YOUR HOSPITAL FOR life
LEADING OUR COMMUNITY TO BE THE HEALTHIEST IN THE NATION

Kim Barnhill, heart attack survivor
TALLAHASSEE MEMORIAL HEALTHCARE

2016 ANNUAL REPORT

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The 2016 Annual Report is produced by the Tallahassee Memorial Public Relations Department
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4 LEADERSHIP

TALLAHASSEE MEMORIAL HEALTHCARE

G. MARK O’BRYANT
President & Chief Executive Officer

SUSIE BUSCH-TRANSOU
Chair, Board of Directors

ANDREA FRIALL, MD
Chair, Medical Staff Executive Committee
REACHING BEYOND

Once we accept our limits, we go beyond them - Albert Einstein wasn’t referring to healthcare, but here at Tallahassee Memorial HealthCare (TMH) this speaks to us. As we strive to lead our community to be the healthiest in the nation, our focus as an organization shifted beyond our walls to reach members of our community in their neighborhoods, at their schools and while grocery shopping.

Our TMH FOR LIFE program noted its second year of success by introducing, educating and celebrating healthy lifestyles in our community. TMH FOR LIFE focuses on four quadrants on the road to improved health – Know Your Numbers, Eat Healthy, Be Active and Find Your Happy.

The innovative heart and vascular procedures, specialized cancer treatments and revolutionary neurosurgery available at TMH have allowed us to reach beyond Tallahassee, and even the Big Bend, to care for patients from across the Southeast looking for the very best care and research. TMH is now the only Comprehensive Stroke Center in North Florida, with life-saving interventional technology and the expert physicians needed to use it.

As an organization, we are also reaching beyond Tallahassee to develop relationships with other healthcare partners, including the continuation of our cancer affiliation with University of Florida Health, formerly known as UF&Shands, and a new affiliation for children’s services with Wolfson Children’s Hospital, based in Jacksonville. These relationships allow us to provide national clinical trials right here in Tallahassee and bridge a gap for pediatric specialty care in the region. In both cases, patients can stay close to home and receive exceptional care.

This growth is also apparent in the physical changes on our campus – specifically with the construction underway for the new M.T. Mustian Center. This five-story, 340,000 square foot facility will completely replace the current operating rooms and adult intensive care units located within Tallahassee Memorial Hospital. Instead, 28 state-of-the-art operating rooms, four interventional suites and 72 intensive care beds have been designed to accommodate the growing medical needs of our community and allow for even more Patient- and Family-Centered Care.

The focus of TMH will continue to be the health of our community.

The focus of TMH will continue to be the health of our community. Our commitment to healthcare does not end when a patient or visitor leaves our facilities, instead it reaches beyond our walls to where our neighbors are enjoying their lives – from the local park to their kitchen table.
COMMMITTED TO SERVING

1 SUSIE BUSCH-TRANSOU, Chair  2 ALMA B. LITTLES, MD, Chair-Elect  3 STEVE EVANS, Secretary  4 CHRISTOPHER RUMANA, MD, Treasurer  
5 MARTHA BARNETT  6 REV. BRANT S. COPELAND  7 ALBERTO FERNANDEZ, MD  8 FRANK GREDLER, MD  9 LEE HINKLE  10 WINSTON HOWELL
As a not-for-profit hospital founded by local civic leaders, Tallahassee Memorial’s mission has always been defined and driven by a desire to serve our community. Today, TMH continues to be guided by a volunteer Board of Directors who give their time to advance healthcare in the Big Bend by providing financial, administrative and quality-of-care oversight.

11 AVERY MCKNIGHT 12 RICK MOORE 13 ED MURRAY, JR 14 THOMAS TRUMAN, MD 15 GARY WINCHESTER, MD 16 ANDREW WONG, MD
17 ROGER CHAMPION, Ex-Officio 18 PATTI DOYAL, Ex-Officio 19 ANDREA FRIALL, MD, Ex-Officio 20 G. MARK O’BRYANT, President & CEO, TMH, Ex-Officio
A TASTE OF HEALTHY LIVING
Continuing to lead the community to be the healthiest in the nation, Tallahassee Memorial HealthCare just wrapped up its second year of community wellness initiatives with the TMH FOR LIFE program. Created as a way to engage the public to live healthier, TMH FOR LIFE focuses on four areas, or quadrants, on the road to improved health – Know Your Numbers, Eat Healthy, Be Active and Find Your Happy.

With the first year focusing on knowing your health numbers, this past year was all about educating the Big Bend community on how to eat healthy.

Many people in the region are suffering with chronic diseases like diabetes, high blood pressure, heart disease and cancer. Most risks for these diseases suggest they can be modified by a healthy diet, to prevent the onset and reduce the severity of illness.

The Eat Healthy quadrant, exactly what it says, offers resources, information and recipes to the Tallahassee community through free opportunities including community lectures, shopping cart makeovers, cooking contests, articles, videos and much more.

**SHOPPING CART TOURS**
As an effort to educate the community, TMH visited a local grocery store to show shoppers how they can easily makeover their shopping carts. The participants shopped to select various weekly staples. Once they had their regular items, the dietitian pointed out areas of concern in each product and shared suggestions for something similar, yet healthier.

**RECIPE VIDEOS**
Cooking at home is a regular occurrence in many households across the community. To help provide easy and healthy recipes for people to prepare at home, TMH created various quick and informative recipe videos for people to follow along in their own kitchen.

**MEAL MAKEOVERS**
With unlimited trends in the national news, TMH addressed the facts and fiction of each to share how people can eat healthier on a daily basis. Comparing everything from coconut oil to olive oil and almond milk to soy milk, the event offered helpful information in a classroom-style setting.

This TMH program will continue to grow and help people to eat healthy with the launch of a multi-store grocery tour to assist shoppers in making informed food decisions. The recipe videos will continue to expand to include seasonal dishes.

For recipes, tips and additional information about the TMH FOR LIFE program, please visit TMH.ORG/TMHFORLIFE.
“Your child has been in a bad accident, you need to come to the crash scene immediately.” It is every parent’s worst fear and the phone call that no one ever wants to receive.

When Denise Harrell gave eight-year-old Chevy Burdette a kiss on the forehead before he got on the bus for school that morning, she never expected to get a call 10 minutes later that a semi-truck hit it.

Denise and her husband, Scott, immediately rushed to the crash scene in Jackson County. Denise and Scott arrived at the crash site and left their car in the middle of the road, jumping out and sprinting to get to the crushed bus where they knew Chevy was inside.

“You never think it will be a scene like this, with two buses and a semi-truck collided and knowing your child is on that bus,” Denise said.

Scott rushed to an opening in the crumpled bus and immediately saw Chevy, who had been sitting in the back of the bus where the semi-truck had smashed. Chevy was incapable of escaping, his legs were pinned between the crushed floorboard and the bus seat. Scott helped hold up Chevy’s body, as the rest of the children were transported over his head and out of the back of the bus.
“I love you.” Chevy told Scott. “I love you too.” Scott said back, while still supporting his body. “No, Scott, I just need you to know I really love you, in case this is the last time I will be able to tell you,” the eight-year-old replied.

The front end of the truck was knocked out, the risk of fuel igniting was high and the first responders had to be extremely cautious using their tools to avoid starting a fire as they tried to cut Chevy out. He was the last child on the bus and the only one who was trapped. It took an hour and a half of extreme precision to help release Chevy from being pinned in the crushed bus. Immediately upon being freed, Chevy was transported via life flight to Tallahassee Memorial HealthCare.

Chevy was rushed directly into the Bixler Trauma & Emergency Center, where Eliot Sieloff, MD, FACS, general surgeon, and Kristina Dupler, ARNP, instantly started to stabilize Chevy and give him all necessary scans. His feet were purple and legs were crushed, there was a high chance his legs, feet and toes would all be amputated, on top of the chance he may not even survive. The first necessary step for the trauma team was to straighten out his legs to make sure he had blood flow.

“It was the hardest thing to have to look an eight-year-old little boy in the eye with crushed legs and tell him it’s going to hurt and you might scream when your legs get pulled out,” Kristina said with tears in her eyes.

The trauma team rushed Chevy next into the Pediatric Intensive Care Unit (PICU), where Chevy’s critical injuries were addressed. With a severe splenic laceration, he was at risk of bleeding to death. Thomas Truman, MD, pediatric critical care specialist, and the trauma team were all in the PICU tending to Chevy as a blood transfusion was conducted. Accompanying Chevy along the entire way, Child Life Specialist Olivia Burton kept talking with him to try to keep him at ease.

“We received nothing but phenomenal care from the moment we stepped foot into this hospital.”

“Am I going to live?” Chevy turned to ask Olivia. “Yes. We are going to get you through this,” she replied. “Tell Mama D (referring to Denise) I love her.” Chevy said as the blood was transfused through his body.

After his transfusion, Chevy was taken directly to the operating room where David Oberste, MD, orthopedic surgeon, was waiting to remove pieces of debris, rocks and road material from Chevy’s body. He had broken over 25 bones, many of which were crush injuries, including a broken eye socket, broken thumb, crushed legs and a pelvis fracture.

Once stabilized, Hank Hutchinson, MD, orthopedic surgeon and orthopedic trauma specialist, and Andrew Borom, MD, orthopedic surgeon and foot specialist, went to work putting wires in Chevy’s toes and started on his internal fixation. “There couldn’t have been a better person on call that day than Dr. Oberste given his background in the U.S. Airforce and his deployment on combat missions in Afghanistan with traumatic situations,” explained Dr. Borom.

Chevy was finally fully stabilized and admitted to the Children’s Center for the next 10 days. He considered himself lucky – not only did he survive the accident, but his legs and most of his toes were saved. Olivia, Child Life Specialist, and Chevy talked about all the famous football players who had lost toes too, which left a smile on his face.

Chevy is now home in a wheelchair as he recovers and goes to physical therapy at Tallahassee Memorial three times a week, which will eventually drop to twice and then just once per week.

Denise is so thankful to have Chevy back in her arms. “To see what could have been and where that day started to where we are now, I could not be more thankful of Tallahassee Memorial HealthCare. For all the bad that happened there has been 1,000 times more good. We received nothing but phenomenal care from the moment we stepped foot into this hospital.”
As a leader in the Southeast for advanced cardiovascular treatments and research, Tallahassee Memorial HealthCare is consistently on the cutting edge of medical care bringing new procedures and research trials to the North Florida area. Instead of patients leaving Tallahassee for advanced care, many are traveling from across the Southeast to TMH for highly specialized procedures performed by the skilled physicians on the TMH medical staff.

At the Tallahassee Memorial Heart & Vascular Center, the electrophysiology, interventional cardiology, heart failure, heart surgery, vascular surgery and structural heart programs, along with other specialty clinics, provide comprehensive cardiovascular care to patients.

**ELECTROPHYSIOLOGY**

Many understand cardiac electrophysiologists to be the “electricians” of the heart, meaning they diagnose and treat problems with a heart’s electrical system, or heart rhythm. TMH is home to one of the largest electrophysiology (EP) programs in the Southeast led by a team of experienced cardiac electrophysiologists. The EP program also includes the area’s only accredited Atrial Fibrillation (Afib) Clinic. This knowledgeable team provides medical management through their TMH Physician Partners clinic and offers advanced EP treatment options at TMH — including hybrid ablations, lead management and extractions, and a new procedure to reduce stroke risk in Afib patients. Farhat Khairallah, MD, FACC, electrophysiologist, and interventional cardiologist Dr. Wayne Batchelor placed the first WATCHMAN device in

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**FOLLOW YOUR HEART TO EXPERT CARE**

John Katopodis, MD

William Dixon, MD

Wayne Batchelor, MD, MHS
the Southeast since its Food and Drug Administration (FDA) approval in March 2015, making Tallahassee Memorial the third hospital in the country to commercially offer this treatment. The WATCHMAN device provides patients with non-valvular Afib an alternative to long-term anti-coagulation therapy (blood thinners such as warfarin) used to reduce the risk of stroke. Afib is a condition causing the upper chambers of the heart to beat too fast and irregularly. Patients with Afib have a five times greater risk of stroke. Once implanted, the WATCHMAN device keeps harmful blood clots from entering the blood stream from the left atrial appendage — the most common source for blood clots in Afib patients — reducing the risk of stroke.

INTERVENTIONAL CARDIOLOGY
Interventional cardiologists are often referred to as the "plumbers" in the area of cardiovascular care for their expert knowledge in "unclogging" arteries and veins. These specially trained physicians perform non-surgical procedures to treat cardiovascular disease — such as an angioplasty and placing a stent to restore blood flow in a blocked artery. Performed by William Dixon, MD, FACC, interventional cardiologist, and John Katopodis, MD, FACC, interventional cardiologist, TMH now offers Percutaneous Coronary Intervention (PCI) for Chronic Total Occlusions (CTO), or simply, a minimally invasive treatment for patients with completely blocked arteries who are not candidates for bypass surgery. This specialized CTO procedure is the most complex type of angioplasty. It is performed by developing an alternative path for blood flow within the wall of the artery to keep the treatment minimally invasive. Within the region, Tallahassee Memorial is the only hospital offering this procedure.

STRUCTURAL HEART
A collaboration of interventional cardiology and cardiothoracic surgery, the structural heart program is led by a multidisciplinary team of physician specialists who work jointly to evaluate patients and select the best treatment options for their individual needs. Wayne Batchelor, MD, MHS, FACC, FSCAI and Thomas Noel, MD, FACC make up the interventional cardiology component of the team. Julian Hurt, MD, Shafi Mohamed, MD and David Saint, MD complete the surgery team as cardiovascular and thoracic surgeons. Together, these physicians focus on offering innovative techniques and procedures for treating structural heart issues, such as replacing heart valves, for patients in the Southeast.

In 2012, the structural heart team performed the first Transcatheter Aortic Valve Replacement (TAVR). This is an innovative treatment option for patients in need of a new aortic valve due to aortic stenosis, but who do not qualify for open-heart surgery. Instead, the valve is replaced through a very small incision in the groin or in the anterior chest. This treatment allows physicians to replace the heart valve without opening the chest. TMH was the first non-teaching hospital in the State of Florida to successfully perform TAVR. In 2014, TMH became the second hospital in Florida to offer the MitraClip procedure for the treatment of mitral regurgitation, or “leaky valve,” in patients ineligible for open-heart surgery. These are just a few of the many ways treatment options at TMH are reaching new heights.
Delivering babies is just the beginning of a journey to help parents and newborns have the best start in life. At the Tallahassee Memorial Alexander D. Brickler MD, Women’s Pavilion, new practices are being implemented to help families build better bonds. It is part of Tallahassee Memorial HealthCare’s commitment to become the region’s first Baby-Friendly Hospital – a designation from the World Health Organization (WHO) and United Nations Children’s Fund (UNICEF). Less than 20 percent of facilities hold a Baby-Friendly designation, Tanya Evers, MD, obstetrician & gynecologist, pointed out, “It is a true mark of TMH’s commitment to Tallahassee and the surrounding communities that time and effort is being put forth for this initiative. The women who deliver at TMH will benefit in that the evidence-based standards that have been put in place will be maintained and mothers and babies will continue to be supported in an environment where education, bonding and lactation are the cornerstone of their care.”

The Women’s Pavilion is constantly pursuing quality improvement projects and asking the tough questions of where they can improve and develop strategies to obtain the highest quality of care possible for their patients. “If it is best for the patient, then we will always find a way to make it work,” said Connie Styons, RN, MSN, Administrator of Women’s and Children’s Services.

**DELAYED BATH**

When babies are welcomed into the world, they work quickly to adapt to their new environment from regulating their own body temperature to breathing on their own. The team at the Women’s Pavilion is committed to minimizing the stress placed on a baby. Healthy babies receive a towel rub after delivery instead of a traditional bath so the vernix, a white waxy substance covering a newborn’s skin, can remain to protect their
skin. This quick wipe down allows baby and mom spend time skin-to-skin comfortably. With the support of the specially trained labor & delivery nurses, babies are also latching to start the breastfeeding process in the delivery room.

“Studies suggest bathing too soon may overly stress the baby by decreasing its body temperature, promoting low blood sugars and, moreover, may actually decrease breastfeeding success by limiting the interaction of mother and baby in those first few crucial minutes to hours,” said Jim Ed Martin, MD, pediatrician and Chair of Pediatrics. In the meantime, this allows the baby and mom to practice skin-to-skin, which aids in bonding and breastfeeding.

Now, the first bath in the hospital is much more of a teaching and learning experience. New parents may even want to get the camera ready because baby’s first bath is a very special event. There is much cooing, singing and soothing encouraged because babies love the sound of their parent’s voices.

DONOR MILK BANK

With understanding that breast milk is such a crucial component to a newborn’s health, TMH is implementing a donor milk bank system. Donor milk is a preventative healthcare strategy and one more way to improve outcomes in the Neonatal Intensive Care Unit (NICU). TMH has developed the medical protocols for feeding donor human milk (DHM), as well as has contacted multiple human milk banks across the country to supply milk for these babies. Currently TMH is in the construction phase of a milk lab within the NICU where all of the DHM can be stored safely and securely, as well as provide a location for specialized mixing of the DHM with designated fortifiers necessary for premature infants.

“The physicians, midwives and staff at the Women’s Pavilion are dedicated to providing moms and babies a safe, nurturing environment during this special time of their lives.”

This will serve as a feeding option for NICU babies at high-risk for newborn necrotizing enterocolitii (NEC) - a potentially fatal medical condition that affects the baby’s intestine with high morbidity and mortality. While mortality among premature infants has steadily declined over the last few years nationally, NEC has remained unchanged and continues to be the most common gastrointestinal emergency for premature infants. Providing newborns at-risk for NEC with breast milk has shown to significantly decrease these newborns’ length of stay and significantly decrease the incidence of the condition.

“My goal is to have human milk available for all of our at-risk infants, donor human milk is the perfect bridge to provide 100 percent human milk nutrition,” explained Steven B. Morse, MD, MPH, neonatologist and Medical Director of the NICU. It can be difficult for mothers to produce enough milk to provide 100 percent of the nutrition their baby needs. This can be a stressful situation for a mother, which can negatively impact her ability to produce milk. The donor milk bank is an exciting addition for those mothers who deliver a premature infant and, despite their best efforts, are unable to provide enough of their own milk. “Another one of our goals is to keep babies from having to be transferred outside of the area, where they are separated from their families and support systems,” added Dr. Morse. The donor milk bank is a proactive approach to help prevent cases of NEC, which often can require care outside the area.

“The physicians, midwives and staff at the Women’s Pavilion are dedicated to providing moms and babies a safe, nurturing environment during this special time of their lives,” said Christopher Sundstrom, MD, obstetrician & gynecologist, Chair of Obstetrics. “We accomplish this by incorporating the most up to date medical practices and by creating a family-friendly atmosphere. You can be confident you and your baby are getting the best when you deliver at TMH.”
Patients did not typically travel to Tallahassee for cancer care until the freestanding Tallahassee Memorial Cancer Center opened in 2011. Since then, the program has expanded to offer hematology/oncology, radiation oncology, surgical oncology, various support services and now gynecologic oncology. Accredited since 1951, by the American College of Surgeon’s Commission on Cancer, the Tallahassee Memorial Cancer Center is the longest continuously accredited comprehensive community hospital cancer program in the State of Florida.

The area’s only gynecologic oncology program, TMH Physician Partners – Gynecologic Oncology Specialists, allows patients to receive advanced care, led by Arvind Bakrhu, MD, MPH, gynecologic oncologist. The program cares for patients with ovarian cancers, endometrial and uterine cancers, sarcomas, vulvar cancers, vaginal and cervical cancers. With only an estimated 1,000 gynecologic oncologists in the country, Tallahassee Memorial has made its mark on the Big Bend region with this specialized cancer program.
One of many patients benefitting from the care of Dr. Bakhru, is Kathy Lipscomb, a resident of Winter Garden outside of Orlando, Florida.

In 2013, during a routine gynecologic exam, Kathy’s results came back 99 percent normal. With just a one percent concern, Kathy’s gynecologist at the time ordered a biopsy. To her surprise, the results showed she had stage four ovarian cancer.

At the most vulnerable time in her life, Kathy had been told by her gynecologist that her chance of survival was slim. That’s when her gynecologist connected her to Dr. Bakhru, who was practicing at an Orlando area hospital at the time.

“I just needed anyone who thought they could help me. I wasn’t looking for the most incredible doctor in the world, but I found one,” said Kathy. “Dr. Bakhru is compassionate, thinks outside of the box and customizes care for his patients.”

Thanks to the treatment, Kathy’s cancer was manageable. In 2015, she had another run in with her ovarian cancer when Dr. Bakhru confirmed it had metastasized to her brain. A fighter at heart, she followed instruction from Dr. Bakhru and received treatment that would turn everything around and help her live a longer, healthier life in remission.

“I just needed anyone who thought they could help me. I wasn’t looking for the most incredible doctor in the world, but I found one,” said Kathy.

Immediately following Kathy’s remission, Dr. Bakhru transferred to Tallahassee Memorial HealthCare where he opened TMH Physician Partners – Gynecologic Oncology Specialists. Due to her overwhelmingly positive experience with Dr. Bakhru, she wanted to make the drive to Tallahassee to continue her follow-up care.

“The Tallahassee Memorial Cancer Center is just wonderful,” said Kathy. “It’s a warm, inviting and caring place with confident staff to care for you.”

The Tallahassee Memorial Cancer Center is known for its highly-trained medical team and delivering the most powerful treatment options, all under one roof.

Now, Kathy spends her days with grandchildren, traveling with her husband, riding her bicycle and socializing with family and friends. Additionally, she is planning to give back to other cancer patients by working on an informational guide for families on how they can help their family members going through something similar.

Many patients like Kathy now have more options to receive specialized care, right here in Tallahassee.
Your brain is amazing. No matter who you are, how old you are, what you know or what you don’t know – the complex neurological pathways and network of arteries and veins all working in harmony is almost too much to wrap your head around.

When you’re born, all of that awe-inspiring mechanics is bundled up into three-quarters of a pound. It’s impossibly small and, almost all of the time, your brain simply knows what to do, where to connect and how to grow.

But sometimes it doesn’t. Sometimes the connections aren’t right; sometimes they get tangled up.

At nine years old, Caleb already knows more about his brain than most adults. He knows what happens when the intricate connections don’t sync up, when the web of blood vessels becomes a knot.

Sitting in the car with his dad on a Saturday, Caleb complained of a horrible headache.

“They were in the parking lot at the mall,” said Claire Diao, Caleb’s mom. “Joseph, my husband, called and said Caleb had a headache and then vomited. We thought he might
have a stomach bug, but when he wouldn’t respond we knew we needed to take him to Tallahassee Memorial.”

Caleb was suffering from bleeding in his brain, caused by a ruptured arteriovenous malformation (AVM), a tangle of abnormal blood vessels connecting arteries and veins, in his left frontal lobe that was bleeding.

“Caleb arrived with classic symptoms of AVM hemorrhage (bleeding), but unfortunately these symptoms can be attributed to other ailments. It was critical that Caleb’s family came straight to us,” said Dr. Matthew Lawson, an endovascular neurosurgeon at Tallahassee Memorial. “I performed a CT scan that confirmed a large hemorrhage. Then I performed a CT Angiogram, a test that looks specifically at the blood vessels in the brain, which revealed the AVM.”

What Dr. Lawson did next saved Caleb’s life; he made a call to Dr. Alexandra Beier, a pediatric neurosurgeon at Wolfson Children’s Hospital. Tallahassee Memorial and Wolfson Children’s are affiliated organizations, creating a connection of care that bridges the panhandle of Florida.

While Tallahassee Memorial’s endovascular neurosurgeons, Dr. Lawson and Dr. Adam Oliver, treat AVMs and other blood vessel abnormalities of the brain in adults, treating children with such conditions often requires the expertise of both pediatric and endovascular neurosurgeons.

“Dr. Lawson and I communicate often,” said Dr. Beier. “We were developing a plan of care for Caleb before he was even transported to

“We feel lucky that the seamless partnership between Tallahassee Memorial and Wolfson Children’s Hospital exists, that Dr. Lawson, Dr. Beier and Dr. Hanel were able to save Caleb’s life and give him a complete recovery.”

Wolfson Children’s Hospital. Dr. Lawson shared Caleb’s scans and prepared him for the care he would receive when he arrived.”

Caleb was air lifted to Wolfson Children’s Hospital where Dr. Beier and Dr. Ricardo Hanel, a Jacksonville endovascular neurosurgeon, were waiting.

He was rushed to the endovascular suite where Dr. Beier and Dr. Hanel could examine the AVM in detail before transferring him next door to the operating room. Caleb underwent a successful craniotomy, open-skull brain surgery, to remove the AVM and hemorrhage, which controlled the bleeding.

“Even though the experience was terrifying, we feel lucky for so many reasons,” said Claire. “We feel lucky that the seamless partnership between Tallahassee Memorial and Wolfson Children’s Hospital exists, that Dr. Lawson, Dr. Beier and Dr. Hanel were able to save Caleb’s life and give him a complete recovery.”

Caleb spent a week at Wolfson Children’s Hospital recovering before returning home to Tallahassee where he will receive follow-up care at Tallahassee Memorial, and occasional check-ups at the Michelle and Walter Stys Neuroscience Institute at Wolfson Children’s Hospital.

“On his last day at Wolfson Children’s Hospital, Dr. Beier came in to check on Caleb,” remembered Claire. “He was already up and standing in the doorway when she walked in. She reached down to check his head and he ducked out of the way and ran around her. We knew then he was OK, he was back to his old self. We feel very fortunate.”
Tallahassee Memorial Healthcare is one of 28 centers throughout the United States participating in a clinical trial for a new device to treat brain aneurysms. Affecting between three and five million Americans, brain aneurysms are weaknesses in blood vessel walls that can lead to bleeding. Aneurysms are a serious medical condition and a common cause of hemorrhagic stroke, which can cause significant neurological damage or death.

Operated by medical device company Medtronic, the BARREL Study seeks to assess the safety and efficacy of the new Barrel Vascular Reconstruction Device (VRD)™, when used as an adjunctive treatment to endovascular coiling of specific types of aneurysms.

“Tallahassee Memorial is one of only a handful of organizations in the United States participating in this trial,” said Matthew Lawson, MD, a TMH endovascular neurosurgeon and Principal Investigator of the TMH BARREL Study. “A trial like this offers TMH the opportunity to work with cutting-edge neurosurgical technology. As a primary referral center in the Southeast, TMH sees an ever-increasing need for aneurysm treatments. Our involvement in this...”
trial will allow us to not only treat aneurysm patients in our region, but also help advance the field of endovascular neurosurgery by studying new devices.”

Cerebral aneurysms are weak spots in blood vessel walls within the brain characterized by an abnormal “ballooning,” or widening of the vessel. Aneurysms often develop in arteries when they branch, like a fork in the road. Surgical treatment of these aneurysms is relatively high risk and is very complex. The new Barrel™ VRD was developed specifically to address these surgical challenges.

“The Barrel VRD is specifically designed to facilitate safe treatment of bifurcation aneurysms,” said J. Mocco, MD, MS, Vice Chair and Professor of Neurological Surgery, Mt. Sinai Hospital and Principal Investigator for the national BARREL Study.

Tallahassee Memorial began enrollment in the BARREL Study in July 2015. Four patients have been approved for the Barrel VRD and one has been placed in 62-year-old, Ligia Moreno.

Ligia, the second person in the Florida Panhandle to have this surgery, had a brain aneurysm and didn’t realize it until she began experiencing short intense headaches. When she went to the doctor, she was presented with two options offered at TMH. Brain surgery, through an open skull treatment, or a less invasive option through a new clinical trial. Ligia opted for the BARREL Study, which ultimately saved her life and could help others experiencing the same thing.

“A trial like this offers TMH the opportunity to work with cutting-edge neurosurgical technology. As a primary referral center in the Southeast, TMH sees an ever-increasing need for aneurysm treatments.”

The study will enroll up to 164 patients, who meet criteria, from the 28 sites across the U.S. Drs. Matthew Lawson and Adam Oliver, board-certified endovascular neurosurgeons at TMH, will closely screen for patients who meet the eligibility requirements for the study. The Barrel VRD received CE Mark approval in December 2013 and is not currently approved for commercial use in the U.S.

TMH’s participation in the BARREL Study, and similar clinical trials, was preceded by a significant expansion of the neurosurgery program. In 2012, TMH added a new type of neurosurgery called endovascular neurosurgery. This revolutionary field within neurosurgery is highly specialized and allows surgeons to repair aneurysms and retrieve blood clots in the brain from within the blood vessels, without opening the skull. Most of the endovascular neurosurgery performed at TMH is through a minimally invasive approach through an artery in the leg.

“The expansion of our neurosurgery program was the tip of the iceberg,” said Mark O’Bryant, President & CEO, Tallahassee Memorial HealthCare. “TMH is the only provider of these revolutionary procedures in our area and, as such, we are dedicated to continuing the advancement of our care through research and innovation so that we can provide the best treatment options possible for the large population of patients we serve.”
“We are all in this together.” This phrase is often said, but the Tallahassee Memorial Diabetes Center puts it into practice all year long. The need for diabetes education stretches beyond the Center’s walls into surrounding communities. As this demand continues to grow, so does Tallahassee Memorial Diabetes Center’s outreach.

“We strive to provide leadership, training and support to other individuals and organizations in our region who seek to provide care for persons with diabetes,” explained Dawn Springs, Director of the Tallahassee Memorial Diabetes Center. “We use a team approach to help people with diabetes and their families live well with their condition and also travel monthly to our neighboring communities to help provide these services.”

From Gadsden and Taylor Counties to Leon and Wakulla Counties, the Diabetes Center’s dietitians and nurses are committed to helping the entire community maintain the health they deserve.

**FLORIDA DIABETES CAMP**

Think of campfires, swimming and long nights chatting in camp cabins. This picturesque setting comes to life during a five-day long camp centered on diabetes education. Elementary students with type 1 diabetes come from all over to experience a welcoming environment where they are surrounded by other campers who are just like them. The staff at camp is...
comprised of health-orientated students, professionals and past campers who offer up their time and provide round-the-clock care to students. Finding camaraderie through participating in all activities together, these students learn how to check their blood sugars, count carbohydrates, take insulin – ultimately making life-long friends who share the same obstacles.

SCHOOL TRAININGS
Leon County Health Assistants are busy every summer receiving the training necessary to provide their students with the utmost care. At the heart of this training stands a chronic disease affecting over 100 students in Leon County Schools - diabetes.

Facilitating sessions every summer, the Tallahassee Memorial Diabetes Center dietitians and nurses share how to properly handle issues and concerns that often come up when a child has diabetes. Through activities such as making individual plans and providing them with low/high blood sugar kits, these dietitians are ensuring local students don’t go through school without the proper care.

BRING A FRIEND WEEKEND
When dealing with the various aspects of diabetes, kids can often feel alienated from friend groups because of the lack of understanding surrounding this chronic condition. After recognizing this, the Diabetes Center began offering an alternative to a weekend getaway for teens, tweens and everything in between. The “Bring a Friend” program is a two-day camp that gives students, ages 12-17, the opportunity to invite a friend for an exciting catalog of camp-like activities, but most importantly, diabetes education. Presenters teach all campers not only how to manage diabetes, but also how to support those dealing with the condition. When leaving the weekend, all campers have a sense of community knowing they have friends who support their journey.

STOMPING OUT TYPE 2 DIABETES
An event for the whole family, Leon County Schools’ Stomping Out Type 2 Diabetes celebrated its seventh successful year this past April at Tallahassee Museum. With support from Tallahassee Memorial Diabetes Center and Premier Health and Wellness, this event attracted almost 1,600 people and raised close to $18,000 for wellness programs throughout the county. While families come for the activities such as fishing derby, zip lining and one mile STOMP, they stay for the wellness screenings and fitness fun! Through programs such as this Tallahassee Memorial plants seeds of wellness, in hopes of preventing type 2 diabetes within our community.

The Diabetes Center extends their purpose through community outreach. Using a wide variety of programs and approaches, this group makes diabetes education a priority within the region. Individuals with diabetes can now find sources of comfort within their community thanks to Tallahassee Memorial Diabetes Center.
PATHWAYS TO PREVENTION

31 million – the number of emergency department visits across the country for unintentional injuries each year.

With a staggering number like this, it’s no wonder Tallahassee Memorial HealthCare set out to reduce the amount of trauma-related accidents in the Big Bend region. As the only Level II Trauma Center in the area, the Bixler Trauma & Emergency Center team knew they had a particular responsibility to the community to provide interactive education. So a new program was born – Pathways to Prevention.

“Our ultimate goal is to prevent future occurrences by being a resource to students and fostering the understanding that choices made in an instance can have a lifetime impact,” said James Livingston, BSN, RN, Executive Director of Emergency Services.

Pathways to Prevention is a school-focused program with a customized curriculum used to reach elementary, middle and high school students. The program is broken down further into Operation Distraction, a simulation of a traumatic event, and Operation Awareness, a more traditional classroom-style presentation. The topics range from helmet safety and horseplay to distracted driving and ATV safety. Each presentation is developed by the Tallahassee Memorial Bixler Trauma & Emergency Center team to discuss topics relevant to the age group and match the needs of the specific school. The program is offered to schools throughout the Big Bend area.
OPERATION DISTRACTION
Designed to reach an older audience of students through a powerful reenactment event or hands-on demonstration, the Operation Distraction events focus on drinking and driving as well as texting and driving. These events involve community participation from local law enforcement, the fire department and emergency medical services.

This year’s main Operation Distraction event was Operation Prom Night, a drinking and driving car accident enactment hosted at Florida State University Schools (Florida High). With prom being a popular night to drink and drive among teens, this simulated car accident was created to demonstrate the consequences of drunk and buzzed driving. Students were selected from the school and additional volunteers were brought in to act as accident victims and family members. The volunteers were dressed in prom attire and received special effects make up to look the part. The students were placed in a wrecked car while the Jaws of Life and special saw are used to remove them from the vehicle. As the helicopter flew in, it ends up being too late for one of the students, who is found in her prom dress already dead. The parents have to be held back by law enforcement in despair as they see their child lifeless from a drunk driving accident.

The Leon County Sheriff’s Office, Leon County EMS, FSU Police, Tallahassee Police Department, Tallahassee Fire Department and many more local officials are involved in the presentation, making it as realistic as possible. To see one of their classmates draped in a body sheet, truly put it into perspective the harsh realities of drinking and driving. Because this learning doesn’t end at school, TMH created take home materials for students and encouraged them to have a discussion with their parents afterwards. The effectiveness of the program was demonstrated at Florida High when after prom this year there were zero reported crashes. That statistic alone shows the vital impact Pathways to Prevention can have on the community.

OPERATION AWARENESS

The graduating class of eighth graders at Deerlake Middle School learned the dangers of distracted driving through an Operation Awareness event this year. As these students are almost of age to receive their learner’s permits, this was an excellent opportunity to instill that driving is a privilege, not a right, and the importance of keeping full focus on the road when being behind the wheel. The students were given a full presentation from a certified trauma team member, who sees first-hand how badly distracted driving can turn out.

The presentation highlighted the three types of distracted driving: visual distraction, manual distraction and cognitive distraction. A huge focus is on why it is never worth it to text while driving. The same five seconds it takes to look down to read a text message is the same amount of time it would take a car to travel the distance of Doak Campbell Stadium. With statistics around texting and driving, and interactive videos, the students are given a crash course on the dangers of distracted driving. Students experienced the dangers of cognitive distraction through a live demonstration using “beer goggles” – eye goggles designed to impair a person’s vision as if they were intoxicated. Students were picked from the audience to come on stage and put on the goggles and then navigate through a course of cones without running into any. During the demonstration, students ended up stepping on and knocking over cones. Each student walked away with a “don’t text and drive” ring as a reminder to see on their fingers when behind the wheel.

Each year, the Pathways to Prevention program continues to grow. The Tallahassee Memorial Bixler Trauma & Emergency Center team looks forward to being invited into more schools to share the important messages in accident prevention and hopefully help the community avoid future trauma events.
QUALITY OF PATIENT CARE

CENTRAL LINE - ASSOCIATED BLOOD STREAM INFECTIONS
STANDARDIZED INFECTION RATE
Lower percentages are better.

CATHETER - ASSOCIATED URINARY TRACT INFECTIONS
STANDARDIZED INFECTION RATE
Lower percentages are better.

HYSTERECTOMY SURGICAL SITE INFECTIONS
Lower percentages are better.

VENTILATOR ACQUIRED EVENTS
NICU VENTILATOR ACQUIRED PNEUMONIA
Lower percentages are better.

Tallahassee Memorial Healthcare average State of Florida average US National average
As Tallahassee Memorial strives to deliver the highest quality care to patients, objective assessments through national and state organizations offer insight into our progress. The most recent data from Hospital Compare, which evaluates over 4,000 Medicare-certified hospitals across the country, shows TMH is outperforming the national average in many measures of quality. These measures indicate that TMH is following best practices to prevent readmissions, complications and deaths.

### PATIENT SURVEY SUMMARY RATING

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>76%</td>
<td>Patients who reported that their nurses “always” communicated well</td>
</tr>
<tr>
<td>79%</td>
<td>Patients who reported that their doctors “always” communicated well</td>
</tr>
<tr>
<td>64%</td>
<td>Patients who reported that they “always” received help as soon as they wanted</td>
</tr>
<tr>
<td>67%</td>
<td>Patients who reported that their pain was “always” well controlled</td>
</tr>
<tr>
<td>61%</td>
<td>Patients who reported that staff “always” explained about medicines before giving it to them</td>
</tr>
<tr>
<td>70%</td>
<td>Patients who reported that their room and bathroom were “always” clean</td>
</tr>
<tr>
<td>67%</td>
<td>Patients who reported that the area around their room was “always” quiet at night</td>
</tr>
<tr>
<td>85%</td>
<td>Patients who reported that “yes”, they were given information about what to do during their recovery at home</td>
</tr>
<tr>
<td>70%</td>
<td>Patients who gave their hospital a rating of 9 or 10 on a scale from 0 (lowest) to 10 (highest)</td>
</tr>
<tr>
<td>74%</td>
<td>Patients who reported “yes”, they would definitely recommend the hospital</td>
</tr>
<tr>
<td>48%</td>
<td>Patients who “strongly agree” they understood their care when they left the hospital</td>
</tr>
</tbody>
</table>
Many of your gifts served the hospital’s basic areas of healthcare delivery, others were a catalyst for innovation and others elevated the environment of care to match its quality. This is strategic philanthropy, effectively deployed to fulfill Tallahassee Memorial’s mission: “Transforming Care. Advancing Health. Improving Lives.” and to fuel its vision: “Leading our community to be the healthiest in the nation.”

The Tallahassee Memorial Neonatal Intensive Care Unit Named for the Florida State University College of Medicine

The Florida State University College of Medicine (FSU-COM) and Tallahassee Memorial HealthCare (TMH) are partners through medical education, research, and clinical-practice opportunities. The FSU-COM is also the institutional sponsor of two residency programs at TMH and, since 2008, a dozen FSU-COM alumni have become TMH physicians.

At a dedication ceremony on April 6, TMH named its Neonatal Intensive Care Unit (NICU) for the FSU-COM in recognition of its pediatric outreach program and its generous support of the TMH Foundation through Dance Marathon at FSU (DM at FSU), the largest student-run philanthropy at FSU, and the Children’s Miracle Network (CMN). From 2004 to present, the FSU-COM donated more than $1,000,000 in DM at FSU funds to the TMH Foundation for the NICU and pediatric services.

The ceremony’s keynote speaker was TMH NICU Medical Director Steven Morse, MD. He shared, "I thank the FSU-COM for its generous and continuous support of our efforts to care for some of the smallest and most fragile TMH patients, who annually number over 600."

Dean of the FSU-COM John P. Fogarty, MD, TMH President/CEO G. Mark O’Bryant, and Overall Chair of DM at FSU Alex Jones, were also program participants. According to Mr. O’Bryant, “Third-year FSU-COM students rotate through the NICU and it is exciting to see them utilizing equipment purchased with DM at FSU funds.” Dean Fogarty added, “The students who work so hard on a year-round basis with DM at FSU are truly making a difference in the lives of children locally as evidenced by the care delivered in the NICU. We are so proud of this partnership.” Alex Jones concluded the program with a rousing call to action, “We are thrilled and grateful that TMH named its NICU for the FSU-COM, but we will not rest on our laurels. There is work to be done ‘For the Kids’ as we head into the 2017 DM at FSU. Please join us in this important initiative. Go ‘Noles, Go TMH.”
The TMH Foundation, a tax exempt, not-for-profit corporation, is an integral part of Tallahassee Memorial’s operational structure and is recognized by the Internal Revenue Service as a public charity within the provisions of Internal Revenue Code Section 501(c)(3). Therefore, donors may claim income tax charitable deductions for their contributions to the extent their personal circumstances permit under the Internal Revenue Code. Members of the Foundation’s Board of Trustees are community leaders charged with overseeing fund-raising projects, managing the Foundation’s assets, distributing funds to the hospital, encouraging community involvement in wellness and healthcare initiatives and promoting the general health of the TMH service area through educational training programs and research projects.
### STATISTICS

<table>
<thead>
<tr>
<th>Category</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emergency and Urgent Care Visits</td>
<td>135,700</td>
</tr>
<tr>
<td>Radiation Oncology Procedures</td>
<td>45,700</td>
</tr>
<tr>
<td>Laboratory Tests</td>
<td>1,347,600</td>
</tr>
<tr>
<td>Radiological Procedures</td>
<td>159,800</td>
</tr>
<tr>
<td>Cardiovascular Lab Tests</td>
<td>72,300</td>
</tr>
<tr>
<td>Surgeries</td>
<td>16,700</td>
</tr>
<tr>
<td>Births</td>
<td>3,900</td>
</tr>
<tr>
<td>Full Time Equivalent Colleagues</td>
<td>4,000</td>
</tr>
<tr>
<td>Physicians on Medical Staff</td>
<td>648</td>
</tr>
<tr>
<td>Volunteers</td>
<td>600</td>
</tr>
<tr>
<td>Licensed beds</td>
<td>772</td>
</tr>
</tbody>
</table>
## FINANCIAL REPORT

### Balance Sheet as of September 30, 2015

<table>
<thead>
<tr>
<th>Asset Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cash and short term investments</td>
<td>$235,618,200</td>
</tr>
<tr>
<td>Accounts receivable, net</td>
<td>$74,777,000</td>
</tr>
<tr>
<td>Inventories</td>
<td>$9,649,100</td>
</tr>
<tr>
<td>Prepaid expenses and other assets</td>
<td>$10,385,500</td>
</tr>
<tr>
<td>Facilities and equipment, net</td>
<td>$265,233,500</td>
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<tr>
<td>Other long term assets</td>
<td>$15,106,900</td>
</tr>
<tr>
<td><strong>Total assets</strong></td>
<td><strong>$610,770,200</strong></td>
</tr>
<tr>
<td>Accounts payable and accrued expenses</td>
<td>$53,824,900</td>
</tr>
<tr>
<td>Notes and bonds payable</td>
<td>$133,765,300</td>
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<tr>
<td>Self insurance reserves</td>
<td>$19,161,500</td>
</tr>
<tr>
<td>Accrued pension liabilities</td>
<td>$106,803,700</td>
</tr>
<tr>
<td>Other liabilities</td>
<td>$22,715,300</td>
</tr>
<tr>
<td><strong>Net assets</strong></td>
<td><strong>$274,499,500</strong></td>
</tr>
<tr>
<td><strong>Total liabilities and net assets</strong></td>
<td><strong>$610,770,200</strong></td>
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</tbody>
</table>

### Expense Dollar

<table>
<thead>
<tr>
<th>Expense Category</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries, wages and benefits</td>
<td>$278,274,500</td>
</tr>
<tr>
<td>Supplies and other</td>
<td>$164,749,100</td>
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<tr>
<td>Drugs</td>
<td>$32,148,500</td>
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<tr>
<td>Bad debts</td>
<td>$99,679,000</td>
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<tr>
<td>Depreciation and interest</td>
<td>$36,033,100</td>
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<tr>
<td>Other expenses</td>
<td>$45,122,700</td>
</tr>
<tr>
<td><strong>Total operating costs</strong></td>
<td><strong>$656,006,900</strong></td>
</tr>
</tbody>
</table>

### Economic Contribution to Our Community

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Education</td>
<td>$9,809,700</td>
</tr>
<tr>
<td>Phys Clinics</td>
<td>$14,133,400</td>
</tr>
<tr>
<td>Transition Center</td>
<td>$585,600</td>
</tr>
<tr>
<td>Home Health Care</td>
<td>$1,281,000</td>
</tr>
<tr>
<td>Diabetes</td>
<td>$499,200</td>
</tr>
<tr>
<td>Neuroscience center</td>
<td>$246,500</td>
</tr>
<tr>
<td>Community Outreach</td>
<td>$668,078</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$27,223,478</strong></td>
</tr>
</tbody>
</table>

### Taxes

<table>
<thead>
<tr>
<th>Tax Type</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal &amp; state income tax</td>
<td>$947,715</td>
</tr>
<tr>
<td>Real estate tax</td>
<td>$679,539</td>
</tr>
<tr>
<td>Sales tax</td>
<td>$120,478</td>
</tr>
<tr>
<td>Other local taxes</td>
<td>$222,195</td>
</tr>
<tr>
<td>Unemployment tax</td>
<td>$312,057</td>
</tr>
<tr>
<td>Indigent care tax included in charity at cost</td>
<td></td>
</tr>
<tr>
<td><strong>Total taxes</strong></td>
<td><strong>$2,281,983</strong></td>
</tr>
</tbody>
</table>

### Admissions Patient Days

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Admissions</th>
<th>Patient Days</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adult and pediatrics</td>
<td>20,949</td>
<td>94,815</td>
</tr>
<tr>
<td>Obstetrics</td>
<td>4,132</td>
<td>11,944</td>
</tr>
<tr>
<td>Neonatal and newborns</td>
<td>3,872</td>
<td>17,311</td>
</tr>
<tr>
<td>Behavioral health</td>
<td>1,979</td>
<td>8,374</td>
</tr>
<tr>
<td>Rehabilitation</td>
<td>806</td>
<td>14,458</td>
</tr>
<tr>
<td><strong>Total admissions</strong></td>
<td><strong>31,738</strong></td>
<td><strong>146,902</strong></td>
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</tbody>
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