting, atrial fibrillation procedures and other common structural heart repairs. Percutaneous procedures enable patients to have a faster recovery time and very small incisions. Moreover, these advanced procedures create new options for those who are physically unable to undergo conventional surgery due to unstable heart function or other medical problems.

New Cardiac Rehabilitation Center

With support from the Women’s League for Medical Research, Einstein opened the network’s new Cardiac Rehabilitation Center. The Center provides customized programs of exercise, education and lifestyle counseling which are designed to help patients recover from a heart attack, other forms of heart disease or cardiac surgery. The American Heart Association and the American College of Cardiology recommend cardiac rehabilitation programs to help patients regain strength, prevent their conditions from worsening and reduce the risk of future heart problems.

D. Lynn Morris, MD, Chairman of Cardiovascular Disease and Director of the Einstein Institute for Heart and Vascular Health, said, “Cardiac rehabilitation is essential for our heart patients. The services we are able to provide at the Cardiac Rehabilitation Center advance Einstein’s efforts to provide a meaningful continuum of care for patients with heart-related issues.”
**Patient-Focused Approach**

People who are living with heart disease or recovering from a cardiac event, such as a heart attack, may experience a range of physical and emotional changes – including depression. Cardiac patients who are depressed are less likely to follow a treatment or wellness plan or to change unhealthy behaviors, which jeopardize their health and well-being.

Einstein’s clinicians believe that optimal healthcare involves treating the physical, psychological and emotional needs of patients with heart disease. This year, Einstein’s cardiology team began using a new mental health assessment offering screening and monitoring for depression at the Cardiac Rehabilitation Center. The screening tool evaluates and identifies the severity of symptoms of depression – thereby determining level of risk and need for treatment.

Clinical trials conducted by Polaris Health Directions, developer of the system, and Einstein clinicians, found that patients who had serious symptoms of depression were hospitalized seven times more often than patients without significant depression. Because depression is a major risk factor for future heart attacks, effective intervention and treatment can vastly improve quality of life for patients.

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**Cancer Care**

The Albert Einstein Cancer Center was selected to participate in the second phase of the exclusive National Cancer Institute’s Community Cancer Centers Program (NCCCP) to offer expanded research opportunities and the latest cancer care at hospitals caring for underserved urban populations. Einstein is one of only 30 medical centers in the country selected as an NCCCP facility.

**Leadership in the Community**

The two-year grant focuses on addressing ways to reduce healthcare disparities, improve access to clinical trials, enhance quality of care and promote an infrastructure to collect high-quality biospecimens for research. The Einstein Cancer Center will also work to improve survivorship, palliative care services and patient advocacy.

Too often, many patients don’t seek diagnosis or treatment until they are in the late stages of cancer. As a result of the NCCCP, a community educational initiative is underway to help enhance awareness and understanding of the cancer care options available in our home area.
Einstein supports and creates new opportunities for free cancer screenings by collaborating with local organizations and churches to reach the underserved.

The program’s second key focus is to spur more participation in clinical trials that provide access to medical advances and help develop new preventatives, diagnostics and treatments. Currently, only three to five percent of newly diagnosed patients with cancer are enrolled in clinical trials.

“There are many reasons these percentages are so low. Patients often don’t understand what clinical trials might be available and there are logistical matters, such as travel issues and complex participation agreements,” said William Tester, MD, FACP, Medical Director of Einstein’s Cancer Center. “We will now have the resources available to overcome some of these barriers.”

Einstein will contribute findings to a national data bank and the tumor collection process will become more uniform. “Years from now, researchers will be able to use this data and Einstein will have played an integral role in the evolution of studying and treating cancer on a national level,” said Dr. Tester.

Dr. Tester and patient.

EINSTEIN HAS CONTINUED TO EARN ACCREDITATION AND RECOGNITION FOR ITS LEADING CLINICAL PROGRAMS.

- Einstein’s Breast Cancer Program received full three-year accreditation from the National Accreditation Program for Breast Centers (NAPBC). This accreditation demonstrates that our program has undergone a rigorous evaluation process and provides the highest level of quality breast care.
- Einstein was once again recognized as an approved cancer program by the Commission on Cancer of the American College of Surgeons.
his year marked the 17th time MossRehab was recognized as one of the nation’s leading rehabilitation facilities – ranked number one in Pennsylvania and number 10 in the United States – by U.S. News & World Report’s survey of “America’s Best Hospitals.”

MossRehab is the exclusive U.S. clinical trial site for ReWalk®️, a motorized exoskeleton suit that enables patients with lower limb paralysis to independently stand, walk and in some cases, climb stairs. During the past year of the clinical trial, physicians and therapists at MossRehab completed training for 10 trial patients, including a former NFL football player and a teenage girl paralyzed in a car accident.

“We are proud to report that all subjects in the first phase of the clinical trial have achieved independent transfer from a chair to standing position and were able to walk in the ReWalk device with just the aid of crutches,” said Alberto Esquenazi, MD, Principal Investigator and Chairman, Department of Physical Medicine and Rehabilitation, Albert Einstein Medical Center, and Chief Medical Officer, MossRehab.

The goal of the trial is to provide positive outcomes data that will achieve FDA approval for clinical use of the device domestically. If approved, ReWalk will provide patients with a level of independence not previously available when using a wheelchair. In addition, by keeping users upright on a daily basis, ReWalk can alleviate many of the health problems associated with long-term wheelchair use, including thinning bones; pressure sores; and cardiovascular, respiratory and digestive issues.

“MossRehab has been asked to continue with the next phase of clinical trials, which are still in the planning phase,” adds Esquenazi. “At that time, we will be looking into understanding the long-term physiological benefits to the bones, heart and lungs.”
Leading-Edge Technology

Clinicians at MossRehab lead the way when it comes to adapting technology to help strengthen and train impaired muscle groups; restore motor skills; and objectively quantify and differentiate sensory, motor and central nervous system impairments. The ultimate goal is to help patients return to a higher level of independence.

Another example of leading-edge technology is the recently introduced Armeo® Therapy to help restore the arm’s gross motor skills after a stroke or injury. This therapy employs a video game style, robotically assisted joystick and challenges patients to handle real-life tasks, e.g., picking out apples in a basket in a computerized image. The technology demands that the patient generate his/her own arm movements which advances the rehabilitation.

MossRehab is also using the Lokomat®, robot-assisted walking therapy primarily used with patients who had a stroke, spinal cord or brain injury, or have other neurological or orthopedic condition. The Lokomat, which helps the body relearn how to walk, uses a body weight support system and computer-controlled mechanical suit to move the body in a natural walking pattern. Consistent and repeated walking training can eventually lead to independent walking.

MossRehab partnered with Aria Health this year to open an inpatient facility in Bucks County providing a full continuum of care for patients with orthopedic and neurologic conditions. The 12-bed inpatient facility is expected to treat an additional 250 patients annually.
Safe and Sound

While many area hospitals have reduced or eliminated their maternity services, Einstein has reinforced its commitment to mothers and babies, delivering approximately 3,000 babies each year.

This year, after much work on the major expansion of the maternity unit at Einstein Medical Center, the maternity team began using PeriGen’s PeriBirth® technology in the delivery room. The PeriBirth clinical decision support system reduces the incidence of complications during delivery and improves clinical outcomes. The technology will work hand in hand with the Albert Einstein Clinical Information System (AECIS) which will create an electronic medical record for patients.

PeriBirth monitors a mother’s and baby’s changing conditions during childbirth, incorporates the mother’s medical history and issues real-time alerts and recommendations to the clinical team. The technology can flag many common, but potentially harmful, labor and delivery conditions, such as subtle changes in the pattern of a baby’s heartbeat or dangerous medication interactions.

More Than “Baby Blues”

After childbirth, some women go through the “baby blues” – mild mood swings or sleeping or eating difficulties that last 10 days or so and usually resolve on their own. Some women, however, experience postpartum depression, a more serious medical condition that may occur for a longer period after giving birth. Symptoms include feelings of sadness and hopelessness, loss of appetite and trouble sleeping.

Arnold Cohen, MD, Chairman of the Department of Obstetrics and Gynecology, explains the PeriBirth® technology to a patient.
Not only does PeriBirth help clinicians during labor and delivery, it also contains a screening tool for postpartum depression. This tool led Einstein to become the first hospital in the Philadelphia area to create an initiative that identifies patients at risk for developing postpartum depression and offers patient management and treatment. Physicians can access the results of the screening as well as the interventions provided, via the PeriBirth system.

The first step of the initiative is educating every staff person who works with patients in Einstein’s Women and Children’s clinical areas about the signs of postpartum depression. The next step is training nurses to use a screening tool that consists of a series of questions to identify a woman’s general mood and feelings.

Women identified as high-risk for developing the condition, are given a thorough psychiatric evaluation prior to discharge. Lower risk patients are given additional screenings in the following few weeks, and follow-up evaluation by a psychiatry resident, if needed. The program links inpatient care with outpatient care options to ensure that new mothers have access to the treatment they need when they leave the hospital.

Breast Health: In 3-D

Einstein was the first hospital in both the Philadelphia region and the state of Pennsylvania to offer SonoCiné®, a new, three-dimensional ultrasound breast exam. This advanced diagnostic tool supplements traditional mammography for women with dense breast tissue. It is often difficult visually to detect small cancers in dense breast tissue because both dense tissue and cancerous tissue appear white on a mammogram film.

With the SonoCiné ultrasound technology, cancerous tissue appears dark on white images, so cancers are easier to distinguish. A SonoCiné ultrasound records video — rather than individual images — of the entire breast; the images can be magnified or stopped and are permanently recorded.

“This exam is not a replacement for screening mammography, which remains the gold standard for detecting breast cancer, but rather a supplemental exam designed for women with dense breast tissue,” said Debra Somers Copit, MD, Director of Breast Imaging at Einstein’s Marion-Louise Saltzman Women’s Center. “Early detection is key, and a technology like this increases detection of smaller cancers, which can lead to survival rates of 95 percent.”

According to Sandy Sobel, one of the first women in our area to get SonoCiné, “The exam was painless and I’m so glad I live in a time when this technology is available. Anything we can do to detect a problem as early as possible is a great thing.”

Einstein’s radiologists specialize in breast imaging including digital mammography, ultrasound, magnetic resonance imaging (MRI) and all interventional breast procedures. The radiology breast team participates in research trials designed to enhance their diagnostic skills at finding and diagnosing breast abnormalities.
In fiscal year 2010, there was an exciting portfolio of approximately 400 research studies underway at Einstein, including the launch of more than 130 new projects.

Research throughout the network ranges from projects on breast and prostate cancer, stroke and schizophrenia; to heart failure, traumatic brain injury and more. Following is a sampling of the many projects underway:

**Deep Vein Thrombosis (DVT)** is a serious medical condition that occurs in approximately 2 million Americans each year and can be life-threatening. Albert Einstein Medical Center is the only medical center in Philadelphia and one of only three in the region with investigators participating in the ATTRACT Trial (Acute Venous Thrombosis: Thrombus Removal With Adjunctive Catheter-Directed Thrombolyis). This multisite national study is sponsored by the National Institutes of Health (NIH) to determine the safety and effectiveness of a procedure to remove blood clots.

DVT occurs when a blood clot forms in a vein deep inside the body, usually in the leg. When a blood clot breaks loose and blocks a lung (pulmonary) artery, it can be fatal. Blood-thinning drugs are the most common treatment to stop the clot from growing in the vein and decrease the risk of a pulmonary embolism. Blood thinners do not directly dissolve a blood clot, so the clot can remain in the vein and continue to block blood flow and damage the vein. This can result in postthrombotic syndrome which can cause skin discoloration, pain, swelling of the leg and difficulty walking in up to 50 percent of patients in the years after having DVT.

The ATTRACT study involves injecting a clot-busting drug, tissue plasminogen activator (TPA), directly into the blood clot and using special catheters to remove the clot, a procedure called Pharmacomechanical Catheter-Directed Thrombolyis, or PCDT. Patients who undergo PCDT also receive blood-thinning drugs at the same time. The study will determine if removing the blood clot using PCDT safely prevents postthrombotic syndrome and improves quality of life in patients with DVT.

Paul Brady, MD, interventional radiologist and site principal investigator for the ATTRACT study.
**Improved Functioning Through Mirror Therapy**

Scientists at Moss Rehabilitation Research Institute (MRRI) collaborate with professionals on the clinical rehabilitation side to leverage the latest research and treatment for patients at MossRehab. The goal is to identify and deliver solutions for patients that enable them to improve functioning and have an enhanced quality of life.

One fascinating area of study underway at MRRI is mirror therapy for pain relief and mobility. MRRI scientist Steve Jax, PhD, is working with several patients who have weakness or movement problems primarily in the arm or hand, as a result of stroke.

In mirror therapy, a patient performs various movements or exercises with both the injured and uninjured hands in front of a mirror. The mirror’s reflection creates an illusion in which movements of the uninjured hand appear as if they are being made by the injured hand – the patient “sees” functioning in the afflicted hand. Early results show that patients are finding relief from physical pain and improving their limb function as a result of mirror therapy.

Dr. Jax believes the visual input of seeing the injured hand perform normally, causes the brain to rewire itself to rely on uninjured parts of the brain to control movement.

“This integration of simple physical therapy with cognitive function to produce movement looks promising as a simple, yet effective, addition to therapy to treat movement problems,” said Dr. Jax.

*Steve Jax, PhD, works with a patient.*
Commitment to Research in Mental Illness
The Research Department at Belmont Center for Comprehensive Treatment conducted 10 different studies examining the safety and efficacy of medications to treat patients diagnosed with acute schizophrenia, cognition in schizophrenia, depression, Alzheimer’s disease and psychotic depression. All of the studies were sponsored by pharmaceutical companies. Howard Waxman, PhD, is Director of Research at Belmont, and leads the studies on Alzheimer’s disease. Richard Jaffe, MD, leads the studies on depression, psychotic depression and schizophrenia. Douglas Cosgrove, MD, leads another study on schizophrenia. Vinu George, MD, has been a subinvestigator on all studies.

Enhanced Detection of Breast Cancer
The Marion-Louise Saltzman Women’s Center at Albert Einstein Medical Center is the only hospital in the Philadelphia area conducting two clinical trials using Digital Breast Tomosynthesis (DBT), a test that uses X-rays to create a three-dimensional picture of the breast. The purpose of the trials is to determine if DBT can identify breast cancer more accurately than a regular digital mammogram.

Debra Somers Copit, MD, Director of Breast Imaging at the Women’s Center, is the principal investigator for the trials. DBT is administered in addition to a regular digital mammogram and takes images or “slices” of the breast from many angles and sends them to a computer where they are processed to produce highly focused three-dimensional images. During the DBT exam, the images are acquired incrementally, virtually eliminating overlapping tissue, so a radiologist may be better able to detect problems that could be hidden in a traditional mammogram.

This exciting new technology may emerge as a significant improvement to current standard digital mammography, and may reduce false positives, callbacks and biopsies in breast cancer screenings.
Key Intervention in Diabetes Treatment

A study completed by Arthur Chernoff, MD, FACE, Chairman of the Division of Endocrinology at Albert Einstein Medical Center, and his clinical team, showed that endocrine intervention in surgical patients with diabetes and abnormal blood sugar accounted for shorter hospital stays (600 fewer days) and a decrease in the expense of treating these patients (saving more than $1 million).

Over the course of a year, Dr. Chernoff and his team provided endocrine consultation and support for diabetes patients being treated on the general surgical service. The objective was to determine whether involvement of the endocrinologist in the management of diabetes and abnormal blood sugars in surgical inpatients affected economic outcomes. The key intervention was to provide consultation for blood sugar management as soon as abnormal blood sugars were identified, rather than waiting for the surgical team to ask for assistance. “The active involvement of the endocrinologist with the surgical team helped decrease the patients’ length of stay and reduced hospital expenses,” Dr. Chernoff said. “Previously, we had worked with our cardiac surgeons and transplant teams in the care of their diabetic patients and found that the length of stay in diabetic patients shortened, and in some instances, was shorter than in patients without diabetes. This study extended this collaboration to the general surgery service.”

Patients were identified for intervention by systematic monitoring of blood glucose levels. Intervention was initiated when a patient had a blood glucose level less than 50 mg/dl or greater than 200 mg/dl. “The bottom line is simple; if a diabetic patient is on the surgical service, it’s important to address blood sugar control,” Dr. Chernoff said. “This is where endocrinologists need to lead the charge.”

Arthur Chernoff, MD, FACE
Simulation Training: 2010

The Einstein Center for Clinical Competence opened this year at the network’s main campus funded with proceeds from the 2008 Harvest Ball. The new 6,500 square-foot facility provides residents, physicians, nurses and students with real-world patient experiences through guided scenarios and procedures that closely replicate actual patient care.

The $1.2 million center reproduces hospital environments, including an intensive care unit, surgical suite and standard patient room, all of which provide participants with the opportunity to practice clinical and teamwork skills in a safe, controlled setting. Training in simulated environments is a step between classroom instruction and actual clinical instruction with real patients. This training improves patient care and enhances patient outcomes.

The Einstein Center for Clinical Competence features several high-tech mannequins — SimMan® 3 G and SimMan®, two male adult “patients,” and SimNewB™, a newborn “patient.” The Sim units can be programmed to moan, blink, sweat and even shed tears, and can be used to recreate countless medical scenarios, providing the most realistic training exercises available today.

From behind a one-way mirror, the control room operator can initiate scenarios and record all activity in the simulation suites. The recordings are used as a teaching device and serve as an archival record of an individual’s competencies.

Chief Academic Officer Douglas McGee, DO, records a scenario in a simulation suite.
Education and Dedication, For Life

Through the generosity of contributions to the Harvest Ball, Einstein created The Robert G. Somers, MD, Chair of the Department of Surgery.

The Chair recognizes and perpetuates the ideals and work of Dr. Somers and wife Ronnie Somers, by providing funding for physician education, community breast health education and innovations for treatment of breast disease.

Dr. Somers is dedicated to training future doctors at Albert Einstein Medical Center and has had a significant impact on hundreds of young physicians. After completing a residency at Einstein, Dr. Somers joined Einstein’s staff as a general surgeon. He later chose to specialize in breast cancer surgery and pioneered the use of lumpectomy for breast conservation in cancer patients. As a teacher, healer and friend, Dr. Somers routinely sees former residents and patients long after their experience at Einstein.

For more than 25 years, Mrs. Somers has contributed her time, talent and resources to improve the quality of life for patients, physicians and staff at Einstein. She was President of Einstein’s Auxiliary and has been a powerful force in The Breast Cancer Action Group.

By end of fiscal year 2010, the Somers Chair had raised just over $1.2 million and has set a new record for Harvest Ball contributions. Ongoing donations to the Chair will underwrite the cost of grand rounds, guest lecturers and conferences to educate medical students, surgical residents and fellows and attending surgeons. Proceeds of the Chair will help launch new programs and research in surgery, emphasizing work in the fields of breast cancer, trauma and organ transplantation, which reflect Dr. Somers’ professional interests.

Dr. Somers teaches the next generation of physicians.
**Broadening Our Reach**

Einstein’s Kidney and Pancreas Disease and Transplantation Program is recognized as the most active deceased donor kidney program in the region by Gift of Life, the organ procurement organization serving Eastern Pennsylvania, Southern New Jersey and Delaware.

This year, the Kidney Transplant Program expanded its reach to include dialysis centers in Delaware and New York, in addition to its ongoing efforts in Pennsylvania and New Jersey. The Center’s outreach coordinators set up more than 200 staff and patient education seminars at dialysis centers in the tri-state area. As a result, Einstein’s transplant waiting list has grown significantly, and has the second largest waiting list in the Commonwealth of Pennsylvania.

There was also an increase in educational programs by Einstein nephrologists, nurses and physician assistants to nephrologists in South Jersey and Pennsylvania. These programs offered opportunities to highlight Einstein’s clinical expertise and share results of the newest clinical trials. To strengthen alliances, Einstein transplant experts fulfilled requests for speaking engagements at meetings held by renowned organizations including Gift of Life; the Philadelphia chapter of the post-transplant group Transplant Recipients International Organization (TRIO), and the American Nephrology Nurses’ Association (ANNA).

**New Partnerships**

The team of experts from Einstein’s Center for Liver Disease and Transplantation implemented an outreach program traveling to Delaware, Maryland, New York and across New Jersey and Pennsylvania, informing hepatologists and gastroenterologists about the extensive scope of clinical services and treatments available at the Center. As a result, the Hepatology Department received 100 new referrals, including 35 new transplant referrals.

**Leadership Through Education**

In an effort to inform gastroenterologists and other physicians in the tri-state area about advances in the treatment of hepatitis B, hepatitis C, acute liver failure and transplantation, Victor Araya, MD, FACG, AGAF, Chairman, Division of Hepatology, Medical Director, Liver Transplant; and Jorge A. Ortiz, MD, Section Chief, Liver Transplant Program, hosted Continuing Medical Education (CME) events. Because of the positive feedback from participants, more CME events are planned.
Support For Patients With Hepatitis C

Patients with hepatitis C are more likely to receive treatment because of the new Nurse Hepatitis C Clinic. The nurses in Einstein’s Center for Liver Disease were concerned that so many patients with hepatitis C never completed their pretreatment work ups and therefore never started the complex course of treatment. They devised a system that connects the patient to a nurse much earlier than had previously been done, by scheduling the patients to visit the Nurse Hepatitis C Clinic within one month of the decision to start treatment. The nurse works closely with the patient to help overcome any psychosocial or financial barriers to medical care access, and consequently, more patients are starting hepatitis C treatment.

“We are finding that the close support the program offers is making a difference for many of these patients who would otherwise be lost to follow-up,” said Victor Araya, MD, Chairman, Division of Hepatology, Medical Director, Liver Transplant. “Creating a patient/caregiver relationship much earlier in the process helps keep patients on track and increases the likelihood they will complete the necessary treatment and get well – and that’s our goal.”

Kim Gaskin, RN, BSN, a hepatology nurse coordinator in the Center for Liver Disease, counsels a patient about hepatitis C.
John’s Story

John Schwartz is a lucky man. He has two guardian angels in his life — his sister-in-law and his wife. Diabetes took a toll on his kidneys, and in 1995, John was in need of a kidney transplant. His wife, Terry, didn’t hesitate to offer one of her kidneys, but their son and daughter were very young so John didn’t think it was the right time for Terry to be a donor. Then his wife’s sister, Jackie, offered to help. She was tested and elated to find out she was a good match. Jackie offered the Gift of Life and John gratefully accepted.

The transplant took place in 1995 and was a great success, enabling John to lead a full, active life for many years. John and Jackie had always been close, but Jackie’s act of selflessness created the tightest bond imaginable.

Fast forward 15 years to 2010. John’s body was retaining fluid and he had other medical problems — signs that his transplanted kidney was failing. For months, John underwent dialysis and other treatments to remove fluid from his body. John said it was clear to his nephrologist at Einstein’s Transplant Program that he needed another transplant. This time, his wife insisted on being a donor since she was in good health and their children were grown.

Terry went through the necessary testing and evaluations and was found to be a compatible match. The next step was scheduling the surgery. Having the utmost trust and confidence in the physicians and transplant surgeons at Einstein, John and Terry had no doubt that the surgery would take place at Einstein’s Kidney Transplant Center.

“The transplant went perfectly,” according to John. He and Terry were out of the hospital in a few days and Terry was back at work within a month.

“This may sound like a cliché, but it really felt like the Einstein team of doctors, nurses and staff were our ‘family,’” says John. “They took the best possible care of Terry and me and reassured us each step of the way.” John is grateful to his wife and to the medical experts for giving him his life back.
Recognition

The network is continually recognized by objective outside organizations for clinical excellence, quality outcomes and community service. The following are some of the many acknowledgements and honors earned by the network this year:

- **MossRehab** made impressive strides in the *U.S. News & World Report* survey of “America’s Best Hospitals.” MossRehab now ranks number 10 on a list of just 20 rehabilitation hospitals in the country named as best in their specialty for the most challenging cases and procedures. Rankings are based on selections by board-certified physicians. MossRehab is the top ranked facility in Pennsylvania. This is a significant accomplishment that recognizes MossRehab’s comprehensive range of rehabilitative services, its team of world-class experts and its leadership in medical research and treatment innovation.

- There was more recognition for MossRehab this year since it was one of only six hospitals in the country to receive the American Nurses Association’s Award for Nursing Quality based on patient outcomes. The nurses were recognized by the National Database of Nursing Quality Indicators, the nation’s most comprehensive database of nursing care outcomes measures, for demonstrating superior patient outcomes and high nurse job satisfaction.

- The Blue Distinction® designation from the Blue Cross/Blue Shield Association was awarded to Einstein’s Department of Orthopedic Surgery’s Knee and Hip Replacements at Einstein at Elkins Park and the Department of Orthopedic Surgery’s Spine Surgery Program at Albert Einstein Medical Center. Medical facilities that have demonstrated expertise in delivering quality healthcare under objective selection criteria, according to Blue Cross/Blue Shield receive this designation.

- Exemplifying Einstein’s unwavering commitment to clinical excellence, 15 doctors from Albert Einstein Healthcare Network were recognized this year as “Top Doctors” in *Philadelphia* magazine. This group, selected by their peers as the region’s best, sustains a long tradition of Einstein physicians earning this honor. The doctors represent a broad range of clinical areas, including internal medicine, nephrology, physical medicine and rehabilitation, endocrinology and others. Also selected by their peers and representing different specialties, are 11 dentists on staff at Einstein’s Maxwell S. Fogel Department of Dental Medicine, recognized as “Top Dentists” in *Philadelphia* magazine.
• **Mary Beth Kingston, RN, MSN, NEA-BC**, Chief Nurse Executive for Albert Einstein Healthcare Network, was one of only 20 nurse executives in the country selected as a *Fellow of the Robert Wood Johnson Foundation® Executive Nurse Fellows’ Program*. During the three-year leadership program, fellows receive training, mentoring and the opportunity to implement innovative healthcare strategies in their communities. Ms. Kingston provides leadership and management direction for 1,200 nurses throughout the Einstein network.

• **John Whyte, MD, PhD**, Director of the Moss Rehabilitation Research Institute, received the *2010 Distinguished Academician Award* from the Association of Academic Physiatrists, an organization of faculty, researchers and others dedicated to the advancement of academic physiatry.

• Five residents from the Department of Pediatric and Adolescent Medicine were selected to participate in the 2010 Resident Leadership Program of the National Hispanic Medical Association, including **Felipe Bautista, MD; Claudia Lares, MD; Lina Huerta, MD; Cecilia Damilano, MD** and **Natalia Isaza-Brando, MD**. This prestigious, nationwide program promotes the development of leadership skills in resident physicians to better prepare them to advocate for Hispanic communities.

• **Kimberly Best, MD**, Director of the Albert Einstein Medical Center Psychiatry Residency Program, was selected to receive *The Daniel Blain Award* from the Philadelphia Psychiatric Society for her dedication and service to the profession of psychiatry. Dr. Best treats patients who are HIV positive at Einstein’s Infectious Diseases Clinic. She also has a special interest in psychoanalysis and uses these concepts and techniques in her work with outpatients.

• **Karyn Kling, RN**, was selected by the Association of Rehabilitation Nurses Awards Committee as the recipient of the *2010 Staff Nurse Award* for the advancement of rehabilitation nursing care. Ms. Kling is a staff nurse at MossRehab’s Brain Injury Unit.
Social Media

The rise of social media outlets like Facebook and Twitter provide additional opportunities for the network to interact with the people we serve and the general public.

The Marketing and Communications team established a presence for both Einstein and MossRehab on Twitter, Facebook and YouTube. In the coming months, followers will be able to view news items highlighting the network’s quality and leadership, videos showing the depth of knowledge of our physicians and staff and fun events for employees and supporters of the organization.

Follow us today!

*Albert Einstein Healthcare Network:*
www.twitter.com/einsteinhealth  
www.facebook.com/einsteinhealth  
www.youtube.com/einsteinhealth  
www.youtube.com/einsteineducation

*MossRehab:*
www.twitter.com/mossrehab  
www.facebook.com/mossrehab

**Einstein Says, “Good Morning America!”**
The year’s most exciting media event brought George Stephanopoulos and ABC’s Good Morning America (GMA) to MossRehab. Stephanopoulos, co-anchor of GMA, paid a visit to tape a segment about the ReWalk™ clinical trial as part of GMA’s series called “The Cutting Edge.” Included in the report were three clinical trial participants and an interview with Alberto Esquenazi, MD, Chairman, Department of Physical Medicine and Rehabilitation, Albert Einstein Medical Center, and Chief Medical Officer, MossRehab, as well as footage of Mr. Stephanopoulos in a ReWalk suit.

Many of Einstein’s clinicians, medical advances and community programs were featured this year in print, electronic and web-based media outlets, locally, regionally and nationally.
Einstein’s Reach

New Medical Center
559 West Germantown Pike
East Norriton, PA 19403
The first completely new medical center to be built in southeastern Pennsylvania in more than a decade. Scheduled to open fall 2012.

MossRehab
World-renowned physical medicine and rehabilitation for traumatic brain injury, spinal cord injury, stroke and amputation, neurological and musculoskeletal disorders.

Einstein at Elkins Park
66-bed acute-care hospital offers general medicine services and 24-hour emergency department.
Both at 60 Township Line Road, Elkins Park, PA 19027

Albert Einstein Medical Center
5501 Old York Road, Philadelphia, PA 19141
Flagship location for Albert Einstein Healthcare Network. Largest independent academic medical center in the Philadelphia region with 1,057 beds and more than 7,000 employees.

Frank Synagogue
Built in 1901, the only freestanding synagogue on hospital grounds in the U.S.

Belmont Center for Comprehensive Treatment
4200 Monument Road, Philadelphia, PA 19131
Anchor hospital of Belmont Behavioral Health, the region’s largest behavioral health system; offers services for children, adolescents, adults and older adults.
MossRehab Driving Programs
MossRehab Clubhouse Programs
MossRehab Inpatient Locations
MossRehab Outpatient Centers

Primary and Specialty Care
Einstein offers quality primary and specialty services including internal medicine, family practice, obstetrics/gynecology, pediatrics, cardiology, gastroenterology, nephrology, orthopedics and others, at more than 35 practices throughout Philadelphia, Montgomery and Bucks counties.

Surgical Care
Advanced outpatient and inpatient surgical care, using traditional as well as minimally-invasive techniques, is offered throughout the network in cardiology, orthopedics, bariatrics, liver/kidney/pancreas transplantation, neurosurgery and many other specialties.
More than 20 capital-funded projects were completed in fiscal year 2010 to upgrade, expand and renovate facilities throughout the network. An emphasis on energy efficiency and green technology led to cost reductions in utility consumption. The following are key projects underway or completed this year:

- Installation of the network’s first Green Roof project on Einstein Medical Center’s Tower Building. This project consisted of a 3,000 square foot replacement roof that incorporated live plants to allow for an increase in roof-related insulation and an environmentally-friendly process for the management of storm water.

- The Simulation and Learning Center in the Korman Building was completed and dedicated in July.

- The start of the final phase of the Lifter Labor and Delivery upgrade and expansion, which will include a complete modernization of the building’s three elevators and replacement of all exterior window assemblies.

- The construction and commissioning of a new $3 million central chilled water plant at the Elkins Park campus positions us for future expansion and allows for a reduction in electrical consumption and associated costs.

- The newly constructed MossRehab Brain Injury Research facility was completed and opened in June. The facility provides for 10,000 square feet for research operations under one roof.

- Numerous facility improvements are in progress, including the final phase of the Klein Building Transplant Center construction on the main campus, multiple infrastructure enhancements, energy upgrades and systems’ refurbishments.

The total amount of capital dollars utilized to accomplish this year’s active upgrade, expansion and renovation programs was in excess of $12 million.
New Medical Center Moves Forward

For the first time in more than a decade, a new, state-of-the-art medical center will be built in Southeastern Pennsylvania. Following Einstein’s strategic growth plan, the new medical center is a natural geographic extension of the network’s growing service area, and will provide access to high-quality clinical services to the growing population in the northwest suburbs of Philadelphia. In late fiscal year 2010, Albert Einstein Healthcare Network announced the sale of $310 million in Federal Housing Administration insured bonds, the proceeds of which will be used to fund the construction of the new medical center. This fundraising effort generated bond orders worth more than three times the value of those actually sold. In a time of great economic challenges, this project quickly gained the support of the investment community.

Construction began in summer 2010, just after fiscal year 2010 ended. The new hospital is slated to open its doors in September 2012. The creation of the medical center will enhance access to leading-edge medical care, including 24-hour emergency care delivered by board-certified emergency room physicians, advanced cancer care, cardiac services, orthopedic care, medical offices for convenient access to primary care physicians and specialists, and health education and wellness programs.

The 360,000 square-foot, five-floor medical center will operate as a full service acute care hospital. The facility will offer 146-beds, including 96 medical/surgical beds, a 22-bed intensive care unit, a 20-bed obstetrical unit and an eight-bed neonatal intensive care unit.

The new medical campus will also feature a 75,000 square-foot, two-story medical office building connected to the main medical center with access to primary care practices and specialists. As the region’s largest independent academic medical center, Einstein plans to provide resident training at the new hospital in the latest clinical treatments and technology for patients.

The journey toward 2012 and the opening of the new medical center is exciting, as the organization moves forward and expands its breadth and depth of services.
leading-edge technology is becoming increasingly important, not only to deliver care in today’s hospital setting but also for effectively and efficiently running a healthcare network. Einstein has continued to invest in the technologies that will ensure a quality experience for patients, their families, physicians, nursing staff and employees throughout the network.

**The AECIS Project**

In 2008, Albert Einstein Healthcare Network took steps to implement a new clinical information system to be used by more than 5,000 physicians and employees. Now, through the hard work of many, the Albert Einstein Clinical Information System (AECIS) is in the final stages of development and implementation.

AECIS will create a unified electronic medical record, a computer-based digital health record stored on a software system, for more than 550,000 patients that visit Einstein hospitals and facilities each year. Patient healthcare information, such as medical history, medical procedures, lab results and treatments will be stored in a dynamic database.

This approach will provide physicians, nurses, pharmacists, lab technicians and other caregivers direct access to real-time information at all network hospitals and outpatient facilities, streamlining the patient access process and creating a more holistic approach to care.

Midyear fiscal year 2010, more than 400 Einstein employees attended the AECIS Open House at which the AECIS team demonstrated the system and new tools and devices that will be used upon implementation. This was the first time a large group of employees were able to experience the result of the significant planning, design and testing undertaken by the AECIS team.

Implementation of the AECIS system will be rolled out networkwide in the months ahead. Training sessions and online tools have been made available to employees to ensure a smooth transition to the new system.


**Accelerating Cancer Care**

The Albert Einstein Radiation Oncology Department has installed the Varian Trilogy®, a new state of the art linear accelerator. The Varian Trilogy combines image-guidance technology that enables the physician to localize where the tumor is at the moment of treatment delivery. This linear accelerator has the most focused and powerful radiation beam available. The result of these treatments is highly precise radiation therapy. The precision of the Varian Trilogy allows physicians to spare healthy tissue surrounding the area of the tumor to an extent that was unimaginable only a few years ago.

In conjunction with numerous other technical enhancements, the Varian Trilogy is enabling the Albert Einstein Radiation Oncology Department to provide some of the most advanced radiation treatments available in the region.

*Lawrence J. Solin, MD, FACR, Chair, Department of Radiation Oncology, with the Varian Trilogy.*
Making an ImPACT at MossRehab

There are more than 300,000 sports-related concussions reported in the United States each year. MossRehab has the ability to treat a full spectrum of concussion-related issues, with a goal of helping more people return to play, school and work following head injuries.

Cognitive testing is an important part of the comprehensive concussion diagnosis and treatment. That is why the team at MossRehab adopted the same cognitive testing procedures used by the National Football League, National Hockey League and Major League Baseball. The MossRehab team utilizes ImPACT™ Immediate Post-concussion Assessment and Cognitive Testing, the most scientifically validated, computerized concussion evaluation system, allowing specialists to manage concussions on an individual basis.

The ImPACT neurocognitive testing program is used at all of the Moss Sports Rehab sites throughout the region. The innovative program enables Einstein athletic trainers to perform baseline testing and subsequent evaluations following a concussive episode. Trainers work in conjunction with MossRehab for follow-up consultations and treatment and clearance to return patients safely back to normal activity.

ImPACT takes approximately 20 minutes to complete and measures multiple aspects of cognitive functioning, including attention span, working memory, sustained and selective attention time, response variability, non-verbal problem solving and reaction time.

“While neurocognitive testing is the foundation of concussion assessment, we are also looking at additional aspects of the diagnosis such as balance, headaches and dizziness,” said Thomas Watanabe, MD, Clinical Director of MossRehab’s Drucker Brain Injury Center. “Having accurate information post-injury and the ability to track recovery, helps ensure that patients are not returning to high-level activities too soon, thus avoiding the cumulative effects of concussions.”
As Chief of Anatomic Pathology, Dr. Minimo oversees the clinical operations of the laboratories that process tissue specimens. He is one of a few board-certified dermatopathologists (a subspecialty of Surgical Pathology, which is the study of skin abnormalities at a microscopic level) that practice in a hospital-based setting. Skin lesions in hospitalized patients are often the sign of a more complex underlying condition. As a result, Dr. Minimo developed a dermatopathology consultation service. He directly observes patients in the hospital to gain a deeper understanding of the medical factors that could contribute to the skin issue in question. He educates the clinical team and directs the surgeon to the location and type of biopsy that will be most informative. This comprehensive approach to the diagnosis of the skin manifestations of disease, is one of the progressive programs offered by Einstein’s Department of Pathology and Laboratory Medicine.

Dr. Minimo is board certified in Anatomic and Clinical Pathology, Dermatopathology, and in Cytopathology.

Dr. Emara oversees the complete operation of the Hematology Laboratory, including analyzing patient samples, training technologists and upgrading systems and equipment. Prior to joining Einstein’s Department of Pathology, he was a Medical Technologist Supervisor at Duke Hospital in Durham, North Carolina, and Salisbury Veterans Administration Medical Center in Salisbury, North Carolina.

Dr. Emara is certified as a Medical Technologist by the American Society of Clinical Pathologists. He completed a Master of Science degree in Biochemistry and a PhD in Immunology from Cleveland State University and the Cleveland Clinic Foundation in Ohio. He went on to complete a post-doctoral fellowship in the Immunology Department at Duke University Medical Center at North Carolina.
Dixie L. Melton, MBA, MT (ASCP)SC  
*Chemistry Supervisor*  
*Department of Pathology and Laboratory Medicine*  
*Albert Einstein Medical Center*

Dixie is responsible for technical and scientific oversight of the Chemistry Department. She develops and implements policies and procedures that guide and support the Department, and establishes and monitors quality control and Quality Assurance programs for the testing that’s performed. Along with her team of medical technologists and technicians, more than one million laboratory tests are processed each year in the Chemistry Department alone. These tests are vital in assisting Einstein doctors, nurses and clinicians in delivering the highest quality patient care.

Dixie completed a Bachelor of Science degree from Ohio State University and recently completed a Masters of Business Administration degree from the University of Detroit Mercy, Detroit, Michigan. She is certified by the American Society of Clinical Pathologists as a Medical Technologist with a Specialist in Chemistry certification.

Susan M. Gordon, PhD  
*Clinical Program Manager, Mood and Eating Disorders Programs*  
*Belmont Center for Comprehensive Treatment*

Dr. Gordon oversees direct patient care, clinical program development, staffing and fulfillment of regulatory requirements. Her expertise is treating patients who have an addiction and an eating disorder. She has increased clinical programming for addictive behaviors in the inpatient and day treatment programs for eating disorders and for the mood disorders inpatient program. This therapeutic approach is difficult to find in the psychiatric community.

Dr. Gordon’s background includes serving as Director of Research and later as a psychologist at Seabrook House in Seabrook, New Jersey, an inpatient addiction treatment center, where she treated many patients who had eating disorders and mood disorders. She also has served as Director of Research and Professional Training at the Caron Foundation in Wernersville, Pennsylvania, an addiction treatment center, where she designed and implemented medical training programs for medical students, interns and residents. Dr. Gordon also served in administrative and clinical capacities at Renfrew Center, Philadelphia, a residential and outpatient eating disorders facility. Up until a few years ago, Dr. Gordon was in private practice specializing in treating patients with chemical addictions, eating disorders and mood disorders.
Richard J. Galup
Administrator
Heart and Vascular Institute
Albert Einstein Medical Center

Richard provides leadership, vision and direction for the full scope of Einstein’s cardiac services. This includes management of the catheterization laboratories, electrophysiology laboratories, cardiac surgery, heart failure services and multiple testing sites. Richard also oversees the freestanding physician practices and the Cardiac Rehabilitation Center. Prior to joining Einstein, he served as the Chief Operating Officer at Phoenixville Hospital in Phoenixville, Pennsylvania. Richard started his career as an occupational therapist before moving into a management role as Director of Outpatient Rehabilitation and Sports Medicine at Nazareth Hospital in Philadelphia.

Richard earned a Bachelor of Science in Health Sciences and a Master of Science in Occupational Therapy from Misericordia University in Dallas, Pennsylvania, and a Masters in Business Administration from Drexel University, Philadelphia. In addition to his administrative role at Einstein, Richard works with the Northeast Philadelphia Chamber of Commerce and is a graduate of their 2008 Leadership Development Program.

Tracy Drufovka
Director of Transplant
Albert Einstein Medical Center

Tracy directs Einstein’s Liver, Kidney and Pancreas Transplant Program. She is responsible for maintaining one hundred percent compliance with policies and protocols for UNOS (United Network for Organ Sharing), CMS (Centers for Medicare and Medicaid Services) and JCAHO (The Joint Commission). She maintains budgetary guidelines, develops community partnerships and promotes staff professional growth. Before joining Einstein, Tracy served as Director of Transplant at Hahnemann University Hospital, managing the Kidney and Pancreas Transplant Program, the Liver Transplant Program and their Heart Failure and Heart Transplant Program.

Tracy’s experience as a licensed social worker gives her a keen understanding of the transplant process. Prior to taking on an administrative role in 2003, she provided psychosocial evaluations for people exploring transplant and helping those who underwent the surgery to cope with the issues that arose. She has maintained a private practice with a central focus on psychiatric evaluations for living donors. Tracy views transplant as an area of daily rebirth and feels fortunate to be part of this life affirming field.
Engaging Employees

To help create and maintain an organizational culture that fosters personal and professional growth, innovation and world-class patient care, Einstein welcomed Michele Darnell, Director of Organizational Communications. Michele works directly with senior leadership to help the organization build and sustain a defined workplace culture, improve employee engagement and to celebrate employees’ commitment to the network’s mission and contributions to its success.

Building Unity

To create a visual representation of the network’s Code of Conduct, employees worked together in 11 workshops called The Mosaic Collaboration Project. During these workshops, employees reflected on the meaning of Respect, Empathy, Responsibility, Affinity and Integrity.

These reflections led to the creation of mosaics that are permanently mounted at locations throughout the network. The mosaics serve as a constant reminder of the connection established among employees, patients, and visitors, as well as the sharing spirit that brought the artwork to reality.

“We were one team. It was a joy to see doctors, therapists, clerical workers and housekeepers come together as one creative artist,” said Claudia Moore-Gowans, Administrative Coordinator for Rehabilitation Services at Einstein at Elkins Park.
**Becoming Heart Smart**

In honor of Heart Month in February and to promote Einstein’s wellness efforts, a month-long event called “28 Days to a Healthier Heart” was created. The initiative offered an opportunity for employees, patients and visitors to participate in a measurable effort to fight heart disease.

Activities included lectures, healthy menu items and recipes submitted by staff members; advice and tips on Einstein’s intranet, and awareness efforts like Wear Red Day, for which pedometers and t-shirts were distributed.

The activity that created the most impact was the Campus Heart Walk which consisted of a one-mile mapped route. Employees and visitors were encouraged to walk the self-guided route as many times as possible during the month. Employees responded positively to the 24/7 access that enabled all shifts to participate in the initiative. The one-mile self-guided walk was completed by staff more than 1,800 times during the month!
The Victor Center for the Prevention of Jewish Genetic Diseases was on the move this year, broadening its reach and creating new partnerships. Staff and volunteers from the Victor Center reached more than 100,000 people through educational outreach to clergy, healthcare professionals and the overall community. Over 2,000 people were counseled and screened. At these gatherings, Victor Center speakers focused on the risks of Jewish genetic diseases and the importance of getting screened and updating screenings as a preventive measure.

To more accurately convey the Victor Center’s mission, its name was officially changed from the Victor Center for Jewish Genetic Diseases to the Victor Center for the Prevention of Jewish Genetic Diseases.

**Expansion into Atlanta**

The creation of the Atlanta Jewish Gene Screen, an awareness and community screening campaign, represents the expansion of the Victor Center into Atlanta, Ga. The Atlanta Jewish Gene Screen is funded through the generosity of the Marcus Foundation, known for its meaningful philanthropy and strong roots in Atlanta. The project is dedicated to building awareness among clergy, healthcare professionals, community-at-large, and the at-risk population (age 18 to 45), about the genetic diseases affecting Ashkenazi Jews; the importance of genetic counseling; the availability of preconception screening for all 18 preventable and many life-threatening disorders, and the need to update screening prior to each pregnancy.

**Campaign Reaches College Students**

The Centers for Disease Control recognized the important work of the Victor Center and provided a generous $250,000 to launch a social marketing campaign on college campuses to reach Jewish college students. The core message: “1 in 5 of Us Is a Carrier for a Jewish Genetic Disease, Learn the Facts, The Stakes are High, Get Screened,” was woven into educational materials including brochures, posters and a guide book.

The materials were field-tested at Drexel University in Philadelphia; the University of Maryland in College Park, Maryland; Barnard College in New York City; Emory University in Atlanta, Georgia; Northwestern University in Chicago, Illinois, and the University of California, San Diego, in San Diego, California.
**Inroads in Pittsburgh**  
Through a three-year grant from the Highmark Foundation, the Jewish Healthcare Foundation, Genzyme, the Fine Foundation and the Jewish Federation of Greater Pittsburgh, the **Pittsburgh Victor Center Partnership** has begun. In the first year, there was the kick off of an awareness campaign and the screening of 160 students.

**David’s Story**  
From the first month of David’s life, it was clear he was not like other infants. He had frightening seizures, swings in body temperature, and frequent lung infections. David’s parents did not know they both carried the gene for Familial Dysautonomia (FD). An educational brochure titled “David’s Story” (below) chronicles the short life of David, born with FD, one of the many Jewish genetic diseases that can be fatal.

The Victor Center partnered with the New York Board of Rabbis and developed the brochure which reached approximately 100,000 people through synagogues in the metropolitan New York City area.

**The Victor Center leads the way in generating national awareness for the current 18 diseases affecting 1 in 5 Ashkenazi Jews and the importance of updating your screening:**
- Bloom Syndrome
- Canavan Disease
- Cystic Fibrosis
- Dihydrolipoamide Dehydrogenase Deficiency
- Familial Dysautonomia
- Familial Hyperinsulinism
- Fanconi Anemia type C
- Gaucher Disease type 1
- Glycogen Storage Disease type 1a
- Joubert Syndrome
- Maple Syrup Urine Disease
- Mucolipidosis IV
- Nemaline Myopathy
- Niemann-Pick Disease type A
- Spinal Muscular Atrophy
- Tay-Sachs Disease
- Usher Syndrome type 1F
- Usher Syndrome type III
With an unwavering commitment to providing high quality, compassionate care, Einstein nurses play a pivotal role in providing a positive experience for patients. This year was full of new initiatives and progress. The following are some of the key nursing accomplishments:

**Magnet Journey**

Under the leadership of Mary Beth Kingston RN, MSN, NEA-BC, Chief Nurse Executive, Einstein’s Nursing Service Organization (Department of Nursing) has been using the framework of the American Nurses Credentialing Center (ANCC) Magnet Recognition Program® to advance nursing practice and improve nursing quality outcomes. The ANCC has an established process known as the Magnet Recognition Program® to which hospitals can apply to be recognized as a Center of Excellence in the delivery of patient care. This prestigious recognition is considered the gold standard of excellence and has only been awarded to 377 hospitals in the country (approximately 6% of U.S. hospitals). Although the certification process is from a nursing organization, the hospital is recognized as a Magnet hospital. The certification lasts for four years and then organizations can re-apply. Research shows that Magnet hospitals have increased RN and patient satisfaction and improved patient safety.

Over the past three years, the Nursing Service Organization initiated practice changes using the Magnet framework. Today, nursing leaders participate in organization committees and planning sessions, round on nursing units, and advocate for direct care registered nurses. Through this structure, registered nurses have been involved in initiatives related to a decrease in falls, improvement in prevention of pressure ulcers and reduction in blood stream infections.

For exemplary professional practice, the Nursing Service Organization adopted Watson’s Theory of Human Caring as the model of care delivery which emphasizes the humanistic aspects of nursing in combination with scientific knowledge. Based on this model, various caring practices were implemented on the nursing units. For example, registered nurses on a postpartum unit now ask patients, “What is most important to you today?” This question opens the door for patients to talk about psychosocial issues such as, “How am I going to care for my newborn baby?”

“Working toward Magnet status has helped elevate nursing standards and improve nursing practice across the Einstein network,” said Ms. Kingston. “For instance, the number of direct care registered nurses involved in publishing, presenting at national conferences, using evidence and research to change practices and obtaining national certification and advanced degrees continues to grow.”
Einstein nurses are carefully following the step-by-step criteria to earn Magnet recognition. The application will be submitted for review in fall 2012. The final component, to take place in early 2013, is a site visit by a team of appraisers to review organizational practices and outcomes. It’s an exciting process and Einstein nurses are keeping their ‘eyes on the prize.’

**Sharing Knowledge**

One of the best ways to develop our nurses is to have seasoned leaders from across the network share their wisdom and experience with them. A team of nurse leaders, clinical nurse specialists and representatives from Organizational Staff Development, known as the Mentor Advisory Group, developed a structured mentoring program. Called the Leadership Mentoring Program, it’s designed around Einstein’s Mission, Vision and Code of Conduct and is a clear expression of Watson’s Caring Theory. The program includes mentors from any department who volunteer to share their expertise with nurses, who are the mentees. “When nurses partner with leaders outside the nursing realm it can be extremely beneficial because they get a fresh perspective on a situation or issue,” said Therese Julian, RN-BC, MS, Director, Nursing Education and Professional Development.

Results of the initiative show that for nurses being mentored, there’s an improvement in their effectiveness and an increase in job satisfaction. Mentors feel a sense of accomplishment by sharing their knowledge. The Program is helping mentees learn how to handle a difficult employee, develop professional goals or resolve patient care issues.

The plan is for the Mentoring Program to be an ongoing part of training for emerging nurse leaders.

Russell Jones, Network Director Protective Services, mentors Gina Daniel, RN, BSN, Clinical Manager, Tower 4.
**Reaching Out to Haiti**

When a devastating earthquake hit Haiti in January 2010, people were moved to help, including several nurses and other medical professionals from the Einstein network. Betty Cianfichi, RN, CNOR, MS, Nurse Manager, Surgical Services at Einstein at Elkins Park, (below) is one of the nurses who made the trip to Haiti.

**In Betty’s Own Words:**
I joined a team from the Life Enhancement Association for People (LEAP) Foundation, a Dallas-based, nonprofit group. We flew into Port-au-Prince, and traveled to the Haitian Community Hospital. When we arrived, all I saw was rubble, devastation and chaos.

On day one of the mission, our team started performing operations. Most of our surgeries were on patients who had been crushed in the earthquake and had severe injuries to their lower extremities. Many of these patients were dehydrated and malnourished. Based on the operating standards we’re accustomed to, the conditions were deplorable. The hospitals had almost no electronic equipment and no computers. There were many instances when we lost power and everything came to a standstill. There was no water supply. Sterilization was almost nonexistent so we soaked medical instruments in a solution to disinfect them. The translators who explained the procedures to patients were a big asset, helping to lessen patients’ anxiety and make them more comfortable.

In addition to operating at the Community Hospital, our team split up and staffed two other hospitals, where the conditions were just as bad. Family members did a lot of the primary care and brought food and wound-care supplies. Tents were set up outside the hospitals where patients were kept until it was time for surgery. Then we wheeled them up ramps to the third floor of one of the hospitals. After each operation, the patient was wheeled back down to the tent to recover. The tents were overcrowded because patients had nowhere to go since their homes were destroyed.

Surgeries started as early as 7 a.m. and continued into the early evening. We were determined to operate on as many patients as possible to prevent gangrene and infection. At the start of each day we had a team meeting to assess what services and supplies were on site, and which patients would be operated on.

Each morning we were greeted at the hospital by hungry children begging for food. Our team brought its own food from the States since we didn’t know what provisions would be available. We had more than enough and were happy to share with those in need.

The mission to Haiti changed my life. We made a difference and saved lives. In just a week’s time, special bonds formed. For instance, we amputated an arm of an 18-year-old girl named Marlena who also needed one of her legs amputated. We could have done the leg amputation, but with no rehab available, our team worked hard and arranged for her to be flown to a hospital in Dallas for the amputation and rehab. I hear she is doing well.

*A tent city in Haiti.*
Help for Young Patients

Childhood and ‘teenhood’ can be fraught with challenges, with issues running the gamut from attention deficit disorder and separation anxiety, to bipolar disorder, clinical depression and eating disorders. For nearly 75 years, Belmont Behavioral Health, part of Albert Einstein Healthcare Network, has provided treatment that supports patients in their recovery from behavioral health disorders and mental illness. As the largest behavioral health system in the Philadelphia region, Belmont offers a comprehensive array of programs for young patients, from emergency evaluation and triage to inpatient, outpatient and community-based services.

The anchor hospital for Belmont Behavioral Health is Belmont Center for Comprehensive Treatment, with expertise in caring for youngsters struggling with depression, physical and/or sexual abuse, psychotic episodes and other problems. Children ages 5 to 12 and adolescents ages 13 to 17 are treated by clinicians who specialize in helping young patients. A plan of care is developed for each patient taking into account the complex biological, psychological and social factors at work. The scope of treatment may include individual, group and family psychotherapies; art, music and recreational therapies; medication management; play therapy, and academic instruction with certified teachers. Family involvement is emphasized since the family helps maintain progress after inpatient treatment. Belmont has an integrated approach to care, working with schools and community agencies to develop treatment and aftercare plans. As part of a continuum of care, outpatient care is encouraged and offered at several locations.

Getting Kids Back on Track

An unexpected crisis or too many pressures can dramatically change a student’s behavior and put his or her education at risk. This is when Belmont Behavioral Health’s School-Based Programs can help.

“If a child feels overwhelmed with problems, behavioral changes can take place that threaten his or her ability to learn,” said Jilla Carpey, PhD, Director, School-Based Social Services. “The goal of our program is to get to the root of the problem and connect students and families with the resources they need to get back on track.”

The School-Based Social Services Program places 11 clinicians from Belmont Behavioral Health in 28 schools throughout lower Northeast Philadelphia and is the largest program of its kind in our region. The program was initiated through a competitive grant from the School District of Philadelphia. If a student exhibits behavioral issues, then a teacher, nurse or school counselor can refer the student to the program. According to Dr. Carpey, there are many reasons why a student’s behavior changes. There may be undiagnosed depression or anxiety, both of which are common among teens. Some students may be traumatized by the violence in their neighborhoods. There may be turmoil at home. Most schools do not have the resources to handle these problems, and that is when the School-Based Program can step in.
As soon as a student is referred to the program, a Belmont clinician contacts the parents to invite their participation to help remedy the situation. The clinician assesses the student's needs and works with the student and family to connect them with the appropriate resources, serving as case managers throughout the process. Clinicians also provide school-based counseling, follow-up support, coordination of student support groups and consultation with school staff and the student's caregivers.

**Hope for Youngsters With Eating Disorders**

Too many teenagers rely on unhealthy behaviors to control their weight and end up with a life-threatening eating disorder. The Eating Disorders Program at the Belmont Center treats patients starting at age 12 who are struggling with anorexia nervosa, bulimia or compulsive overeating. The treatment team’s philosophy is that people with eating disorders need help in two areas: nutritional rehabilitation and developing an understanding of the psychological components of the eating disorder.

Nutritional rehabilitation helps patients normalize their food intake. Patients are assessed by a dietician and given supervised meals. Nutrition therapy, menu planning and a cooking group are part of nutritional rehabilitation. The second focus of the program helps patients gain a better understanding of the emotional reasons for their difficulties with food, weight and body image so they can live healthier, happier lives.

To help patients understand their psychological needs, a variety of therapies are offered including: daily meetings with a psychiatrist, individual, family, art and music and group therapy; body image group and aftercare planning. On-site school services staffed by a certified teacher help adolescent patients keep up with their studies.

Eating disorders do not go away on their own. If left untreated, they can result in life-long medical conditions, or even prove fatal.

**Crisis Evaluation and Treatment**

For families dealing with major problems and turmoil, the Crisis Response Center (CRC) is available for emergency psychiatric treatment 24-hours a day, seven-days-a-week. The Adult CRC is one of four centers designated by the City of Philadelphia to provide easy access to crisis evaluation and treatment, and Belmont Behavioral Health has the only Child CRC in Philadelphia providing these services for children and adolescents. The team of experts provides assessment and triage, evaluation and intervention, crisis counseling and referrals for services. The CRC maintains strong ties with community resources and refers children, adolescents and families to programs that meet their needs.

For a multitude of problems, families can count on Belmont Behavioral Health for the help they need.
Einstein has a rich history of providing care for people in need, often the most vulnerable members of our society.

Numerous free screenings, lectures and other activities are offered, helping to make a meaningful difference in the lives of the families we serve.

In fiscal year 2010, Einstein provided $62 million in unreimbursed care and $17 million in charity care. In addition, Einstein spent $3 million in direct community service programs. Below are a few of the many initiatives:

**Healthy Eating is FUN**

Establishing good nutrition habits early in life is important for healthy physical and mental development. Einstein’s Families Understanding Nutrition (FUN) program – a collaborative partnership between Einstein and multiple organizations, including area elementary schools – provides nutrition education to low-income families through outreach to children.

Pre-school children learn about healthy snacks, breakfasts, dairy food, fruits and vegetables, and have the opportunity to taste various foods. Children are the main focus of the FUN program since their nutrition learning will ultimately benefit the entire family.

An innovative extension of the FUN program is **FUN from A to Z**, where Einstein professionals integrate reading readiness skills, songs, movement and craft activities into a weekly program that teaches children about healthful eating. Going through the alphabet, children learn about a healthy food using all five senses, and expressing their opinions about how foods taste, which increases their vocabulary. Additionally, parents/caregivers receive a summary of the children’s lessons with tips on how to include healthy eating in their daily lives. According to feedback from families, children go home and ask their caregivers to buy the fruit or vegetable they tasted.
Korean Outreach

As part of its outreach to the Korean community, Albert Einstein Healthcare Network initiated the first Korean Community Health and Education EXPO. The aim of the event was to raise awareness of health conditions that affect Korean Americans and inform participants about services in the community. The event was spearheaded by Reverend Sung-Won Pack, Einstein’s Cultural Development Specialist, with the help of the Phillip Jaisohn Memorial Foundation and Family Services of Montgomery County. It was hosted by the North Penn Area Coalition for Korean Americans and held at Pennbrook Middle School in North Wales, Pennsylvania.

More than 70 volunteers, many of whom are bilingual, helped the 300-plus attendees navigate the EXPO. Einstein and Belmont Behavioral Health experts gave presentations on coping with mental illness, including dementia among older adults, treatment of chronic hepatitis B and liver cancer, pain management and options in breast surgery.

Offering information at the EXPO are (L to R): Suzie Kim, MA, ATR-BC, psychotherapist, Geropsych Unit, Belmont Center for Comprehensive Treatment and Lucille Hummel, Assistant Manager, Volunteer and Language Bank Services, Einstein at Elkins Park.
Recognizing Ability, Not Disability

The 31st annual All About Art exhibition was held at MossRehab, featuring award-winning work from professional artists who have physical disabilities. This year’s show featured more than 300 original pieces from 72 artists, some of whom have survived stroke, traumatic brain injury, loss of a limb or a disabling illness, and others who are legally blind, quadriplegic (and have to paint with their mouths), have Parkinson’s disease or who learned to overcome a disability since birth.

All About Art 2010 featured 17 new artists and a collection of watercolors, oil paintings, sculptures, photography, jewelry and other media. Artwork was submitted by local artists, exhibitors from throughout the United States, and international artists representing Canada, South Africa, the United Kingdom and India.

Established in 1979 as the first show of its kind on the East Coast, All About Art was created to heighten awareness of the many talents and abilities of people with physical limitations. The show recognizes artists for their artistic abilities, first and foremost, and celebrates their achievements as people who have overcome physical challenges.

Stroke Alert Day

Stroke is the third leading cause of death and the leading cause of long-term disability in the United States. Because stroke is sudden and rarely causes severe pain, many people with stroke don’t recognize they are experiencing a serious health emergency – and fail to call for urgent medical help.

Stroke Alert Day, held annually in May (Stroke Awareness Month), aims to increase awareness of the warning signs and symptoms of stroke and the importance of calling 911 immediately. Quickly diagnosing and treating stroke can reduce brain injury and minimize the long-term effects of stroke. Originated in 2004 by George Newman, MD, PhD, Chairman, Department of Neurosensory Sciences at Einstein, Stroke Alert Day is a nationwide grass-roots effort on the part of healthcare providers, local organizations and volunteers to reduce the impact of stroke.

This year, the Einstein network held Stroke Alert events providing free blood pressure screenings and information at Einstein locations and at 30th Street Station, Jewish Federation, Congreso de Latinos Unidos Community Center, JCC Klein Branch, Cheltenham Mall and the West Oak Lane Senior Center, among others.
Empowering Older Residents

One community-based approach that addresses many of the challenges of growing old is a Naturally Occurring Retirement Community (NORC) program. “NORC” refers to any geographic area in which a large percentage of older adults have aged in place. NORC programs empower older residents to remain in their home by creating a strong community safety net through advocacy, facilitating access to services, socialization and other supportive functions.

Albert Einstein Healthcare Network has operated the West Oak Lane NORC program since 2007, with a range of partnering agencies (the Strategic Alliance for the Elderly) that serve older adults across Northwest Philadelphia. The West Oak Lane NORC initiative is a free, community-based program that gives older adults and their caregivers better access to a range of services, such as medical care, social services, utility assistance and home repair programs, legal/financial assistance, consumer advocacy, employment services, mental health services and transportation.

In fiscal year 2010, Einstein earned more than $9 million in grants and received funding to support programs that improve the quality of life for children and families. Einstein offers a wide variety of programs and services, including:

- Maternity Services Program
- Prenatal Parenting Education
- Pediatric Waiting Room Reading Program
- Healthy Women Program for Early Detection of Breast and Cervical Cancer
- Cheltenham Mall Walkers
- Women with Aphasia Peer Support Group
- Living With Diabetes
- Anophthalmia Research Program
- Education for Southeastern Asian Families
- APPRISE Insurance Counseling Assistance
- MossRehab School Sports Program
WITH HUMANITY, HUMILITY AND HONOR,
TO HEAL BY PROVIDING EXCEPTIONALLY INTELLIGENT
AND RESPONSIVE HEALTHCARE AND EDUCATION FOR
AS MANY AS WE CAN REACH.
Thank You for Making a Difference

$1,000,000 and more
School District of Philadelphia

$500,000-999,999
The Auxiliary of Albert Einstein Medical Center

Pennsylvania State University

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The Janeye McMullen Memorial Fund

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& Mr. Bernard R. Umbaugh

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& Mr. Bernard R. Umbaugh

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Wyatt Inc.

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Anonymous

Aon Corporation

Dr. & Mrs. Allan M. Arbeter

The Arjay Group

Arts Engineering Group, Ltd.
$500-999
Abington Reproductive Medicine, P.C.
Abramson Center for Jewish Life
Joann R. Ackley, RN
Advanced Door Service, Inc.
Advanced Furniture Services Group
Mr. George W. Allburger
Alliance Bernstein Institutional Investments
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Department of Medicine
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Dr. & Mrs. Margaret K. Hyman
Dr. & Mrs. Robert B. Hyman
Dr. & Mrs. Margaret K. Hyman
Mr. & Mrs. Charles B. McEwen
Dr. & Mrs. Robert B. Hyman
### Statement of Financial Position
Fiscal Year Ended June 30, 2010
($ in millions)

<table>
<thead>
<tr>
<th>ASSETS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and investments</td>
<td>$ 44.0</td>
</tr>
<tr>
<td>Accounts receivable</td>
<td>107.6</td>
</tr>
<tr>
<td>Assets whose use is limited</td>
<td>438.1</td>
</tr>
<tr>
<td>Long-term investments</td>
<td>266.2</td>
</tr>
<tr>
<td>Land, buildings and equipment</td>
<td>315.0</td>
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<tr>
<td>Other assets</td>
<td>104.1</td>
</tr>
<tr>
<td>Total Assets</td>
<td>$1,275.0</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>LIABILITIES AND NET ASSETS</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Liabilities</td>
<td></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$101.7</td>
</tr>
<tr>
<td>Accrued professional liability claims</td>
<td>111.8</td>
</tr>
<tr>
<td>Accrued pension liability</td>
<td>115.0</td>
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<tr>
<td>Long-term obligations</td>
<td>464.1</td>
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<tr>
<td>Other liabilities</td>
<td>53.2</td>
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<tr>
<td>Total Liabilities</td>
<td>$845.8</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Net Assets</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Unrestricted</td>
<td>$336.9</td>
</tr>
<tr>
<td>Temporarily restricted</td>
<td>52.9</td>
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<tr>
<td>Permanently restricted</td>
<td>39.4</td>
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<tr>
<td>Total Net Assets</td>
<td>$429.2</td>
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</table>

<table>
<thead>
<tr>
<th>Total Liabilities and Net Assets</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Liabilities and Net Assets</td>
<td>$1,275.0</td>
</tr>
</tbody>
</table>

### Statement of Operations
Fiscal Year Ended June 30, 2010
($ in millions)

#### How we receive our revenues

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Net patient service revenue</td>
<td>$846.7</td>
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<tr>
<td>Investment income</td>
<td>2.5</td>
</tr>
<tr>
<td>Other revenue</td>
<td>24.6</td>
</tr>
<tr>
<td>Net assets released from restrictions</td>
<td>7.5</td>
</tr>
<tr>
<td><strong>Total Operating Revenues</strong></td>
<td>$881.3</td>
</tr>
</tbody>
</table>

#### How we spent our revenues

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries and employee benefits</td>
<td>$538.0</td>
</tr>
<tr>
<td>Supplies</td>
<td>112.9</td>
</tr>
<tr>
<td>External physician, clinical and professional fees</td>
<td>65.4</td>
</tr>
<tr>
<td>Depreciation and amortization</td>
<td>34.5</td>
</tr>
<tr>
<td>Interest</td>
<td>8.9</td>
</tr>
<tr>
<td>Insurance</td>
<td>42.5</td>
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<tr>
<td>Provision for bad debts</td>
<td>20.1</td>
</tr>
<tr>
<td>Other</td>
<td>55.5</td>
</tr>
<tr>
<td><strong>Total Operating Expenses</strong></td>
<td>$877.8</td>
</tr>
</tbody>
</table>

| Operating Income                            | $3.5  |

| Non-operating revenues                      | 14.6  |

| Assets Generated for Reinvestment          | $18.1 |

- Albert Einstein Healthcare Network
- 2010 Financial Report
Operating Revenues

- Net patient service revenue: 96.1%
- Investment income: .3%
- Other revenues: 2.8%
- Net assets released from restrictions: .8%

Operating Expenses

- Salaries and employee benefits: 61.3%
- Supplies: 12.9%
- External physician, clinical and professional fees: 7.5%
- Depreciation and amortization: 3.9%
- Interest: 1.0%
- Insurance: 4.8%
- Provision for bad debts: 2.3%
- Other: 6.3%

A financial report of Albert Einstein Healthcare Network is available upon request. Please send inquiries to: Brian K. Derrick, Chief Financial Officer, Albert Einstein Healthcare Network, 5501 Old York Road, Philadelphia, PA 19141.
<table>
<thead>
<tr>
<th>2010-2011 Board of Trustees</th>
</tr>
</thead>
<tbody>
<tr>
<td>Richard C. Sheerr</td>
</tr>
<tr>
<td>Barry R. Freedman</td>
</tr>
<tr>
<td>Honorable Arlin M. Adams</td>
</tr>
<tr>
<td>Jack F. Adler, Jr.</td>
</tr>
<tr>
<td>Mina P. Fader</td>
</tr>
<tr>
<td>Alison Komar Feldman</td>
</tr>
<tr>
<td>Ethan S. Fellheimer, Esq.</td>
</tr>
<tr>
<td>Jan R. Figueira</td>
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# Albert Einstein Healthcare Network

## Locations

### MAIN FACILITIES

**Albert Einstein Medical Center**  
5501 Old York Road  
Philadelphia

**Belmont Center for Comprehensive Treatment**  
4200 Monument Road  
Philadelphia

**Einstein at Elkins Park**  
60 Township Line Road  
Elkins Park

**Einstein at Germantown**  
One Penn Boulevard  
Philadelphia

**Montgomery Hospital Medical Center**  
1301 Powell Street  
Norristown

**MossRehab**  
60 Township Line Road  
Elkins Park  
1200 West Tabor Road  
Philadelphia

**Willowcrest**  
5501 Old York Road  
Philadelphia

### SATELLITE LOCATIONS

**Einstein Specialty Physicians** and **Einstein Neighborhood Healthcare**  
Specialty and primary care practices are located throughout Philadelphia, Montgomery and Bucks counties.

**Einstein Center One**  
9880 Bustleton Avenue  
Philadelphia

**Einstein-MHMC Surgery/ Neurosurgery at Montgomery Hospital**  
1330 Powell Street  
Norristown

**MossRehab Inpatient Locations**  
Einstein at Elkins Park  
Albert Einstein Medical Center, Tabor Road  
Aria Health, Frankford  
Aria Health, Langhorne  
Sacred Heart Hospital, Allentown

**MossRehab Outpatient Locations**  
Blue Bell  
Center City  
Chalfont  
Elkins Park  
Germantown  
Jenkintown  
Northeast Philadelphia  
Olney

**MossRehab Driving School Locations**  
Doylestown, PA  
Jenkintown, PA  
Marlton, NJ  
Rehoboth Beach, DE  
Wilmington, DE  
Woodbury, NJ

**MossRehab Clubhouse Programs**  
Philadelphia and Woodbury, NJ

**Belmont Behavioral Health**

**Community Outpatient Program for the Elderly (COPE)**  
4200 Monument Road  
Philadelphia

**Crisis Response Center**  
One Penn Boulevard  
Philadelphia

**Intensive Outpatient Program**  
4200 Monument Road  
Philadelphia

**Belmont Residence at Germantown**  
One Penn Boulevard  
Philadelphia

**Philadelphia Center for Human Development**  
10360 Drummond Road  
Philadelphia
Accredited and Licensed by

- Accreditation Council for Graduate Medical Education
- American Association of Blood Banks
- American College of Radiology - Breast Imaging Center of Excellence
- American College of Surgeons
- American Dental Association Commission on Dental Accreditation
- American Society of Histocompatibility Immunogenetics
- Center of Excellence in Bariatrics - American Society of Bariatric Surgery
- College of American Pathologists
- Commission on Accreditation of Rehabilitation Facilities
  - Home- and Community-Based Rehabilitation Programs: Brain Injury Program (Adults)
  - Home- and Community-Based Rehabilitation Programs: Brain Injury Program (Children and Adolescents)
  - Inpatient Rehabilitation Programs – Hospital (Adults)
  - Inpatient Rehabilitation Programs – Hospital: Amputation Specialty Program (Adults)
  - Inpatient Rehabilitation Programs – Hospital: Brain Injury Program (Adults)
  - Inpatient Rehabilitation Programs – Hospital: Brain Injury Program (Children and Adolescents)
  - Inpatient Rehabilitation Programs – Hospital: Spinal Cord System of Care (Adults)
  - Inpatient Rehabilitation Programs – Hospital: Spinal Cord System of Care (Children and Adolescents)
  - Inpatient Rehabilitation Programs – Hospital: Stroke Specialty Programs (Adults)
  - Outpatient Medical Rehabilitation Programs – Multiple Service: Brain Injury Program (Adults)
  - Outpatient Medical Rehabilitation Programs – Multiple Service: Brain Injury Program (Children and Adolescents)
  - Outpatient Medical Rehabilitation Programs – Multiple Service: Spinal Cord System of Care (Adults)
  - Outpatient Medical Rehabilitation Programs – Multiple Service: Spinal Cord System of Care (Children and Adolescents)
  - Residential Rehabilitation Programs: Brain Injury Program (Adults)
  - Vocational Services: Brain Injury Program (Adults)
- National Accreditation Breast Cancer Programs (NABCP)
- Nuclear Regulatory Commission - Nuclear Medicine Program
- Pennsylvania Department of Health, Division of Acute and Ambulatory Care
- Pennsylvania Department of Health, Division of Drug and Alcohol Program Licensure
- Pennsylvania Department of Health, Division of Home Health
- Pennsylvania Department of Health, Division of Long Term Care
- Pennsylvania Department of Public Welfare, Office of Mental Health
- Pennsylvania Medical Society Commission on Continuing Medical Education
- Pennsylvania Trauma Systems Foundation (for Level I Regional Resource Trauma Center)
- The Association for Clinical Pastoral Education Inc.
- The Joint Commission
  - Hospital
  - Behavioral Health
  - Long-Term Care
  - Stroke

Constituent of

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- United Way of Southeastern Pennsylvania

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TO HEAL BY PROVIDING EXCEPTIONALLY INTELLIGENT
AND RESPONSIVE HEALTHCARE AND EDUCATION FOR
AS MANY AS WE CAN REACH.

Our Vision
Einstein Brilliance and Compassion
In All We Touch.

Barry R. Freedman (L) and Richard C. Sherr