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Aurora St. Luke's Medical Center

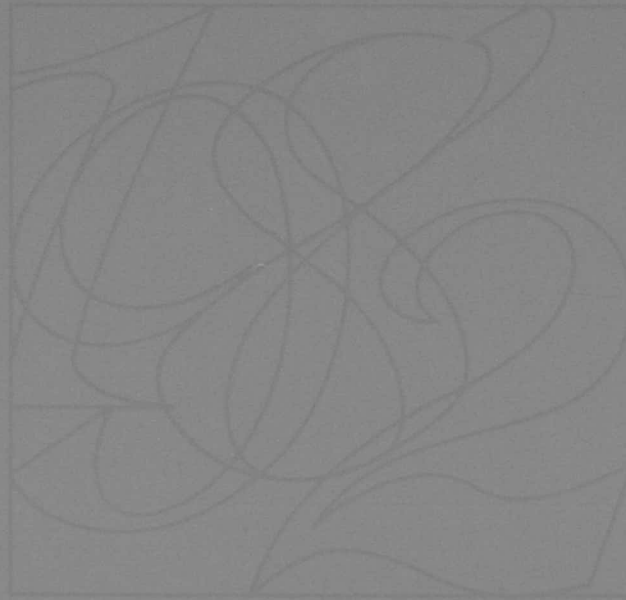
June 2016

St. Luke's Hospital Annual Report, 1982

Advocate Aurora Health

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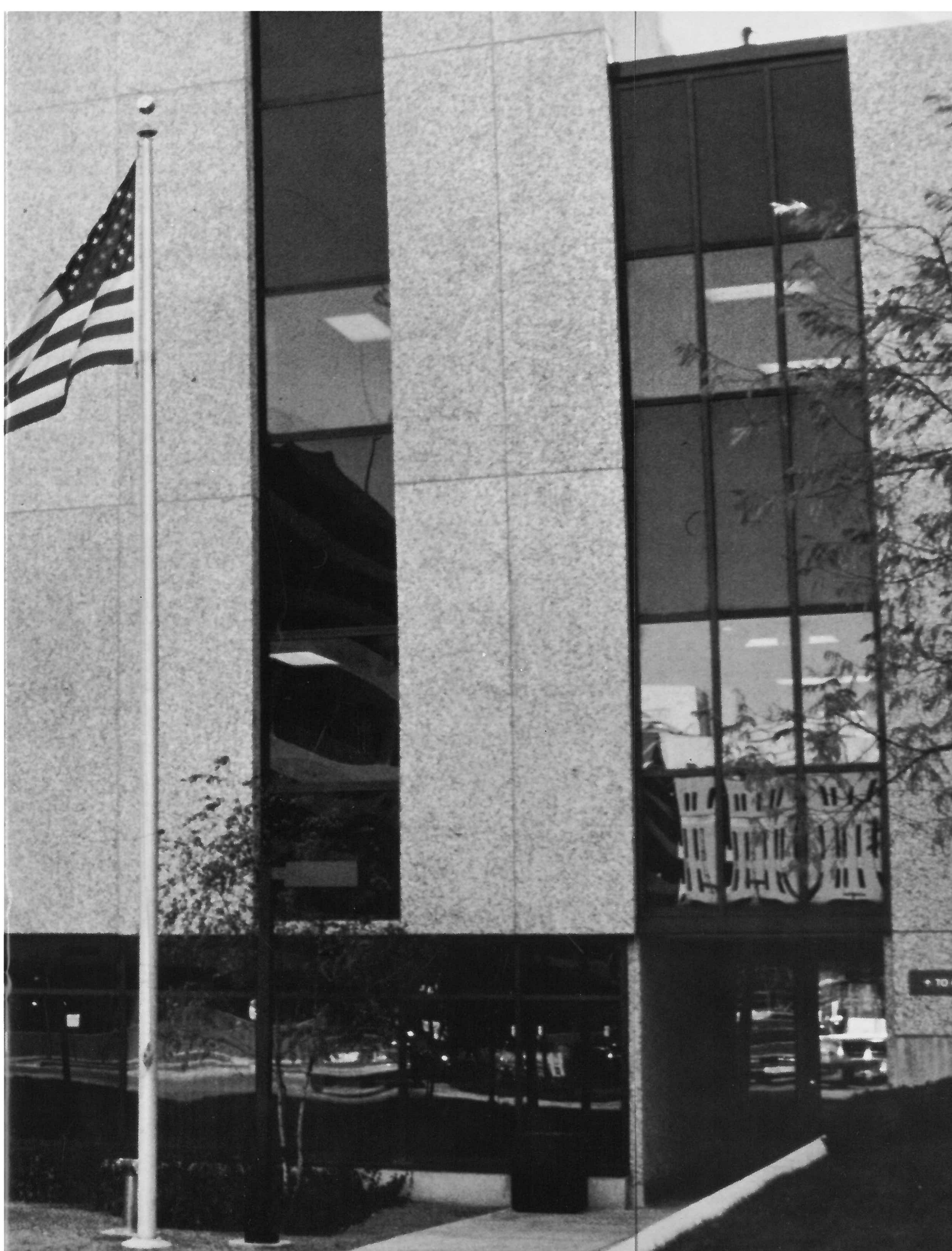


A N N U A L
R E P O R T

M I L W A U K E E , W I S C O N S I N

St. Luke's Hospital
In the forefront . . .





St. Luke's Hospital In the forefront . .



1982 was a good year for St. Luke's Hospital. Significant increases, both in inpatient admissions and outpatient diagnostic and treatment services, occurred during the year. Productivity increases were obtained in many hospital departments, and the medical/dental staff achieved savings through a shorter length of stay at a time that the hospital case mix became more complex. The combination of more volume and better productivity allowed the hospital to raise its prices a modest 4.3% for 1983.

The cardiac care areas continued their growth and development. The number of open heart surgical cases increased to 1,722 for the year. Exciting developments continued in the use of angioplasty as a substitute for surgery for some patients, and our cardiologists are evaluating the use of streptokinase for the treatment of heart attack victims.

Oncology services continued their steady growth and development. The Schroeder Pavilion has allowed for gains in the outpatient multidisciplinary treatment of cancer. Additional inpatient beds were assigned to the oncology service as the demand for that unit continued to grow.

Changes in both federal reimbursement for Medicare and in state rate control for other patients may provide a more difficult economic environment for the hospital in the future. St. Luke's Hospital should benefit to the extent that prospective payment schemes accurately reflect the intensity of our case mix. However, there are serious concerns whether the costs associated with our teaching mission for doctors, nurses, and allied health professionals will be adequately recognized under the suggested changes. St. Luke's has consistently strived to provide excellent care, not just average care. One of our challenges will be to assure that our goal of excellence is not compromised through poorly thought out reimbursement methods.

The Franklin Medical Center is beginning to be developed. Rezoning of our property has been accomplished. The Franklin Medical Center has begun its community health programs in Franklin. A contract has been signed with the city to provide medical assistance to the Board of Health, and our cooperative efforts with the fire department continue. In all respects the Franklin community has been most helpful in assisting the medical center to get started.

G. Edwin Howe

G. Edwin Howe
President



... in cardiac care





... in cardiac care

St. Luke's Hospital established its pre-eminence in the field of cardiology when St. Luke's surgeons performed Wisconsin's first heart transplant in 1968. Since then, St. Luke's has continued as an international leader in bypass and valve replacement surgery. Today, St. Luke's is in the forefront exploring new ways to prevent and treat heart disease.

St. Luke's is one of the nation's three leading angioplasty centers, a new procedure for the treatment of coronary artery disease. Until recently, if a patient had an obstruction of one of the arteries which supplies blood to the heart muscle, the situation had to be corrected with bypass surgery. Today, with the advent of angioplasty, surgery is no longer required for all patients.

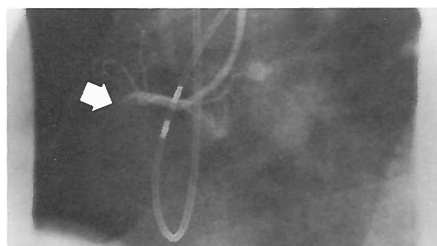
During angioplasty, the physician inserts a catheter—a thin, flexible tube—through a blood vessel into the obstructed coronary artery. A second catheter with a small balloon near its tip is introduced through the first catheter and inflated at the site where the blood flow is restricted by a fatty deposit in the wall of the artery. The pressure of the balloon on the vessel wall compresses the fatty deposit, opens the artery, and restores the blood flow.

Angioplasty is able to be used on five to ten percent of patients who would have been candi-

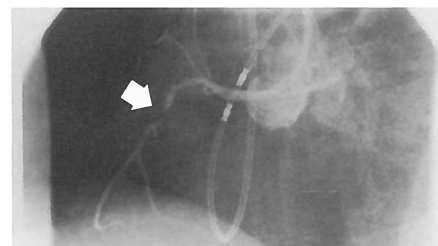
dates for bypass surgery. The site of the obstruction and other factors determine which patients are candidates for angioplasty, but for those who are able to utilize this procedure, there are several benefits. It does not require major surgery using a heart-lung machine and anesthetic, nor a long hospital stay. It is much less expensive than open heart surgery. Angioplasty is also being used successfully to open obstructed arteries in the leg, kidney, abdomen and other sites.

St. Luke's is investigating other innovative methods of treating coronary disease as well, including the use of streptokinase. If a patient is experiencing a heart attack due to a blood clot obstructing a narrowed coronary artery, streptokinase can be infused through a catheter to dissolve the clot and minimize heart muscle damage. The effectiveness of this procedure is still being investigated, but it is research such as this that will lead to new advances in the treatment of coronary artery disease.

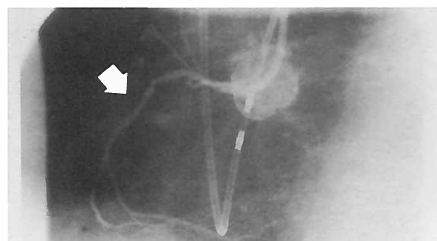
As part of its commitment to research and progressive cardiac care, St. Luke's Hospital maintains the midwest's largest cardiac data registry. The registry follows the progress of heart patients over time and enables physicians to determine effective treatment and other cardiac care implications.



1



2



3

- 1) Right coronary artery is completely closed. No blood is able to flow past blockage.
- 2) After streptokinase is infused, the artery is reopened, and blood flow returned. The narrowing of the artery is still evident.
- 3) After angioplasty, the balloon catheter has opened the narrowing of the artery, and full blood flow has been restored to the heart.



Hank Bardenhagen

"I couldn't tie my shoe or walk across the room without terrible chest pain. I didn't think I'd live. My grandfather, my father, and my mother all died of heart attacks. I thought it was inevitable that I would, too. I'd begun to give up."

Hank Bardenhagen, a manufacturing representative from Racine, described himself as he was one year ago. It's hard to believe when you see him today: a robust 39-year-old with a football player's build, rosy cheeks, and a quick smile.

Hank first noticed the chest pain while on a ski trip in January 1982. Eventually his wife, Kathy, convinced him to see their family physician.

Hank was asked to take a stress test. After one minute on the exercise bike, he was in severe pain. It was a serious heart problem. He was referred to a cardiologist and scheduled for a cardiac catheterization.

The catheterization revealed extensive obstruction of both coronary arteries: 90% and 70% blockages in the right artery, and 70% in the left. Hank was fortunate to be diagnosed before having a heart attack. It looked like he might be a good candidate for angioplasty, a new procedure to correct blockage of the coronary arteries (see article on adjacent page).

His physician in Racine told him Milwaukee's St. Luke's Hospital was one of the nation's leading centers for angioplasty,

and referred him to a cardiologist on staff at the hospital.

"The night before the procedure, I was scared. The doctor had been great about explaining everything, but I was still frightened. All the people involved were terrific. They answered all my questions, and anticipated questions I hadn't even asked yet. Although I was still apprehensive, I knew everyone would do what was in my best interest."

Hank was taken to the Circulatory Dynamics Department where the angioplasty was to take place. "I was awake through the whole procedure, but too scared to be interested for the first half. Then two things happened which made me relax. First, the procedure was successful on the major blockage on the right side. Then, the surgeon who was on stand-by in case I needed bypass surgery, stopped in to let us know he was available. My doctor said, 'Don't bother waiting, we won't be needing you.'"

Tears still come to Hank's eyes as he relates his story. "I offered my prayers of thanks, and from there on felt complete confidence."

The procedure was successful, and almost complete circulation was restored to both coronary arteries. The next afternoon Hank went home.

Six months later, follow up testing confirmed that Hank's heart was doing fine. Today, one year after the angioplasty, Hank's working hard, and plays racquetball and takes exercise classes. He spends much of his free time talking to other patients who have coronary artery disease. "I'm telling them that there's hope; that if I got through it, so can they."



... in cancer care







. . . in cancer care

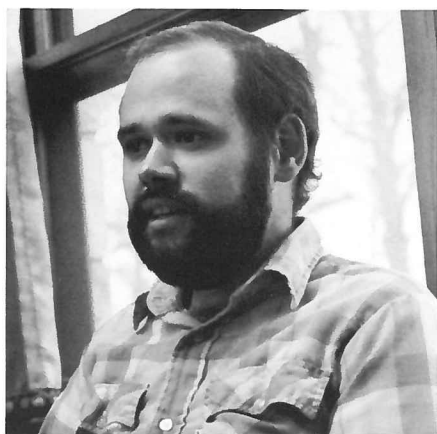
Cancer is a disease unlike many others. The very word frightens most people: it connotes the unknown and unpredictable. It may affect every aspect of a patient's life: their health, self image, family, friends, career and future. At St. Luke's, staff members work to help patients live each day to the fullest, and to cope with the problems associated with cancer, whether they're social, physical, psychological, financial or logistical.

A special team approach involves medical personnel from several disciplines in the care of each patient. The team consists of nurses and physicians who are cancer specialists, a physical therapist, occupational therapist, pharmacist, dietician, visiting nurse, chaplain, outpatient oncology and radiation therapy staff members, social service workers, and other specialists when needed. Twice weekly the team meets to review each patient's medical treatment and discuss the personal needs of the patient and his family.

Each cancer patient has a primary nurse who coordinates his care and gets to know his personal needs and situation. Having one nurse primarily responsible for each patient ensures continuity of care, and gives the patient someone special they can depend upon as a confidant and a responsible medical professional.

A full spectrum of cancer treatment is available for patients at St. Luke's on both an outpatient and inpatient basis. The provision of surgery, chemotherapy, and radiation therapy ensures patients will receive integrated, comprehensive cancer care.

St. Luke's plays a vital role in the advancement of cancer treatment in the Milwaukee area. Through the Cancer Lectureship Series, funded by a donation from the Security Savings and Loan Association, world renowned cancer specialists come to St. Luke's to speak on the latest advances in cancer care. St. Luke's is in the forefront of cancer care and education.



Father Terry

It was July 14, 1981. Father Terry had an ear infection, but that was nothing new. He'd had them since he was eight years old. Reluctantly, he decided to see his doctor.

The doctor checked his ears and was about to send him on his way when, at the last minute, Father Terry asked him to check a lump he had noticed below one ear. "The doctor said that nine times out of ten he would have said 'let's wait and see what happens to it.' But something told him I should have a blood test. . .

"... After the test, the doctor's nurse called to say he wanted to speak with me. I thought maybe he needed my insurance numbers. But when he broke out of surgery to take my call, I decided it had to be something important. He told me I had acute leukemia."

Father Terry was referred to a cancer specialist and immediately hospitalized. "That first night I felt that it was unreal. That they would take another blood test and find out that it was a mistake. By the time they had taken the bone marrow tests I began to believe this was serious stuff. But the thing I'll never forget about that first night was that Jeannie and Marsha were assigned as my primary nurses. I've been in lots of hospitals because of my ear problems, but having these two as my primary nurses was a tremendous benefit. They really spent an awful lot of time with

me. The thing about the first night was that when it was late, Jeannie brought her cup of coffee and sat down in my room. She said, 'I've got to stay up to-night because I work third shift, and I know you're not going to sleep tonight, so let's talk.' And for all the questions I had, she had the answers. She was so honest with me. The nurses know so much about the procedures that I always felt very well informed. The staff really took my symptoms seriously. Everyone's support and honesty really helped me."

Father Terry was in the hospital for almost one half year receiving chemotherapy, and he is now continuing his treatment as an outpatient.

Acute lymphocytic leukemia is considered one of the more treatable types of cancer. But at thirty years of age, Father Terry faces an uncertain future. His doctor says he'll need to be on treatment indefinitely. His is a more complicated case than most.

"Since finding out about the cancer, my priorities in life have really changed: those things which might have bothered me before, don't . . . my family has become very close, we really appreciate each other for who we are . . . it really unified the people of my parish, they pulled together in their concern for me . . . it's allowed me to deal with other cancer patients, and to understand their pain. The most important insight is to realize who's really in control of our lives. As much as we might think we can control what's going to happen in the future, God has his part. He's going to play whether we want Him to or not. We must see death not as an end of life, but as a natural part of life. We must learn to trust in God."



... in outpatient care







... in outpatient

No one enjoys being hospitalized, so St. Luke's is helping you stay out of the hospital whenever possible.

Outpatient services provide the highest quality of care conveniently, efficiently, and economically.

Many surgical procedures can be done on a one day basis through the Same Day Surgery program. A short visit a few days before surgery allows patients to complete their lab work, history, and physical while becoming familiar with the Same Day Surgery process. On the day of surgery, the patient arrives two hours before they're scheduled for surgery. Generally, four or five hours after their surgery is completed, they're ready to go home.

Same Day Surgery is becoming a well accepted alternative to inpatient surgery. Over the past year, the number of surgical procedures through this program at St. Luke's has increased from 764 to 1,276.

Same Day Surgery not only reduces the cost and inconvenience of surgery, it also minimizes the anxiety associated with hospitalization. This is especially important to children and their parents.

St. Luke's Emergency Department is open 24 hours a day to people with urgent illness or injury. Patients requiring routine outpatient care are seen through the St. Luke's Diagnostic and Treatment Center, or referred to the St. Luke's Family Practice Center.

Testing, treatment, and rehabilitation are all conveniently available on an outpatient basis. Comprehensive pulmonary, cardiac, and physical rehabilitation programs help patients remain at home while they work to regain or develop their health and strength.

New technology has made it possible to provide many tests and treatments, which previously required hospitalization, available on an outpatient basis. The recent purchase of a digital vascular imaging unit has made it possible for patients to receive outpatient angiography. This x-ray study to visualize arteries following injection of dye, used to require several days in the hospital, and was a more complicated, risky procedure.

Through outpatient programs, people are saving money and time, while still receiving the high quality care for which St. Luke's is known.



Katrina Coffey

6:30 a.m. . . . Four year old Katrina Coffey, with her parents and her doll, Mary Lou, arrive at St. Luke's Hospital. Katrina is scheduled for surgery through the Same Day Surgery program. It's a relatively minor procedure, but ordinarily she might have been admitted to the hospital overnight. Because of the Same Day Surgery program, she'll go home the same day she has the surgery.

6:35 a.m. . . . Katrina greets the staff like old friends. She's been in the day before with her mother to complete her lab work and history and physical. During her visit yesterday, she learned all about what to expect today.

With her mother and father at her side, Katrina plays while she awaits her surgery. The nurse gives her pre-operative medication. She's happy and playful—the staff is friendly and reassuring to both Katrina and her parents.

7:45 a.m. . . . The nurse from surgery comes to take Katrina to the operating room. Mary Lou, Katrina's doll, gets to go with her. The nurse ties a surgical mask on Mary Lou and explains to Katrina that all of the people in surgery wear this kind of mask.

Mom and Dad will wait in a room just down the corridor until Katrina returns from surgery.

A few tears are shed; Katrina doesn't like the separation.

8:00 a.m. . . . Katrina is anesthetized and small teflon tubes are inserted into her ears. She's had several ear infections recently and this should help.

8:30 a.m. . . . Katrina's surgery is all done, and she is taken to the recovery room. A half hour later she returns to her bed in the Same Day Surgery area. The staff wants to watch her for an hour or so to make sure everything is ok. She's sleepy but cheerful. She's glad to see Mom and Dad again.

10:30 a.m. . . . Katrina's been visiting with her roommate. Her mother and father have an opportunity to ask questions of the staff and to review with them how to care for her at home this afternoon. Katrina is discharged.

10:45 a.m. . . . Mom and Dad drive Katrina home, and they bring her pillow and blanket down to the living room couch. She eats several pudding popsicles while watching television. Before long she's up playing checkers with her brother and taunting him with riddles.

The next day . . . Katrina's about to take a bath and remembers that the nurses told her she has to take special precautions against getting water in her ears. She tells her mom, "I have to take these little cotton balls and dip them in gasoline then put them in my ears." "No, no," corrects her mother, "that's vaseline!"

If Katrina, or her brothers or sisters, have to have surgery again, Mrs. Coffey says she hopes it will be through St. Luke's Same Day Surgery program. "It gave me such peace of mind, being able to go there, get it done, and take Katrina home. She wasn't scared. The people were so friendly, and they explained everything step by step. I'd use Same Day Surgery again because I don't like to leave my children at the hospital if I can help it."



Government Hidden Tax

Each private pay patient will pay an average of about \$820 each time they are admitted to make up for the government not paying the full price of care for patients over 65 and for the medical needy. The government reimburses St. Luke's for only a portion, about 71%, of what is required to care for Medicare and Medicaid patients. Since almost 50% of St. Luke's patients are on Medicare, the deficit for 1983 will be approximately \$18 million. Private pay patients will have to make up this difference.

Source of Funds

Income from patient services	\$121,935,211
Coffee shop, gift shop, cafeteria, and other income	1,774,751
*Donations	399,141
Investment income	658,884
	<u>\$124,767,987</u>

*In addition, \$368,548 were received as designated gifts for education, research, and endowment.

Less Medicare, Medicaid, other allowances, and the inability of some patients to pay their billing in full	17,495,558
	<u>\$107,272,429</u>

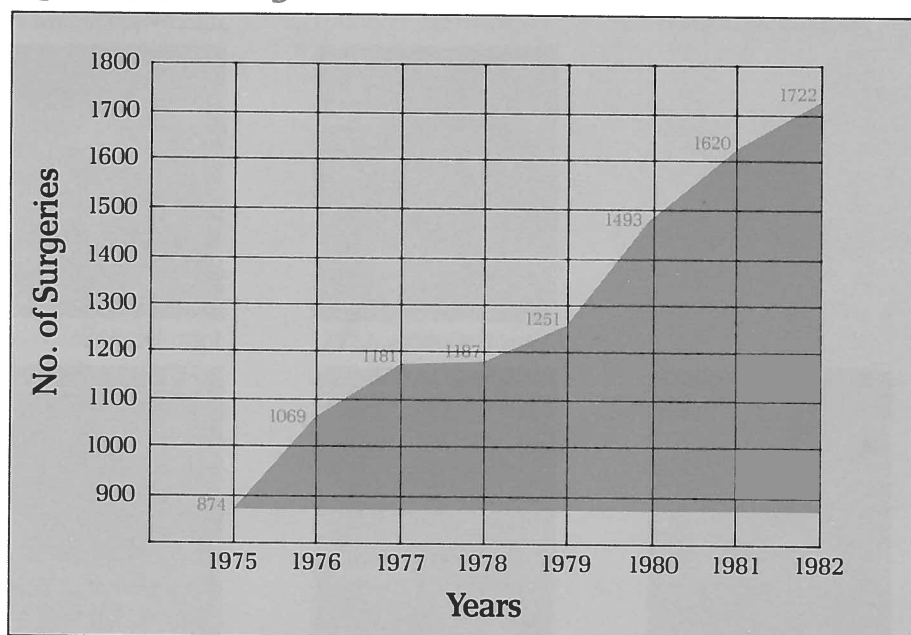
Use of Funds

Wages, salaries, fees, and fringe benefits	\$ 66,325,628
Medical and surgical supplies	17,318,832
Laundry, linen, housekeeping, and general supplies	6,425,197
Food and dietary supplies	1,633,260
Fuel, water, electricity, and telephone	2,936,735
Interest on indebtedness	2,553,091
Payment on long-term indebtedness	2,146,000
New equipment and construction in progress	6,057,391
Increase in receivables, inventories, etc.	1,876,295
	<u>\$107,272,429</u>

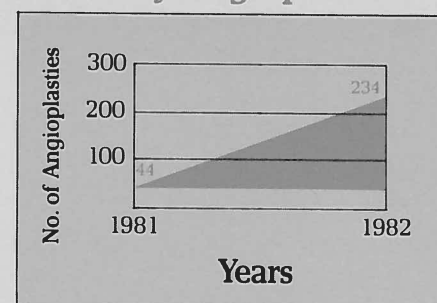
Statistics and Patient Services

	1982	1981
Inpatient Admissions	18,047	17,325
Outpatient Visits	96,029	92,018
Emergency Visits	38,989	43,917
Family Practice Visits	12,332	12,291
Average Length of Stay	9.7	9.9
Surgical Procedures	8,924	8,399
Open Heart Surgery Procedures .	1,722	1,620
Coronary Angioplasty	234	44
Radiotherapy Visits	8,226	6,362
Cardiac Catheterizations	3,023	2,847
Kidney Dialysis Treatments	4,389	4,681

Open Heart Surgeries



Coronary Angioplasties



During 1982, St. Luke's Hospital performed a total of 1,956 corrective procedures for patients with obstructive coronary artery disease. Of these procedures, 1,722 were bypass surgery, and 234 were angioplasty procedures.

St. Luke's is one of the busiest heart centers in the world and during 1982, performed more than three times the number of corrective coronary artery disease procedures than were performed at any other Wisconsin hospital.

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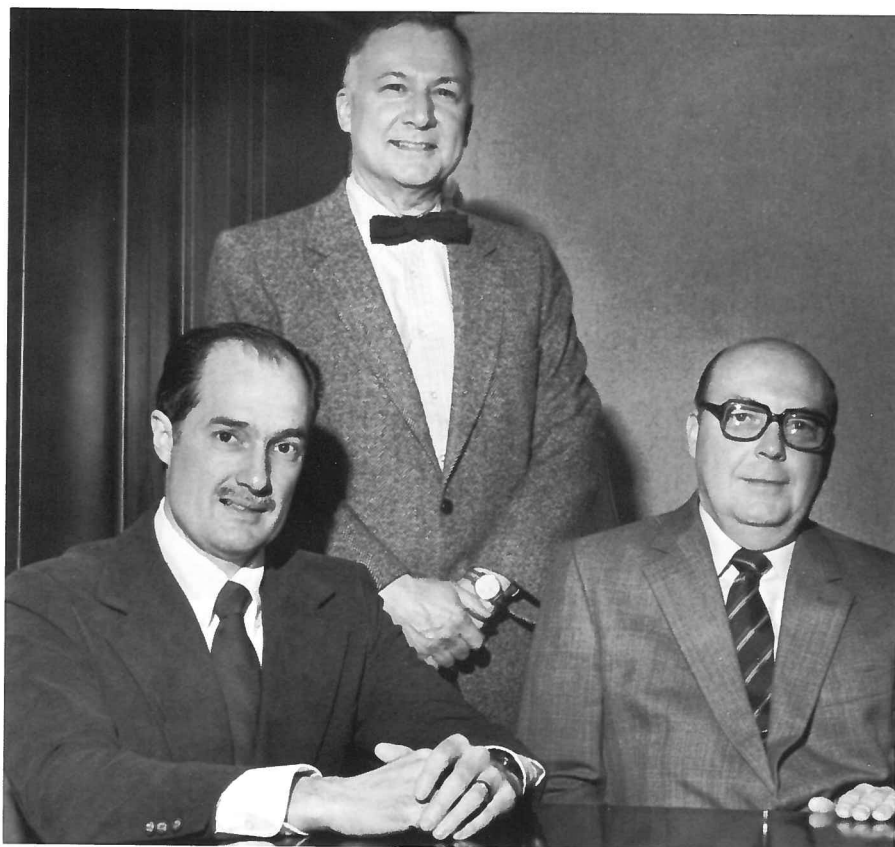
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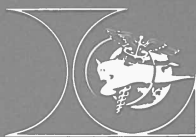
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