2010 Annual Report Delivering **Excellence** Every Day



2010 Reflections of Excellence

NorthShore University HealthSystem (NorthShore) takes great pride in the honors and accolades we've achieved in the past year, because they represent our dedication to and genuine effort in serving our patients.

Our commitment to excellence attracts outstanding physicians and staff who share our passion for continuous improvement. It also attracts research funding from industry and government. This year, among comprehensive independent research hospitals, NorthShore ranked No. 10 in the nation and No. 1 in Illinois in funding from the National Institutes of Health (NIH).

Following are some of the awards we've received for finding better ways to care for our patients, for improving the technology that supports our physicians and caregivers, and for showing the strong leadership that today's healthcare environment demands.

Patient Care

John M. Eisenberg Patient Safety and Quality Award

This award, from the National Quality Forum and The Joint Commission, recognized our methicillin-resistant Staphylococcus aureus (MRSA) Reduction Program and our national leadership in attacking this serious threat to patient safety.

Beacon Award

For its high performance, innovation and exceptional patient care, NorthShore Highland Park Hospital's Intensive Care Unit (ICU) received the American Association of Critical Care Nurses (AACN) Beacon Award—one of only 66 ICUs recognized with this honor.



Breast Center Accreditation

NorthShore's Breast Health Program was the first in the Chicago area to be granted this respected status by the National Accreditation Program for Breast Centers.

NorthShore Highland Park Hospital Stroke Certification

NorthShore Highland Park Hospital earned the Gold Seal of Approval[™] from The Joint Commission for Primary Stroke Centers, receiving certification as a Primary Stroke Center in April.



Technology

HIMSS Stage 7 Award

The Healthcare Information and Management Systems Society (HIMSS) scores hospitals on their progress in completing eight stages (0-7) of electronic medical records adoption, with the goal of reaching Stage 7: an environment where paper charts are no longer used. We were one of just two healthcare systems in the nation to earn the HIMSS Analytics Stage 7 Award for going paperless.

100 Most Wired Hospitals

NorthShore was ranked in the Most Wired Survey and Benchmarking study for the sixth consecutive year by *Hospitals & Health Networks*. NorthShore has also been named one of the Most Wireless hospitals, which includes Evanston, Glenbrook, Highland Park and Skokie Hospitals.

Overall Leadership

100 Top Hospitals/15 Top Major Teaching Hospitals

For an unprecedented 14 times, NorthShore has ranked among the best in this Thomson Reuters study. NorthShore is the only hospital system nationwide to ever have achieved this consistency of performance.

The study centers around the 100 Top Hospitals Balanced Scorecard, which includes clinical, financial and operational metrics. According to Thomson Reuters, "Winning a 100 Top Hospitals award indicates highly effective performance across the entire organization, including board members, management, medical staff and nursing."

Leapfrog Top Hospitals List

For the third consecutive year, NorthShore Highland Park Hospital has been named a top national hospital by this industry group. It is one of only two hospitals in Illinois and 33 nation-wide to receive this honor.

The Leapfrog Hospital Survey compares hospitals on measures of quality (including mortality rates for certain common procedures, infection rates and safety practices) and measures of efficiency.

"This year's class of Top Hospitals not only hits the mark in areas such as medication error prevention and preventing ICU deaths, but they also use their resources wisely, providing excellent and efficient outcomes for patients," said Leapfrog Group CEO Leah Binder. "Regardless of what happens to healthcare reform, these hospitals are the future."



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2009 Gold Medal Award

Mark R. Neaman, NorthShore President and CEO, received the 2009 Gold Medal Award from the American College of Healthcare Executives (ACHE).

Top Leadership Teams in Healthcare Award

The NorthShore Medical Group was recognized by Health Leaders Media for its transformation over the past decade into a thriving, high performance, nationally recognized multispecialty group practice.



Magnet Status

All four NorthShore hospitals achieved prestigious Magnet status from the American Nurses Credentialing Center, and NorthShore is the first hospital system in Illinois to receive this distinction. The Magnet designation represents the highest available honor for nursing excellence. The Magnet Recognition Program is based on five model components—transformational leadership, structural empowerment, exemplary professional practice, new knowledge, innovation and improvements, and empirical quality results.

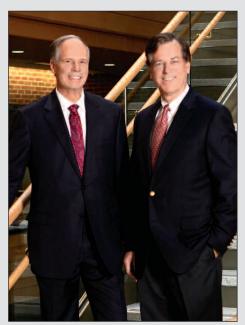
Workforce Chicago Award

NorthShore received this prestigious award from the Council for Adult and Experiential Learning, recognizing our establishment of superior employee development and learning strategies in the workplace.

We are Committed to Delivering Excellence Every Day

When NorthShore University HealthSystem (NorthShore) decided in 2002 to implement one of the nation's first fully integrated electronic medical records systems, we knew we had the opportunity for creating better and more efficient medical care. Today, we have realized that opportunity as our patients benefit from having their complete clinical information instantly accessible to all members of their care team. More than 100,000 patients enjoy the convenience of NorthShore*Connect*, which allows them to schedule appointments, order prescription refills and communicate with their physicians through a secure online portal.

It's one thing to lead the way; staying at the front of the line requires perseverance. Today, NorthShore is committed to becoming a leader in research informatics in addition to clinical informatics, mining the massive amounts of data in our system to make discoveries about quality improvement, clinical outcomes and the comparative effectiveness of different treatments.



Mark R. Neaman (left) and Harry M. Jansen Kraemer Jr.

This shows our continued commitment to excellence—bringing together highly skilled and deeply compassionate physicians and staff, and using the latest in medical and information technology to provide the best of care.

This past year we completed our academic transition and became the principal teaching affiliate of the University of Chicago Pritzker School of Medicine. Our attending physicians hold faculty appointments at the University, and its medical students, residents and fellows undertake part of their training at NorthShore hospitals. These learners give the experience the highest ratings—including the special opportunity to train at our Simulation Lab, one of only a few such facilities in the country.

The Chicago Institute of Neurosurgery and Neuroresearch (CINN) merged into the NorthShore family, bringing 15 outstanding specialists to the NorthShore Neurological Institute. Our nursing program earned the coveted Magnet Status, the first health system in Illinois to do so and granted to only 6 percent of hospitals in the U.S. And we're proud to once again be named one of the 100 Top Hospitals and 15 Top Major Teaching Hospitals by Thomson Reuters—the only institution in the country to achieve this honor 14 times.

NorthShore remains in a good position to help drive improvements in healthcare. Our physicians, nurses, hospital staff, management and information systems team work as one integrated unit, with the strength and flexibility to respond to the challenges of a very tough economy and a changing regulatory environment. We were fortunate to achieve another record financial year, with revenue growth to \$1.6 billion.

Most importantly, we continue to innovate, seeking not just current "best practices" but to define the "next" practices that will become the standard of care in the future. Some of those will emerge from our medical informatics efforts. Perhaps others will come out of our new molecular medicine program, which is translating scientific discoveries in this emerging field into real benefits for patients.

At NorthShore, we remain optimistic about the future, and we are rededicating ourselves to the patients and families we are so privileged to serve.

Harry M. Jansen Kraemer Jr. Chairman of the Board NorthShore University HealthSystem

Mark R. Learn an

Mark R. Neaman President and Chief Executive Officer NorthShore University HealthSystem

Excellence in Oncology Knowledge is Power for Family with Genetic Risk for Breast Cancer



At 19, self-described planner Sivan Kredow Schondorf's future was unfolding. A career as a speech pathologist and marriage lay ahead. She could not have predicted, however, her aunt dying of breast cancer and its implications for her and the rest of her family.

Schondorf, now 29, and her mother, Ziva Green-Kredow, of Highland Park, were devastated when their beloved aunt and sister succumbed to breast cancer 10 years ago at age 49. It was Green-Kredow's obstetrician/gynecologist, NorthShore University HealthSystem (NorthShore) affiliated physician Robert LaPata, MD, who suggested both women consider genetic counseling and testing for the BRCA1/BRCA2 gene mutation at NorthShore's Center for Medical Genetics. Having a sister/aunt who had tested positive for the gene mutation, who died from the disease and being of Ashkenazi (Eastern European) Jewish ancestry put them at high risk for also carrying BRCA1/BRCA2, which increases the likelihood of developing breast and ovarian cancer—87 percent and 40 percent, respectively.

"Dr. LaPata changed our destinies," said Green-Kredow, who at 39 had a risk-reducing mastectomy with removal of her ovaries and fallopian tubes after testing positive for BRCA1.

Barely 20, Schondorf wasn't ready to face those difficult decisions. She moved to Los Angeles after college, remaining diligent about breast self exams. She enrolled in a clinical surveillance study, getting regular mammograms and breast MRIs. Schondorf and her mother volunteered with the advocacy group FORCE (Facing Our Risk of Cancer Empowered).

Schondorf wanted to take steps to prevent even developing breast cancer. At age 23, "I wanted to be a 'pre-vivor,' not a survivor" she said of her decision to test for the BRCA1 gene mutation, which, was positive. Despite many physicians in LA, she returned home in 2009 for a procedure called "risk-reducing, one-step, nipple-sparing mastectomy with reconstruction" performed by David J. Winchester, MD, and Geoffrey Fenner, MD, at NorthShore Evanston Hospital.

"There has been a dramatic shift in knowledge over the last 10 years in determining an individual's risk for developing breast and ovarian cancer, and it is enabling women to

Just months after her prophylactic bilateral mastectomy, 28-year old Sivan Kredow Schondorf, pictured with her husband Mark, walked down the aisle in a strapless wedding gown filled with the joy of the day and strengthened by the knowledge that she was starting her new life with a lower risk for developing breast cancer.



Schondorf (facing page) with plastic and reconstructive surgeon Dr. Geoffrey Fenner (center) and NorthShore General Surgery and Surgical Oncology Division Chief Dr. David J. Winchester

Life-Saving Information

Of the more than 192,000 women in the U.S. who are diagnosed with breast cancer annually, about 5 to 10 percent have a hereditary form of the disease through BRCA1/BRCA2 gene mutation. This makes them more susceptible to developing breast or ovarian cancer. Previous generations of

younger women didn't know



Dr. Wendy Rubinstein, Director, NorthShore's Center for Medical Genetics

this mutation existed, but advances in genetic research have given some women the power of information.

"Although it can be difficult to face this issue, the lifesaving options for finding out one's BRCA1/BRCA2 status far outweigh not knowing," said Wendy Rubinstein, MD, PhD, Director, NorthShore's Center for Medical Genetics and on faculty at the University of Chicago Pritzker School of Medicine. "Genetic counseling helps make decisions based on knowledge. We empower patients to make their own best, medically sound decisions."

proactively control their risk," said Dr. Winchester, Chief of NorthShore's Division of General Surgery and Surgical Oncology and Board of Directors/David P. Winchester, MD, Chair of Surgical Oncology and on faculty at the University of Chicago Pritzker School of Medicine.

Unlike a total mastectomy, which removes breast tissue, nipples and areola, leaving much visible scarring, in this procedure a surgeon makes the incision under the breast (which can help conceal scars), removing the tissue but preserving the nipple and areola. Next, a plastic surgeon restores the original contour of the breast through silicone implants. NorthShore is one of only a few institutions in the nation offering the procedure. The risk reduction is substantial, well over 90 percent, similar to a total mastectomy. Patients undergoing this surgery at NorthShore have the option of participating in a clinical trial to examine the procedure's long-term safety, aesthetic and quality-of-life outcomes.

"This procedure spares a patient from undergoing two separate surgeries," said Dr. Fenner, a NorthShore-affiliated plastic and reconstructive surgeon. "It's uplifting for the patient, psychologically, to come out of surgery still feeling whole."

Excellence in Cardiology Clinical Trial Paves the Way for New Standard of Care

By participating in the pivotal North American PARTNER trial and undergoing aortic heart valve replacement with NorthShore University HealthSystem (NorthShore) Cardiac Catheterization Laboratory Director Ted Feldman, MD, James Vaughan essentially agreed to live to the age of 100.

At 95 and going stronger than ever following a transcatheter procedure in May, Vaughan, who swims laps six days a week (skipping Sunday morning for church) and walks at a brisk pace concealing his age, is looking forward to reaching the centennial mark.

Dr. Feldman, an internationally recognized expert in the growing area of catheter-based therapies for heart disease and the Mr. and Mrs. Charles R. Walgreen, Jr. Chair of Cardiology, is thrilled with Vaughan's approach and zest for life, and believes he has a good chance of reaching the next milestone birthday.

As one of just 22 sites in the country involved in the PARTNER (Placement of AoRtic traNscathetER valves) trial, NorthShore is at the forefront of this leading-edge technology that allows physicians to treat aortic stenosis—heart disease characterized by calcification and narrowing of the valve without traditional open heart surgery, which is often too risky for some elderly patients.

The PARTNER trial was designed specifically to study non-surgical valve replacement in older patients, and elderly individuals with other health complications, that would preclude them from open heart surgery. Offering a less invasive option for valve replacement gives a whole new group of patients an option for treatment when they previously had none.

Aortic stenosis is a progressive disease where symptoms accelerate and begin to take a greater toll on patients' quality of life, as well as limiting their lifespan, said Dr. Feldman. That was definitely the case for Vaughan, who was getting so winded he had to give up his swimming and would tire in just a few steps of walking.

"They told me I had a 50/50 chance of surviving even a year without this procedure," said Vaughan, who was referred to NorthShore by his Milwaukee cardiologist. Vaughan and his 92-year-old wife are engaged in a variety of activities at their Mequon, Wi. retirement community. "I think I am doing pretty well," he said. "I read the *New York Times* every day and I find enough active things to do to stay busy."

Dr. Feldman has been treating heart disease patients with earlier catheter balloon therapies since the mid-eighties and continues to be gratified and energized by the growing potential to not only extend life, but to offer real improvements in quality of life for so many.

The PARTNER trial is truly a team effort, and even the name reflects the collaborative efforts of the interventional cardiologist and the cardiac surgeon, said Dr. Feldman, who is joined by NorthShore cardiothoracic surgeon John C. Alexander, MD. Drs. Feldman and Alexander, both on faculty at the University of Chicago Pritzker School of Medicine, lead a team of more than 50 physicians, nurses and other healthcare professionals involved in this trial including key players in anesthesiology, echocardiography and cardiac imaging.

"This is a spectacular device, and I think it has huge promise not only for this currently untreatable population, but for a more traditional patient base as well," said Dr. Alexander.

Anesthesiologist Jesse Marymont, MD, who is also intimately involved in the trial, and on faculty at the University of Chicago Pritzker School of Medicine, is pleased to see that NorthShore has positioned itself as a leader in this area of interventional cardiology. "Hopefully these options we are studying today will be the standard of care in ten years," said Dr. Marymont. "There is no question as we learn more about the durability of this device we will be able to treat and benefit younger patients as well," Dr. Feldman said.

While this particular catheter-based therapy is already approved in Europe, it is still pending in the United States where results of the first stage of the trial were just released. In the randomized trial patients treated with the new heart valve had much better survival and significantly fewer repeat hospitalizations compared to those treated with regular medicines or simple balloon treatment.

"I hope the FDA hurries up with its approval of this so it can be extended to other people like me who can enjoy the benefits of longer, healthier lives," Vaughan said.

PARTNER Trial patient James Vaughan with interventional cardiologist Dr. Ted Feldman (center) and cardiothoracic surgeon Dr. John C. Alexander (facing page)

Excellence in Neurology Expertise and Teamwork Save a Life

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Joyce Hefter literally gets tears in her eyes when she talks about the NorthShore University HealthSystem (NorthShore) Neurological Institute team of physicians who "gave me my life back."

Hefter, 63 and recently retired, does indeed have much to be grateful for as she has made a full recovery after suffering the effects of a rare and quite large tumor on her spinal cord that did progressive damage, but went undetected until Hefter saw NorthShore neurologist David Randall, DO, a neuromuscular specialist on faculty at the University of Chicago Pritzker School of Medicine.

In January 2008, Hefter went bowling with friends and noticed that her hands were swollen to the point that they did not fit into the ball. Thinking it must be arthritis, Hefter, who had generally enjoyed good health, waited a few months before calling her internist. In the meantime, she also noticed some swelling in her legs, but again tried to dismiss what she assumed was not a big deal.

The swelling continued, and the pain began to increase. Over the course of the next two years, Hefter saw physicians including a rheumatologist who did various tests and were unable to find the cause of her growing pain. She lost feeling in her feet and no longer was able to drive; she lost movement ability in her hands to the point that making a sandwich was an arduous task. Life as she knew it was slipping away, and Hefter was in nearly constant pain.

Finally, a co-worker suggested she see Dr. Randall, and suddenly there was a light at the end of a very dark tunnel. "Dr. Randall and his nurse spent more than an hour and a half with me at that first visit," Hefter recalled. Both Hefter and her husband marveled at the thorough history taken by nurse Cheryl Szarabajka, RN, BSN, and the careful and compassionate exam by Dr. Randall who understood the severity of her problem and immediately ordered an MRI.

"I could tell she had a compression on her spinal cord," Dr. Randall said. "She was able to describe her symptoms in great detail and the physical exam revealed abnormalities including changes in reflexes and sensory loss more pronounced on one side of the body than the other."

"We were concerned right away, and Cheryl made one call to set up an MRI," Dr. Randall said. "The beauty of a system like NorthShore is that we were able to get the imaging done quickly and get the results equally fast." What the MRI exposed was a very large tumor on Hefter's cervical spine, which was

Joyce Hefter (left) with neuromuscular expert Dr. David Randall and nurse Cheryl Szarabajka. (facing page)

crushing her spinal cord. "It's actually remarkable she was doing as well as she was with that tumor."

As soon as Dr. Randall saw the MRI he was on the phone to NorthShore Neurological Institute (NNI) neurosurgeon Dean Karahalios, MD, an expert in spinal surgery. "I knew she needed the right neurosurgeon and she needed attention right away," Dr. Randall said. Yet another benefit of the NorthShore system, according to both Dr. Randall and Dr. Karahalios, is the collaboration between experts in various disciplines, as well as expertise throughout the team including sub-specialized, highly trained radiologiate.

trained radiologists.

Dr. Karahalios looked at the MRI and agreed that there was no time to waste and scheduled Hefter's surgery within days. "He told us it was a very complicated surgery, but he also told us he does these extremely complicated procedures all the time," Hefter said. "I liked him immediately and was confident." She also had high praise for



Neurosurgeon Dr. Dean Karahalios

Barbara Pusateri, RN, Dr. Karahalios' nurse who helped her every step of the way before and after the operation.

Without surgery, the tumor would have continued to grow, and ultimately Hefter would have lost the ability to walk. The surgery took more than five hours as Dr. Karahalios removed the large benign mass and then rebuilt each individual spinal segment using small, specialized plates and screws to recreate the correct spinal anatomy and preserve Hefter's full range of mobility and function.

"It's a rather rare procedure to do this kind of spinal reconstruction, but we do a fair number of them," Dr. Karahalios said. "It is a painstaking operation that takes a lot of very meticulous work."

"I feel wonderful now, they gave me my life back," Hefter said. "It's like a miracle."

Excellence in Orthopaedics Advanced Technique and Technology Return Dedicated Cop to Full Strength

Richard Gigante suffered a seriously damaging hip injury while breaking down a door in a SWAT team training exercise. Fortunately, the minimally invasive surgery to repair the destruction was far less traumatic.

A veteran police officer and member of a regional Emergency Services Team special tactical squad, Gigante has always pushed himself to the limit, training and working out to maintain peak physical performance. He did not intend to let an accident change that, but six days after the training incident, Gigante was having trouble getting out of a chair.

Referred to NorthShore University HealthSystem (NorthShore) orthopaedic surgeon Jason L. Koh, MD, Gigante was pleased with Dr. Koh's conservative approach and recommendation to try physical therapy in an effort to avoid surgery.

"We knew he had damage around the hip joint. The initial exam was consistent with a labrum (the tissue surrounding the hip socket) tear and inflammation around the hip joint," said Dr. Koh. "We started with physical therapy and he made some improvement initially, but then it became clear he was not going to be able to go back to knocking down doors with his hip in that condition."

An expert in minimally invasive arthroscopic surgery, Dr. Koh suggested arthroscopy to repair Gigante's damaged hip. "My goal is to keep patients active and pain free," explained Dr. Koh, who is on faculty at the University of Chicago Pritzker School of Medicine.

Thanks to significant advances in imaging around the hip as well as advanced technology and technique related to arthroscopy, Dr. Koh was confident he could successfully repair Gigante's hip without the significant pain and protracted recovery that follows traditional joint surgery. Less than 24 hours after surgery, Gigante was walking around his neighborhood and planning his aggressive schedule to get back to full strength. "Dr. Koh is awesome. I owe everything to him; he did an unbelievable job," Gigante said.

Using instruments about the size of a pencil, an incision is made and a scope connected to a high-definition camera is carefully inserted into the joint in hip arthroscopy. The surgeon can then see inside the joint during surgery and get a dynamic and real-time picture of what's happening, Dr. Koh explained. Long, thin instruments only a few millimeters in diameter are then used to shave off a precise amount of damaged tissue, which is then vacuumed out of the joint. "I've done literally hundreds of these procedures," Dr. Koh said. "While it is technically a pretty challenging operation, it is usually done in an hour or less and typically is an outpatient procedure."

His partnership with "world-class imaging experts" at NorthShore has allowed Dr. Koh to perform these advanced procedures and to collaborate on research aimed at identifying and treating early hip arthritis, perhaps before symptoms even emerge.

Martin Lazarus, MD, a NorthShore diagnostic radiologist, teams up with Dr. Koh on advancing today's procedures and broadening future possibilities. "We have a musculoskeletal radiology section here at NorthShore and we are experts in this area," said Dr. Lazarus, who is on faculty at the University of Chicago Pritzker School of Medicine. "We do a great number of these procedures and have the experience to provide a very specific road map before surgery and a detailed picture of the joint. The outstanding, state-of-the-art equipment here allows us to take imaging a step further and see things you couldn't possibly see with less advanced equipment."

With the technology in radiology "exploding" and the collaborative work with orthopaedic experts like Dr. Koh, there are tremendous opportunities for powerful research and clinical improvements, said Dr. Lazarus, who also serves as the team radiologist for the Chicago Bears.

From helping patients like Gigante get back to full force to returning others to an active life that involves playing with grandchildren, Dr. Koh, who is the team physician for the Chicago Fire and has been co-medical director of the Joffrey Ballet and a consultant to the Chicago Cubs, agrees with Dr. Lazarus.

"I'm happy we can do things that allow patients to push their limits and reach their full potential," Dr. Koh said.

Richard Gigante (from left) orthopaedic surgeon Dr. Jason Koh and musculoskeletal radiologist Dr. Martin Lazarus (facing page)



Excellence in Collaboration University of Chicago Partnership Helps Teen Heal



Tori Weinstein appears to be an average 16-year-old high school student—if your average student is exceptionally bright, attractive, poised for her age and successfully dealing with a rather aggressive case of Crohn's disease.

The already petite Stevenson High School junior started losing weight last September, and initially doctors thought perhaps she had a virus. As the situation worsened and Tori was virtually unable to eat, they began to suspect Crohn's.

Referred to NorthShore University HealthSystem (NorthShore) affiliated pediatric gastroenterologist Suzanne Nelson, MD, Tori began the battle of managing her chronic disease with a course of steroids and diet restrictions.

Her mother, Sheri Weinstein, had a good idea of what they were facing, as Sheri's sister also had Crohn's. Nevertheless, mother and daughter share a very positive attitude.

"At one point I told her, 'I bet this is what you have, but we'll deal with it, and we'll be fine,'" Sheri said. An acute attack in January led Tori to the Emergency Department at Highland Park Hospital, where they initially suspected appendicitis. It looked like surgery could be the next step, so they were given a choice of transferring to NorthShore Evanston Hospital or Children's Memorial Hospital in Chicago. In Sheri's mind there was no choice; she wanted Tori where family and friends could easily visit her.

NorthShore Evanston Hospital is now an option for pediatric surgery thanks to a recent joint effort by the University of Chicago Medical Center and NorthShore to create a comprehensive pediatric and pediatric surgical services program, including inpatient, outpatient and ER consultations. On-call general pediatric surgery coverage is provided by University of Chicago physicians 24 hours a day, 7 days a week, explained Sarah Woodrum, NorthShore Medical Group Vice President. "Patients now have access to the University of Chicago Medical Center's world-class surgeons while remaining closer to home, and Tori obviously benefited from this partnership," Woodrum said.

As soon as Tori and her parents, Sheri and Bob, met University of Chicago pediatric surgeon Grace Mak, MD, they knew they were in good hands. Dr. Mak and Dr. Nelson collaborated with each other and the Weinsteins as they developed a treatment plan involving nutritional support, immunosuppressive medications and antibiotics to reduce the considerable inflammation in her small and large intestine.

"Her Crohn's was pretty extensive—throughout her stomach, small intestine, colon and rectum—and we wanted to treat her as conservatively as possible, treating her medically at first, but knowing surgery would be the next step," said Dr. Mak.

While Tori initially responded well to antibiotics and steroids, her Crohn's continued to worsen and with both doctors' guidance, the Weinsteins decided it was time for surgery in March.

Having spent time in Evanston Hospital following her last attack, Tori was completely comfortable the morning of the surgery. "It was like seeing family. When we walked in before surgery every nurse we saw gave us a hug," Sheri said. "It was definitely comforting to get that kind of reception."

Dr. Mak performed the surgery with laparoscopic assistance, making one larger and several small incisions on the belly, and thoroughly inspecting every inch of Tori's GI tract and beyond to ensure that she removed enough of the diseased intestine. About five centimeters of her terminial ileum (or end of the small intestine) and three centimeters of right colon were removed, and then Dr. Mak sewed together the remaining, healthy intestine. One of the biggest goals in this kind of surgery, especially for a teenage patient, Dr. Mak said, is to preserve as much of the intestine as possible.

"You hope by removing the inflamed segment you remove the center of disease and what's causing her difficulty in eating," said Dr. Mak. "And you hope you can control the rest of the disease with medication and without further surgery."

"She's really recovered beautifully from the surgery and hopefully her medication will prevent her from having a flare-up," Dr. Nelson said. "She should be able to lead a totally normal life, to do whatever she wants." "I am living a normal life," Tori said emphatically.

From Tori and Sheri's perspective nothing could be better. "I feel very lucky that we got the doctors we got, and equally lucky with the nursing staff," Sheri said.

Tori Weinstein with pediatric gastroenterologist Dr. Suzanne Nelson (center) and pediatric surgeon Dr. Grace Mak (facing page)

Excellence in Innovation Clinical Research Center Develops New Treatment Options

Amy Maxwell, 35, can quickly list the treatments—and dermatologists—she has tried since being diagnosed with psoriasis at age 12.

A chronic, autoimmune disease, psoriasis causes visible red patches or lesions as well as layers of flaky, dead skin. Aside from the physical discomfort and pain of psoriasis, Maxwell, a retail manager, has experienced the embarrassment of "shedding" dry skin in public and wearing long-sleeved shirts during hot weather to cover the lesions on her arms. "I wanted to be free of this disease that took a hold of my life," she said.

Maxwell's discomfort turned to relief after being referred four years ago to NorthShore University HealthSystem (NorthShore) dermatologist Kenneth B. Gordon, MD. He enrolled her in a clinical trial, of which he is a principal investigator, for a promising drug to effectively manage psoriasis. Clinical trials are healthcare-based research studies that allow patients, through their approved participation, access to new treatments before they are widely available. The medications are often new and may hold risks for some patients. The clinical trials process determines the risks and benefits of a drug before it is approved or rejected by the U.S. Food and Drug Administration. Clinical trials often are a last hope for patients who have run out of options.

For Maxwell, her involvement in the drug trial at NorthShore has kept her psoriasis under control, with no visible signs of the disease and little discomfort. The drug being researched, ustekinumab, recently gained FDA approval and can be prescribed by physicians under the name Stelara[™].

NorthShore established its Clinical Research Center (CRC) in 2010 to help more patients like Maxwell while hastening effective new drugs and therapies to the general public. Dr. Gordon, head of NorthShore's Division of Dermatology and on faculty at the University of Chicago Pritzker School of Medicine, is the CRC's medical director. The Center strengthens NorthShore's flourishing clinical trials program, enabling it to expand its participation into even more studies, and it supports physicians pursuing this important area of research. NorthShore's awardwinning electronic medical record (EMR) system and its Center for Clinical Research Informatics will support early identification of study participants. "Since the 1920s when NorthShore physician Louis Sauer developed the whooping cough vaccine, NorthShore has maintained a strong track record for supporting research into new cures and treatments for disease and illness," said Leopold G. Selker, PhD, President, NorthShore Research Institute. NorthShore houses approximately 1,000 active clinical trial studies, focusing on a range of conditions, including cancer, neurologic disorders and stroke, cardiovascular disorders, dermatologic issues, pediatric and gynecologic conditions as well as major clinical trial programs in advanced imaging and medical genetics.

"Clinical research at NorthShore makes a difference for all of our patients," said Dr. Gordon. "Amy received a medication that was not available anywhere else. The drug is now approved and helping others. Physicians involved in clinical trials gain experience with new treatments and the latest technologies, expertise that is then passed along to patients."

Located at NorthShore Evanston Hospital, the Clinical Research Center has both dedicated exam and inpatient rooms to accommodate individuals enrolled in clinical trials. Maureen Kelly, RN, the Center's research coordinator, oversees patient care and safety while providing administrative expertise and guidance to physicians interested in pursuing clinical research.

For patient safety and the integrity of research, clinical trials are highly regulated by the FDA, which requires that all institutions conducting or supporting biomedical research with human subjects have an Institutional Review Board (IRB). NorthShore and the University of Chicago's IRBs have reciprocity to facilitate collaboration and provide greater access to patients.

"The research into new drugs that's being done at NorthShore is amazing," said Maxwell. "My life would be totally different if I had not been able to participate in this clinical trial."

Amy Maxwell, Dr. Kenneth Gordon and research coordinator Maureen Kelly (facing page)



Bears Care Supports Promising Ovarian Cancer Research

Gustavo Rodriguez, MD, is dedicated to unlocking the mysteries of ovarian cancer; thanks to the continued support of generous donors, his innovative research is leading the way.

For more than 10 years, NorthShore University HealthSystem (NorthShore) patient Kathy Kocian volunteered with Bears Care, the charitable organization of the Chicago Bears. While working on a Gala event in 2004 to raise funds for breast and ovarian cancer research, Kocian herself was diagnosed with advanced ovarian cancer.

The Kenilworth resident began treatment with Dr. Rodriguez, Director of NorthShore's Division of Gynecologic Oncology and Matthews Family Chair of Gynecologic Oncology Research. Kocian's determination to fight the disease went beyond herself. She introduced her doctor to Bears Care and backed his efforts to obtain funding for his research. "She made calls and made the connection happen," said Dr. Rodriguez.

Kocian died in August of 2008 at age 68, four years after she was diagnosed. Since 2007, Dr. Rodriguez has received annual grants from Bears Care totaling \$260,000 for his promising research to develop an oral contraceptive progestin treatment as an effective prevention strategy against ovarian cancer.

Dr. Rodriguez, a clinical Associate Professor in the Department of Obstetrics and Gynecology at the University of Chicago Pritzker School of Medicine, has not forgotten his patient Kathy Kocian. "Kathy was delightful," he recalled. "It broke my heart when I learned she chaired the Bears Care Gala and worked so hard to be a champion of ovarian cancer research only to be stricken by it herself."

"Kathy displayed an amazing strength and attitude during her illness," said Marge Hamm, Director of Bears Care. "She had great faith in her doctor and knew he would do his best to offer her the best possible outcome."

Hamm said Bears Care knew of Dr. Rodriguez's work because of his national reputation and his ability to bring his research in the lab to the patient's bedside. "We're thrilled to support his research, which is so close to bringing women a way to prevent gynecologic cancers."

Dr. Rodriguez believes his research results bode well for the future. "I think we'll be able to prevent most ovarian cancers from happening at all," he added. Clinical trials are underway that support his discovery that taking oral contraceptive pills containing potent progestins for as little as 18 months lowered ovarian cancer risk in study participants by 60 to 70 percent.

The progestins act to "cleanse" and dispose of genetically damaged ovarian surface cells that have begun to transform into cancer cells. Vitamin D and Omega-3 fatty

Bears Care Director Marge Hamm and Dr. Gustavo Rodriguez (facing page)

acids provide similar results so his testing is concentrating on a combination of those agents for ovarian cancer prevention. Researchers think that the agents being studied in humans and animals also could be used to prevent endometrial cancer, and possibly breast and colon cancer.

The research is so promising that NorthShore now has a Clinical Gynecologic Cancer Prevention Program in the works for at-risk women. Dr. Rodriguez also has secured funding from the National Institutes of Health (NIH) and the Department of Defense, a reflection of his far-reaching success.

Marvin Kocian, the widower of Kathy Kocian, said he was especially touched when Dr. Rodriguez stopped by their home to see Kathy in her final days. "When Kathy died, we asked our friends and family to support Dr. Rodriguez's work instead of sending flowers. We were able to raise \$35,000 for his research. Anything my family can do to help eliminate this dreaded disease, a quiet killer, is what we'll do," said Kocian.

Besides being a beneficiary of Bears Care funding, NorthShore is also the official healthcare partner of the Chicago Bears. NorthShore and the Bears also collaborate on "Real Bears Fans Wear Pink," a community outreach initiative involving a T-shirt sale to raise money for breast cancer awareness, and support for care and assistance to breast cancer patients and their families.

NorthShore Official Healthcare Partner of Chicago Bears, Blackhawks



Chicago Blackhawks center Colin Fraser (left) and Blackhawks right wing Troy Brouwer delivered toys and visited patients and families at NorthShore Evanston Hospital last December. As the official healthcare sponsor of the Chicago Blackhawks, NorthShore has also made a long-term commitment to work in concert with the team on a number of community-based initiatives.

Susan Harris Memorial Fund A Legacy of Caring

Memorial gifts honoring the love and memory of those lost to cancer are always a meaningful tribute, but the tremendous outpouring of support in Susan Harris' honor has made a real impact for those who continue to battle the disease.

While being treated for breast cancer at NorthShore University HealthSystem's (NorthShore) Kellogg Cancer Center, Susan Harris brought her own headset so she could listen to her personal music tapes during surgery. She also found great strength and relaxation in meditation. Neither of those coping methods is unusual today, but in the mid-1990s Harris was ahead of the times in how she dealt with cancer.

When Harris, "Susie" to family and friends, died in 1995 at age 46, her loved ones launched the Susan Harris Memorial Fund to raise funds for supportive care, now recognized as a critical component of quality cancer care. In 1998, the family created the Psychosocial Oncology Program at Kellogg Cancer Center. In the past 12 years, the Fund has raised nearly \$787,000—all in honor of a mother, wife, sister and friend.

Under the Program, cancer patients and their families receive free services at Kellogg locations at NorthShore's

Psychologist Dr. Tina Gremore (left) and Marcy Simon

Evanston, Glenbrook and Highland Park Hospitals to help them manage their emotional and practical needs. The services include an assessment for all new patients starting chemotherapy, ongoing support throughout treatments, psychotherapy, referrals to community resources, crisis intervention, and assistance with financial concerns, advanced care planning and bereavement counseling and support.

"She'd be so proud," said Marcy Simon of her sister's legacy, which continues to help others facing cancer 15 years later. "I miss Susie every day, but this program is fantastic, and it's one good thing that allows us to continue to honor her memory. Susie looked at her disease as a glitch. She smiled and never complained and she would not tolerate 'gloom and doom' looks on any of our faces. I remember a few weeks before she passed away she said, 'I think I'm scared,' but overall she just wasn't stressed in her cancer journey, maybe because she knew how to use these tools to face her fears and worries."

As Kellogg's patient population continues to grow now about 265 patients a day at all three sites—so does the demand for the Psychosocial Oncology Program.

NorthShore psychologist Tina Gremore, Ph.D., who was awarded the Susan Harris Memorial Fund post-doctoral fellowship from 2008-2009, currently uses that training to see cancer patients of all ages who need help with a variety of support issues. Another piece of the funding for the program comes from The Auxiliary at Evanston & Glenbrook Hospitals, which raises funds for the Guided Patient Support (GPS) Program at Kellogg. The GPS Program provides cancer patients with a nurse navigator dedicated to their total care, and helps to support the salaries of members of the Kellogg psychosocial team.

"We meet with patients at their first chemo appointment to assess how they are coping and to provide information regarding supportive resources," explained Dr. Gremore, Health Psychologist at the NorthShore Kellogg Cancer Center and the Department of Psychiatry and Behavioral Sciences, and Clinical Assistant Professor at the University of Chicago Pritzker School of Medicine. "We talk with patients about coping resources in general, in addition to focusing on specific issues, such as how to talk to their children about their cancer. We are also available for emotional support when patients are going through challenging times," said Dr. Gremore.

"What I hear from patients all the time is: 'Really, this is a free service?' I'm privileged to tell them the services are funded through philanthropy, which in large part is due to the generosity of the Susan Harris family. I'm grateful for the opportunity we have as psychosocial providers to offer support to people who may not seek these services otherwise."

"What I hear from patients all the time is: 'Really, this is a free service?' I'm privileged to tell them the services are **funded through philanthropy**, which in large part is due to the generosity of the Susan Harris family.

Volunteer Leadership Delivers Philanthropic Excellence

For the last seven years, Julie Stone has had a hand in making life better for the community and patients at NorthShore Highland Park Hospital.

The past president and current fundraising chair of The Auxiliary of NorthShore at Highland Park Hospital helped raise \$400,000 for the Hospital's Primary Stroke Center, \$1 million for a new Ambulatory Care Center, and has hosted the Saks Fifth Avenue annual charity shopping fundraiser called "Key to the Cure," which benefits NorthShore University HealthSystem (NorthShore) Kellogg Cancer Center at NorthShore Highland Park Hospital.

But Stone and The Auxiliary's efforts don't end there. In the last 18 months, Stone and Auxiliary volunteers have been raising funds for Be Well-Lake County, a diabetes prevention, education and treatment program that benefits the underserved in Lake County. To date, the partnership with the Lake County Health Department and Community Health Center has treated more than 325 patients, and provided 130 referrals to NorthShore specialists to address the complications that often accompany untreated diabetes, such as heart, kidney and vision conditions. Another 90 patients have enrolled in Be Well diabetes management classes that teach patients new healthy eating habits and ways to manage their disease.

"To me, I love the idea of promoting wellness and being proactive to try to help prevent diabetes instead of being reactive," said Stone. "With Be Well, we've found that patients' families benefit too, so we're touching more lives and promoting a healthy lifestyle to hopefully prevent diabetes in future generations."

"I like knowing I can have an impact and can help improve the community," said Stone. "This is where my family and friends go to get the best medical care."

Stone believes philanthropic support is vital to evolve as an innovative healthcare system. "If you don't have philanthropy and volunteers, services become compromised. I like to see tangible and concrete improvements, and we have that at NorthShore Highland Park Hospital."

For more information about volunteering, contact The NorthShore Auxiliaries at (847) 570-5095.

The Auxiliary of NorthShore at Highland Park Hospital Fundraising Chair Julie Stone



for patients and their families.



Another year of excellence is reflected in the NorthShore University HealthSystem (NorthShore) financial statements for fiscal year 2010 despite the challenging economic environment.

Record operating earnings were achieved while NorthShore also increased its contributions for free and discounted care for those in need and provided a significant increase in resources dedicated to community benefits. During 2010, NorthShore also achieved many worthy accomplishments, some of which are described throughout this annual report, including the expansion of our neurological services with the acquisition of a top-rated neurosurgery practice completed last December.

The accompanying unaudited financial statements provide the consolidated financial position and operating results for our most recent fiscal years. Total revenue in fiscal year 2010 grew to a record \$1.6 billion. Revenue growth was 4 percent and was modest relative to our historic growth, but comparably strong in the context of our local and regional economy. These results were achieved across our integrated HealthSystem that now includes four acute-care Hospitals with more than 900 licensed hospital beds; a large and growing multi-specialty physician group practice with more than 650 physicians; a Home and Hospice service line; a Research Institute with more than \$100 million of external research funding; and a Foundation actively engaged in raising friends and funds to support our mission.

Further progress was made enhancing the capabilities of the NorthShore Medical Group. The Medical Group generated more than \$300 million of annual revenue with 260,000 unique patients seen this past year across a broad range of specialties and primary care. Along with NorthShore's affiliated physicians there are now approximately 2,400 physicians on staff meeting the needs of our patients.

With seven years of experience with our electronic medical record systems (EMR) completed, we continue to invest in enhancing this technology, staying ahead of the curve and offering meaningful benefits to our patients—more than 100,000 patients now use NorthShoreConnect to directly communicate with their physicians, schedule services and receive results in a secure environment. These investments not only benefit our patients and physicians, but also enable efficiencies as seen this year where expenses grew at a lesser rate than revenues.

We also improved our already strong capital structure by converting one-third of outstanding debt to fixed rates of interest and eliminated all derivative exposures. These capital structure changes reduced some risks and eliminated others and will benefit NorthShore for years to come. Our balance sheet is strong with \$1.4 billion of cash and investments the equivalent of 330 days cash on hand—while our borrowings are a relatively low 22 percent of total capitalization.

As was the case at this time last year, we expect next year to be another strong year for NorthShore. Our integrated HealthSystem with strong alignment between our physicians and Hospitals, supported by our industry-leading technology and dedicated management team is well positioned to continue to thrive as we face the many challenges ahead.

Dary & Wen

Gary E. Weiss Executive Vice President and Chief Financial Officer

NorthShore University HealthSystem

Consolidated Balance Sheets

Assets	2010*	2009
Current assets:		
Cash and cash equivalents	\$ 52,793	\$ 24,331
Internally designated investments, current portion	47,327	51,621
Patient accounts receivable, net of allowances	193,789	212,981
Inventories, prepaid expenses and other	58,090	56,490
Collateral under securities lending program	52,389	83,721
Total current assets	404,388	429,144
Investments available for general use	1,123,331	1,010,525
Investments limited as to use:		
Internally designated for capital replacement and other	152,950	144,319
Investments under securities lending program	51,078	81,656
Total investments limited as to use	204,028	225,975
Other assets:		
Property and equipment, net	845,483	788,497
Other assets	151,255	62,829
Total other assets	996,738	851,326
Total assets	\$2,728,485	\$2,516,970
Liabilities and Net Assets Current liabilities:		
Accounts payable and accrued expenses	\$ 248,680	\$ 244,246
Payable under securities lending program	52,389	\$ 244,240 85,229
Estimated settlements due to third-party payors	59,020	69,472
Current maturities of long-term debt	9,713	5,700
Total current liabilities	369,802	404,647
Non-current liabilities:		
Long-term debt, less current maturities	394,055	280,800
Other	409,641	388,221
Total non-current liabilities	803,696	669,021
Net assets:		
Unrestricted	1,398,959	1,296,422
Temporarily and permanently restricted	156,028	146,880
Total net assets	1,554,987	1,443,302
Total liabilities and net assets	\$2,728,485	\$2,516,970

*Unaudited

NorthShore University HealthSystem

Consolidated Statements of Operations

For the Years Ended September 30

(\$ in Thousands)

	2010*	2009
Unrestricted revenues and other support:		
Net patient service and premium revenue	\$1,469,936	\$1,404,820
Net assets released from restrictions used for current activities	11,554	10,046
Other revenue	81,615	81,715
Total unrestricted revenues and other support	1,563,105	1,496,581
Operating expenses:		
Salaries and benefits	771,908	724,591
Supplies and services	547,678	519,851
Depreciation and amortization	108,040	95,618
Insurance	28,365	54,286
Provision for uncollectible accounts	40,630	63,820
Interest expense	9,098	7,299
Total operating expenses	1,505,719	1,465,465
Income from operations	\$ 57,386	\$ 31,116
Operating margin percentage	3.7%	2.1%

Vital Signs

For the Years Ended September 30

	2010*	2009
Hospital cases (including births)	62,276	60,372
Occupancy percentage	77%	76%
Average length of stay (in days)	4.5	4.5
Emergency visits	118,884	116,063
Outpatient visits (excluding outpatient ER visits)	1,185,391	1,126,297
Philanthropy (\$ in millions)	\$ 17.4	\$ 12.6

The Lifetime Philanthropy Societies

The Legacy Society, Chairman's Society, Director's Society, President's Society and Patten Circle recognize cumulative lifetime giving. The lasting generosity of these important donors honors the vision of our leaders and allows us to continually strive for excellence. For this, we are grateful.

Gifts and Grants as of September 30, 2010

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We apologize if we have misspelled or omitted any of our donors' names. Please advise us of any error or omission by calling (224) 364-7223 so we may correct our records.

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(continued on next page)

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Vickie and Tim Burke at the 10th Anniversary Benefit Concert for NorthShore University HealthSystem's (NorthShore) Integrative Medicine Program, featuring a special performance by Billy Corgan. Proceeds from the event supported a pilot program at Evanston Hospital's Kellogg Cancer Center to help patients who might otherwise be unable to afford integrative therapies.

The 1891 Society

The 1891 Society, named for the year Evanston Hospital was founded, celebrates donors who have named NorthShore University HealthSystem as the beneficiary of a planned gift. Such gifts might include bequests, charitable gift annuities, retirement plan assets or gifts of life insurance.

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The Annual Societies

The Annual Philanthropic Societies allow us to recognize the generosity of donors who support our growth each year.

The Dr. Louis W. Sauer Society

This Society honors the memory of Dr. Louis W. Sauer, a renowned local physician who created the whooping cough vaccine, saving countless lives around the world.

Anonymous

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