

# 2011 COMMUNITY BENEFIT REPORT



Wisdom for Your Life.

## COMMUNITY BENEFIT

### Letter

The University of Tennessee Medical Center is recognized within the community as exceeding the expectations that accompany our threefold mission of healing, education, and discovery. From a community health perspective, our efforts in prevention range from countless preventative screening opportunities to demonstrating healthy cooking through our very own Healthy Living Kitchen. Through our partnerships with community health organizations and others we are able to educate and improve the health of a significant number of people.

Serving our community is a part of everything we do and has been at the heart of our history since we opened our doors in 1956. Community service takes many forms. It can include health fairs and screenings, breast health and cancer outreach programs, a healthy-living kitchen, support for Knoxville Area Project Access, information provided to patients and community members, training for EMS personnel, and continuing medical education.

Beyond these very visible programs, community service extends to the time and talent that members of the University of Tennessee Medical Center team contribute everyday by serving on the boards of church, civic, or youth organizations. They also spend numerous hours volunteering in the community and donating time at worthy organizations.

Communities are only as strong and vibrant as the businesses and organizations they contain, and businesses and organizations are only as strong as their people. At the University of Tennessee Medical Center, we're blessed in having people who are compassionate about the future of our community and generous with their contributions of talent, time, and dedication. We are proud to highlight a few of our 2011 community achievements in this document and look forward to continuing our community service in the future.

Sincerely,



Joseph R. Landsman, Jr.  
President and Chief Executive Officer  
University Health System, Inc.



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Wisdom for Your Life.



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**Our Mission** | To serve through healing, education and discovery

**Our Vision** | To be nationally recognized for excellence in patient care, medical education and biomedical research.

**We Value** | Integrity • Excellence • Compassion  
Innovation • Collaboration • Dedication

**COMMUNITY BENEFIT**

*Dedication to the Community*

## Assessing Community Health

The University of Tennessee Medical Center is deeply engaged in its communities to improve the lives of families across East Tennessee by providing compassionate, innovative care. A key feature of that engagement is the collaboration of partners to identify and understand the health needs in those communities. In Knox County, a coalition of 120 organizations led by the Knox County Health Department regularly assesses the health of the community through local and state health data and surveys.

### Community Partners

- American Heart Association
- American Diabetes Association
- American Cancer Society
- Alzheimer’s Association
- Coordinated School Health
- East Tennessee Children’s Hospital
- East Tennessee Wellness Roundtable
- KAPPA
- Knox County Health Department
- Komen Foundation
- Project Access
- Regional Health Departments
- Smoke Free Knoxville
- Think Healthy Knox Partnership
- University Physician Association
- United Way
- UT Graduate School of Medicine

### Community Benefit

The University of Tennessee Medical Center benefits the community daily by providing excellent patient care, educating the next generation of physicians, and conducting research.

Charity Care	\$10,979,807
Uncompensated Patient Care	\$19,250,788
Health Professionals Education	\$15,335,800
Cash and In Kind Support	\$235,665
Community Building Activities	\$262,494
Community Health Improvement	\$632,093
Research	\$295,967

*Total:* **\$46,992,614**

**COMMUNITY BENEFIT**

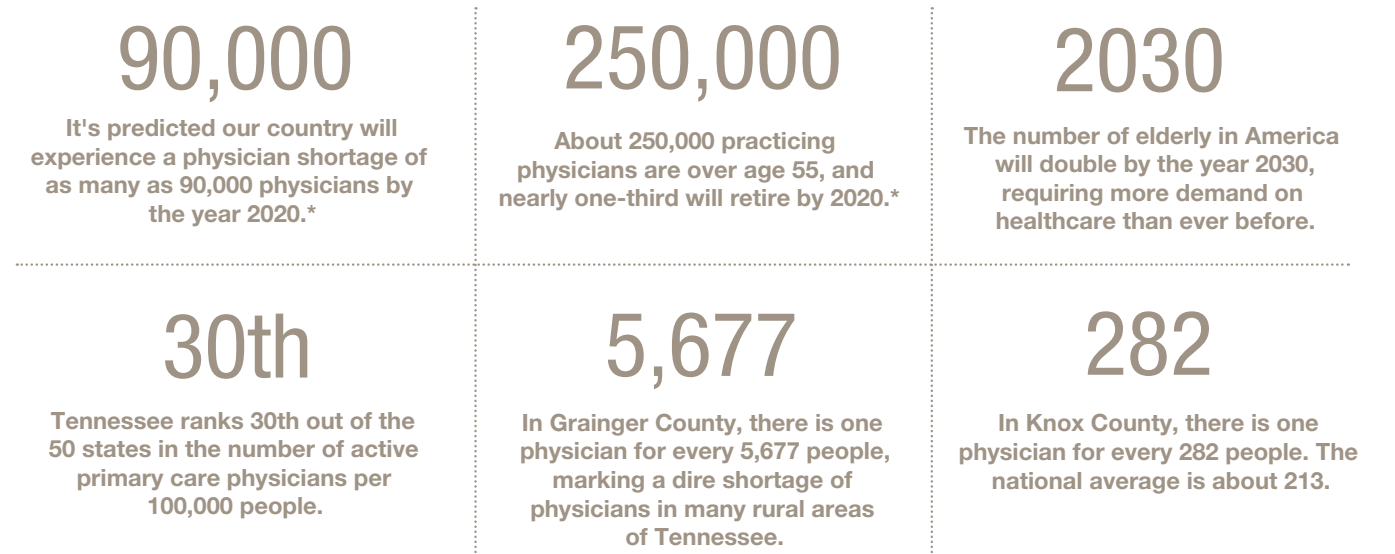
*Community Outreach*

## By the Numbers: Access to Primary Care

As the need for primary care increases, we strengthen our commitment to caring for the community. Chances are when you need to see your primary care physician, you are able to do so in a few days’ time. The physician's office is probably near your home or office, so the whole process is relatively convenient.

This scenario is not the case for thousands of people in Tennessee and millions in America. Access to medical care - and particularly to primary care physicians - is strained at best and deteriorating every year. Why is this the case, and what can be done?

### Sometimes The Breadth Of An Issue Can Best Be Described In Sheer Numbers:



\* According to the American Medical Association (AMA)

Healthcare numbers can be daunting. They tell us that soon America - and particularly rural areas of the country - will experience a severe shortage of physicians. Despite the fact that the number of medical school graduates will modestly increase over the next decade, the demand for physicians is sharply increasing due to the growing and aging population. Healthcare

reform also will continue to increase the need for physicians as more people are insured.

Healthcare numbers can also be positive. They can reflect an upward trend, like those from the University of Tennessee Medical Center.

## These Numbers Tell a Story of Success.

They show a group of leaders, physicians, and dentists who are proactive in addressing needs in healthcare. Through educational and clinical programs, the UT Graduate School of Medicine and the University of Tennessee Medical Center are making positive strides to improve access to primary care and other specialties.



# 1,900

The UT Graduate School of Medicine has educated about 1,900 new physicians and dentists over its 50-year history.

# 20

The physicians who graduate from the UT Graduate School of Medicine serve in at least 20 counties in Tennessee, including many designated by the U.S. Department of Health and Human Services as health professional shortage areas.

# 50%

Each year, about half of all the physicians and dentists who complete their programs at the UT Graduate School of Medicine and begin practicing choose to call Tennessee home.

# 90%

About 90% of all the graduates from the UT Graduate School of Medicine who choose to stay in Tennessee practice in the primary care specialties of family medicine and internal medicine.

# 70%

Each year, about 70% of the residents and fellows in primary care programs at the UT Graduate School of Medicine choose to practice in Tennessee.

## Widespread Impact

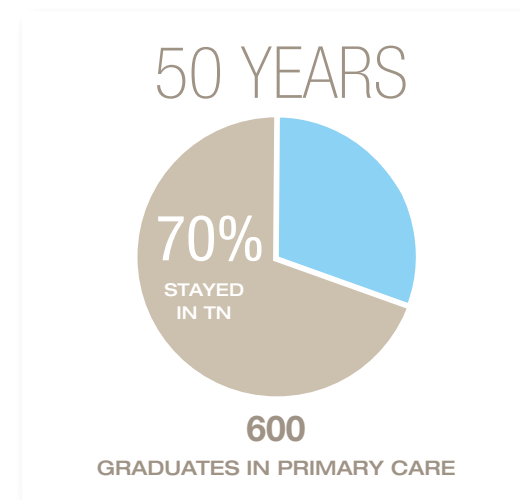
### Educational Programs

Together, the UT Graduate School of Medicine's Family Medicine and Internal Medicine residency programs are filling the gap of primary care physicians in the country and in Tennessee, making primary care available to more people.

According to the American Academy of Family Physicians and other sources, a family medicine or internal medicine

physician will see an average about 20 - 25 patients each day.

In its 50-year history, the UT Graduate School of Medicine has graduated 600 primary care physicians. Of these, 70% - about 415 primary care physicians - chose to establish practices in Tennessee.



### Clinical Programs

Access to primary care is not only influenced by the educational programs of the UT Graduate School of Medicine, but it also is made easier through the Primary Care Network of the University of Tennessee Medical Center.

On the campus of the medical center are family physicians, internal medicine, and obstetrics and gynecology patient centers. Combined, these three centers provide for about 35,000 patient visits each year, supported by more than 120 physicians.

In addition to the primary care facilities that share the campus with the medical center, residents in East Tennessee can access primary care at more than two dozen facilities in seven regional counties. That's an increase from the three counties being served by primary care practices in the network in 2005.

Practices in the Primary Care Network now are located throughout these East Tennessee counties:

Anderson Blount Campbell Loudon  
Jefferson Knox Sevier

In addition, three after-hours clinics in Knoxville, Seymour, and Sevierville also serve residents of Blount, Loudon, Knox, and Sevier counties.

While the numbers convey that accessing primary care in the future will become more difficult, they aren't telling the whole story. Numbers from the University of Tennessee Medical Center tell a different story. They demonstrate the institutions' continuing commitment to making quality healthcare accessible for the people of Tennessee.

### The BIG Picture

The UT Graduate School of Medicine's commitment to improving access to primary care in the state has been proven over its 50 years, as more than 600 family medicine and internal medicine physicians have graduated and entered practice.

## Healthcare Coordination

The University of Tennessee Medical Center offers a free healthcare coordination service. The medical center provides healthcare coordinators, similar to personal assistants, to make the process of arranging appointments as easy as one phone call.

Not only will your appointments be made for you, the medical center will send you patient packets, provide maps, and pick you up at the door to walk you to your appointment, if needed.

“Although our service is for anyone, those who are new to the area probably benefit the most,” says healthcare coordination supervisor Jeromy Welch. “It always takes time to become familiar with a new community, so just think of how daunting it might be to find a pediatrician, a primary care physician, or specialists like an OB/GYN or a cardiologist in a brand new place. One of the ways we can make things easier is by sending maps of the hospital and giving detailed directions. Hospitals can sometimes be confusing places to get around: so, if needed, we’ll even meet you at the front door of the medical center to lead you to the right place.”

While the medical center is the only hospital in the area with this type of service, there are other programs like this across the country. Prestigious medical centers such as the Cleveland Clinic, Johns Hopkins, and Cedars-Sinai have similar services. In each setting, as is the case at the medical center, coordinators are very knowledgeable about what makes their hospital unique and can tell you more about the specialty services available. After talking to one of the healthcare coordinators, you’ll see why they were given this memorable telephone number—because they really do care.

**For a customized referral to a University of Tennessee Medical Center physician, please call Healthcare Coordination at 865-305-6970.**



## Healthy Living Kitchen

**The strength of a community is clearly demonstrated by partnerships formed to improve its residents' quality of life. The partnership formed between Food City and the University of Tennessee Medical Center to expand the Healthy Living Kitchen program is a prime example of the potential of this collaboration.**

“With Tennessee ranking as the eighth-most-obese state for adults, I’m proud to announce this partnership, which represents a commitment from both organizations to address the health needs of those we serve,” says Joseph R. Landsman, president and CEO of the University of Tennessee Medical Center. “Together we’ll expand the message of positive nutritional choices, reaching out to people in the region, including the loyal Food City customer base and the thousands of Food City associates.”

Consisting of a University of Tennessee Medical Center registered dietitian, a cardiac nurse specialist, and a senior executive chef, the Healthy Living Kitchen team presents



healthy-cooking classes and provides information on nutrition, label-reading, and making the right choices while grocery shopping. With the help of Food City’s generous donation and a variety of in-kind services, the partnership is expected to result in a greater reach for Healthy Living Kitchen programs through educational efforts at schools and community events, as well as grocery shopping tours with a University of Tennessee Medical Center registered dietitian at select Food City locations.

## Weight Management Services

No one could argue that obesity isn't a major health problem in the United States. In 2011, the Centers for Disease Control and Prevention announced that Tennessee was ranked 8th in the nation's obesity rankings.

The CDC defines obesity in adults as a body mass index (BMI) of 30 or greater. "This means that a person who's 30 pounds overweight may be obese," says Gregory J. Mancini, MD, medical director of the Tennessee Weight Loss and Surgery Center. Most health professionals agree serious health problems, including diabetes, high blood pressure, high cholesterol, and sleep apnea, are often directly related to obesity. That's why weight control is crucial to maintaining good health and avoiding chronic health problems.

The University of Tennessee Medical Center offers programs and services to help people take control of their weight. These offerings range from community health education programs to nutritional consultation to weight-loss surgery.

Educational programs like the Healthy Living Kitchen and Grocery Store Tours help individuals learn to make good food choices. The Healthy Living Kitchen is a quarterly cooking class that teaches participants how to prepare delicious and nutritious food while learning culinary techniques and vital information about such things as portion control and safe food preparation. Grocery Store Tours are led by the medical center's registered dietitians, who share tips on healthy grocery shopping, comparing food

labels, and selecting items for specific eating plans as they walk through store aisles.

Registered dietitians at the medical center offer individualized nutritional assessment and counseling for both inpatients and outpatients. The counseling sessions include analyses of dietary selections and cooking methods, tips for eating out and grocery shopping, tools to track daily food intake, and tasty, low-fat recipes. Customized nutritional plans can help people manage their weight, lower blood cholesterol, reduce triglyceride levels, and prevent or slow the development of diabetes.

Medically managed weight-loss solutions are available through the Tennessee Weight Loss and Surgery Center at the medical center. The focus is on lifestyle changes such as healthier eating and exercise, as well as bariatric surgery for those who qualify. A multidisciplinary team consisting of surgeons, dietitians, exercise specialists, and administrative staff works with each individual to create a weight-loss program that addresses his or her needs and has lasting effects.

Achieving and maintaining weight control can be a lifelong struggle. But with the help of the proven programs at the University of Tennessee Medical Center, a healthy weight and a healthy life are within reach.



## Health Education: *For our Patients, for the Consumers*

More and more, people who are being treated for a medical condition want to know as much as possible. And if you're already busy navigating the healthcare system, it can be very difficult to research the complexities of a disease, its treatment, and the possible side effects at the same time.

At the University of Tennessee Medical Center, we put experts, resources, and programs together to offer our patients and their families the best and most current health information. From the definition of a disease to the latest treatment options, education for patients and consumers is vital to care management and good outcomes.

The University of Tennessee Medical Center, the region's only academic medical center, makes several avenues available to people in need of health information. Programs like the Consumer and Patient Health Information Service, Skylight Access, and physicians and staff nurses provide education through one-on-one discussions, videos and reading materials, and simulations demonstrating best care practices.

The Consumer and Patient Health Information Service is offered through the UT Graduate School of Medicine's Preston Medical Library. Professional medical librarians are available to answer questions, assist with websites, and provide health information free of charge. You have access to information about diseases and medical terms, how to stay healthy, how to find a support group, and much more. The staff of the Preston Medical Library helps patients and families get a better idea of their situation by providing full, current answers to any questions they might have.

The librarians also play an active and integral role in educating today's physicians, residents, and other members of your healthcare team. They serve an academic advisory role, providing relevant educational materials and essential resources for medical education programs, research, and physician support. The services of the library are also utilized by attorneys, students, and others including public library librarians from

East Tennessee to South Africa. Only an academic medical center could provide the unique patient services, educational support, and professional resources offered through Preston Medical Library.

Patient education is also available through Skylight Access, an on-demand interactive technology available in our inpatient rooms that makes it simple and easy for patients and families to view educational videos about stroke, heart disease, mother and baby care, and many other topics. More than 100 videos can be watched at the viewers' own pace, and comprehensive questions at the end of each program let viewers assess their knowledge of what they've learned.

The medical center's patient education committee works hand-in-hand with the UT Graduate School of Medicine to oversee, organize, and manage the educational material that is distributed in inpatient and outpatient settings. Composed of experts - nurses, medical librarians, a literacy consultant, and many others - the committee ensures that up-to-date, evidence-based, best-practice information is made available to our patients and their families.

At the University of Tennessee Medical Center, we understand how important it is for patients, families, and consumers to be well-informed. The programs we have in place offer a variety of resources to help those we serve get the information they need. Our goal is to improve the experience of patients and families by providing access to information enabling them to participate in plans of care and make well-informed decisions and to support physicians and other medical professionals, resulting in better trained healthcare teams, increased patient safety, and better health outcomes for patients.



**COMMUNITY BENEFIT**  
*Emergency & Trauma*



**Always Ready:**  
*a Trauma Center on Full Alert*

Events involving traumatic injury, such as motor vehicle crashes, happen all too frequently. As the region's only Level I Trauma Center, the University of Tennessee Medical Center has a team of experts ready to provide care 24 hours a day, seven days a week.

The entire trauma team is paged. An alert goes out to more than 20 team members, including physicians, nurses, emergency technicians, pharmacy staff, phlebotomists, respiratory therapists, chaplains, radiologists, radiology technicians, security personnel, surgical critical care specialists, the blood bank, and the operating room team. Everyone is ready.

**1 PRIMARY ASSESSMENTS**

When the patient arrives at the medical center, things move quickly. The first order of business is a primary assessment to detect injuries that might be immediately life-threatening.

**2 SECONDARY ASSESSMENTS**

Next comes a secondary assessment, consisting of a full head-to-toe examination and appropriate care, including diagnostic workups. The radiology department is prepared to provide imaging and intervention for trauma victims around the clock. The sequence of events is fast-paced: quickly assessing injuries, developing diagnoses, and offering the necessary care required to help the patient recover.

"Trauma centers save lives. Having a team ready to coordinate care helps people return from unexpected events," says Blaine Enderson, MD, a trauma surgeon at the medical center.

Trauma patients are brought to the medical center by LIFESTAR or an emergency medical services ambulance. If helicopter transport is needed, LIFESTAR receives notification from the first on-scene responder – the fire department, the police, emergency medical services personnel, or the rescue squad. If the patient is transported by ambulance, the paramedics contact the medical center's emergency department with an estimated time of arrival. En route, they communicate details of the patient's condition to the emergency department nurse and team. From there, a team of medical professionals is in motion, preparing for the patient's arrival. *It's a full alert.*



**A Medical Library for the Community**

In 1966, the Howard P. Preston Medical Library opened its doors at the The University of Tennessee Medical Center and the UT Graduate School of Medicine as an on-site resource for patients, physicians, researchers, and students.

Preston Medical Library and Learning Resource Center soon became a nationally and internationally recognized academic medical library, and today. The library will empower patients, facilitate collaborative learning and make medical information more readily available to all, free of charge. The University of Tennessee Medical Center has embarked on a capital campaign for the new Health Information Library.



### 3 SURGICAL CRITICAL CARE

Once the primary and secondary assessments have been completed, the patient is transferred to the surgical critical care (SCC) unit, where the plan of care includes continuing injury assessment, as well as treatment for any secondary complications. An orthopedic surgeon may be called in to evaluate other injuries, such as broken bones.

"The trauma system works effectively, with the attending trauma surgeon leading the team and multiple specialists contributing to care for all of the patient's injuries," says Scott T. Smith, MD, an orthopedic surgeon at the medical center.

When there are broken bones, the energy or force that caused the fractures is factored into the treatment. A low-energy impact break is caused by a slip and fall; a high-energy impact break results from an automobile accident at 50 miles per hour. In both categories, surgery and other techniques for repairing broken bones have advanced dramatically over the years.

When something unexpected happens, the presence of a Level I Trauma Center with experts on-site 24 hours a day is peace of mind. At the University of Tennessee Medical Center, the team is in place, ready, and on full alert.



## COMMUNITY BENEFIT

### *Emergency & Trauma*

## The Impact of Concussion

An academic medical center encourages important and relevant research, including studies of head trauma and sports medicine. Dedicated specialists are conducting a study to determine if children and young adults could be genetically predisposed to more severe concussions and if genetics could indicate recovery time from a concussion.

Concussion is an injury to the brain due to rapid rotation of the head caused by trauma to the head or other part of the body. Concussion can have long-term effects.

Tom Terrell, MD, and his colleagues are attempting to find a biological link to the association between genetic makeup and concussion risk in athletes. The study is funded by the National Operating Committee on Standards for Athletic Equipment and is the largest prospective cohort study of its kind in the U.S. It has the participation of 15 colleges and universities in the Southeast and about 2,500 athletes in collision sports.



"We believe the study will reveal if there is genetic predisposition to more severe concussions, Terrell says. These findings may potentially determine how quickly athletes should return to play or whether they should play collision sports at all. For those who have suffered concussions, our findings might provide promising information about the risk for additional concussions and the duration of recovery time. With larger long-term studies, we may be able to prevent concussions and predict who is vulnerable to more severe concussions."



# Paying it Forward



Toward the end of her pregnancy, Jeanne Potter felt as if the doctor's office had become her second home. Expecting twins, she went for daily checkups with Robert Elder, MD, her OB/GYN at the University of Tennessee Medical Center.

"We were doing all the right things, but there were still complications," says Jeanne.

"One day she came in and I said, 'Look, we've got to have these babies today,'" says Elder, who is also medical director of the Center for Women's and Children's Health at the University of Tennessee Medical Center.

Timing was everything. With her husband, Boog, at her side, Jeanne immediately checked in for an emergency C-section. Within hours, son Corson and daughter Addison were born, two months premature and severely underweight. The Potters knew the twins were destined for the Neonatal Intensive Care Unit, or NICU. As for the experience they would have there, again, timing was everything.

The Potters, who delivered in April 2007, were among the first families to benefit from the medical center's Phase I expansion of the NICU. The \$4 million renovation had just been completed and had brought with it state-of-the-art equipment, specialized services, and a designation as the region's first and only Level III private-room NICU. Nearly half of the 58-bed nursery had been converted from an open environment into a suite of individual rooms – each with sophisticated controls for light, sound, and temperature designed to ease the entry of sick, premature, and at-risk babies into the world. The Potter children stayed together in one of five new "twin rooms" created by the Phase I expansion.

Phase I renovated 28 of the NICU's 58 beds with a planned Phase II expansion to convert the rest of the unit. "It's like 'A Tale of Two NICUs' right now," says Elder. "While the same exceptional care is available in both the open-bay and the private rooms of the NICU, the private rooms provide a soothing, personal environment for babies and parents to bond, nurture, and heal."



The medical center is in the midst of a capital campaign to make Phase II a reality. While Phase I was funded by operational cash and federal assistance, the additional \$4.8 million necessary for Phase II is coming entirely from philanthropic dollars. Thanks to Boog and Jeanne Potter's \$50,000 gift and other gifts from throughout the community, the medical center has raised \$2 million so far toward this effort.

**"I can't think of a better way to make a difference than helping kids get better care right at the beginning of life,"** says Boog, who runs several businesses with Jeanne's help. **"We were definitely in the right place at the right time when the twins were born. If we can help in some way to let other families have that kind of experience, that's our motivation."**

"The research is clear: there are definite medical advantages," says Mark Gaylord, MD, a neonatologist and professor of pediatrics at the University of Tennessee Medical Center. The lower light cuts the chance of retina damage, separate rooms reduce the spread of infection, and the sound-dampening floors and wall treatments minimize sleep problems. "We cut the noise to about 30 decibels in the single rooms, compared to twice that or more in the open areas," says Gaylord.

"It was still a shock in terms of the wires, the tubing, the ventilators. Nobody can prepare you for a premature birth," Boog says. "But the atmosphere and the care made all the difference."

"As difficult as it was, we had the feeling we were in great hands," says Jeanne. "The NICU holds a special place in our hearts, and always will."

## High-Risk Regional Perinatal Program *Creates Healthy Moms, Healthy Babies*



Decades of dedication, passion, relationship building, and unselfish service to the East Tennessee region are the foundation of the Regional Perinatal Center at the University of Tennessee Medical Center. As the home of one of only five designated regional perinatal centers in Tennessee, the medical center strengthens the community and its people by setting an example of high standards in education and creating improved outcomes for the region's mothers and babies.

The state of Tennessee's regionalization program, which began in 1976, included the establishment of the perinatal center – an individualized program that provides consultation, patient referral, communication, specialized equipment, transport for high-risk patients, in-service and outreach education for caregivers, and site visits to local hospitals. Not only does the state's designation hold the medical center to a high standard of patient care and services, it also requires that the center maintain relationships with hospitals, educate the community and health professionals, and keep detailed records that track patients throughout their care.

Rita Hillhouse, RN C, director of the perinatal center, has worked at the medical center for 35 years. She has watched the regional and medical center's perinatal programs develop into what it is today: an invaluable resource to health professionals in the entire region as well as the local community.

The program trains nurses and physicians to handle emergencies and identify problems early in a pregnancy. "It's easier to transport a mother prior to delivery than to transport a sick baby," Hillhouse says. "Physicians know they can send their high-risk pregnancies to the medical center when they need our expertise because we are the only hospital in our area that provides tertiary care to both high-risk mothers and babies."

The perinatal center also reaches out to healthcare providers through physician lectures and hospital visits as well as through its consultative service. Its maternal-fetal-medicine and neonatology doctors readily make themselves available to speak with area physicians when they call. "I'm proud to be a part of this program and to help educate other practitioners," says Vichien Lorch, MD, a neonatologist. "Throughout my 28 years at the medical center, I've seen our regional perinatal program become one of the largest in Tennessee."

*"Relationships and trust are the key to everything,"*  
- Rita Hillhouse, RN C.

"Due in part to ongoing efforts through the regional perinatal program, mothers and babies in East Tennessee continue to have better pregnancy outcomes and lower infant-mortality rates than in many parts of the United States," says Bobby C. Howard, MD, medical director and maternal-fetal-medicine physician at the perinatal center. "There is still work to be done, so we're implementing strategies ranging from improving pre-conceptual care to maximizing prenatal care through Centering Pregnancy programs to optimizing neonatal care through the Tennessee Initiative for Improving Quality Care."

## Respiratory Therapy Reaches Out to Local Middle Schools

In Tennessee, our youth smoking rate is higher than the national average of 17.2% (as of 2009). Nearly 21% of high school students smoke, and 20% of adolescent males use some form of smokeless tobacco. With smoking beginning at such a young age, it is important to start intervening early. While smoking cessation efforts have focused on cigarette smoking, education about the hazards of smokeless tobacco has been fairly limited.

After recognizing the need for smoking prevention education throughout the community, medical center respiratory therapists began working with Anderson, Knox, Morgan, and Roane county schools to establish an education program geared towards adolescents. Through the efforts of the Respiratory Therapy Department and these schools, therapists have reached over 1,200 students in the 5th to 12th grades and armed the students with the information they need to resist or stop smoking or using smokeless tobacco.



*"Even today, nearly 50 years after the first surgeon general's report linking smoking and health, tobacco use remains the single largest preventable cause of death for both men and women."*

Healing, education, and discovery - not just our mission at the medical center, but also our commitment to the community.

As the region's only academic medical center, the University of Tennessee Medical Center has dedicated itself year-after-year to providing the East Tennessee community with healthcare screenings and educational programs.

More than 66,505 individuals in the region took advantage of outreach opportunities offered by the medical center in 2011.

A few of the community education/screening opportunities offered in 2011:

Category	Persons Served
Community Health Improvement Services	52,177
Health Professions Education	9,723
Subsidized Health Services	387
Community Building Activities	4,218
<b>Total:</b>	<b>66,505</b>

## Community, Education, & Screening

As the region's only academic medical center, The University of Tennessee Medical Center has a mission to serve the community through healing, education, and discovery.

This mission of education extends outside the walls of the medical center to the community itself by way of healthcare screenings and educational programs. The Heart Lung Vascular Institute offered a total of 186 educational opportunities to the East Tennessee region, which ranged from community and corporate health screenings, cooking classes offered by the Healthy Living Kitchen, lunch and learn educational talks, health fairs, and fitness programs. One particular community outreach program that launched in 2009 was the very successful HeartWise wellness fair. In recognition of American Heart Month, HeartWise is a comprehensive community wellness fair that takes place annually during the month of February at the medical center's Heart Lung Vascular Institute. HeartWise provides physician-led community education on topics such as calcium scoring, minimally invasive treatments for atrial fibrillation, heart disease in women, and advances in the treatment of cardiac valve disease. Screening opportunities included a comprehensive cardiovascular risk assessment, COPD pulmonary testing, and cardiac calcium scoring utilizing the non-invasive 64-slice CT scanner. In its first year, HeartWise screened approximately 240 community members with many more attending the education talks and cooking classes offered that day.



### *Early Detection Potentially Saves Another Life*



After her brother's stroke in 2008, Deborah Welch, then 54, decided to check on her own health status and make certain that she was not at risk of the same. She attended the annual HeartWise screening at The University of Tennessee Medical Center's Heart Lung Vascular Institute in February, and was startled to hear what they discovered. Deborah's carotid artery ultrasound assessment revealed that she had 80% blockage in the artery on one side of her neck and 40% blockage on the other.

"I just wanted to see where I stood since my brother's stroke," Deborah says. "I worried about my own health." Other than family history, Deborah had additional risk factors

for stroke and heart attack such as diabetes and smoking, but she did not have any symptoms.

Deborah's first choice for treatment was The University of Tennessee Medical Center, where her brother had been treated when he had a stroke. Deborah met with Michael B. Freeman, MD, a vascular surgeon with University Vascular Surgery.

Deborah is alive today and continues regular checkups with her physician and vascular surgeon. She is thankful her condition was detected early to prevent the complications and disability which could have resulted if a stroke had occurred.

## *Fostering Breast Health*



When Geraldine Newman went to a women's meeting at her housing complex in Morristown, she didn't know it would quite possibly save her life. During that meeting, Newman learned about the Breast Health Outreach Program (BHOP), a part of the University of Tennessee Medical Center's Cancer Institute. Members of the BHOP team were presenting an educational program on breast health, which included instruction in how to perform a breast self exam. They also informed attendees about an upcoming visit to the housing complex by the medical center's mobile mammography unit.

BHOP is designed to provide essential breast health services to women in East Tennessee. It offers free on-site classes at businesses, churches, and other locations in 25 Tennessee counties. The comprehensive classes focus on each person's risk of breast cancer and on the benefits of early detection by means of breast self-exams, clinical breast exams, and mammography screening. The goal is to provide women with information that empowers them to make informed decisions about their own breast health. Once a BHOP class is completed, the participants have the opportunity to sign up for a mammogram on the medical center's state-of-the-art mobile mammography unit.

The mobile mammography unit is staffed by a female driver-receptionist and a radiology technologist. It logs thousands of miles annually and provides service six days a week. Newman knew it had been several years since her last mammogram and thought the mobile unit's visit to her community was an opportunity she couldn't pass up.

Shortly after she had her mammogram, she received notification indicating that the result was abnormal and additional testing was necessary. She and her late husband, Roy, came from Morristown to the University Breast Center for a breast ultrasound and biopsy, which showed that she did in fact have cancer. She was referred to John Bell, MD, a surgical oncologist at the medical center. "He really calmed my fears and explained everything to me so clearly," says Newman. "After my surgery to remove the lump and some lymph nodes, I had several weeks of radiation and took medication for five years. Now I'm cancer-free."

"Cancer-free is a phrase the BHOP team loves to hear. Assistant coordinator Peggy Iachetta says, "We work hard to educate women about the importance of early detection, and it's exciting to see the impact this program has had on so many lives. Almost 20,000 women have been taught to take charge of their breast health by the BHOP team since its inception in 1996. And that's 20,000 women who know the importance of early detection and realize that breast exams and mammography screening can save lives."

Because Newman's cancer was caught early, she's been able to continue her job as a foster grandparent at the Douglas Cherokee Head Start program and to enjoy her three children, six grandchildren, and one great-grandchild. "If it weren't for the BHOP program," she says cheerfully, "I might not be alive today."

## On the Road to *Better Health*

While the lifesaving patient care provided inside the walls of the University of Tennessee Medical Center Cancer Institute is second to none, work occurring outside those walls is also saving lives. When medical staff and employees of the Cancer Institute are out of office, it's most likely because they're out in the community presenting important messages about prevention and early detection. Education is a key component in the Cancer Institute's mission of providing the highest level of patient care. And that care begins long before people reach the medical center.

For many, it begins "out of office" – in the communities where they live, the businesses and industries where they work, and the places where they worship. Improving breast-health knowledge and helping people recognize the importance of routine cancer screenings is a central goal of the Cancer Institute's Breast Health Outreach Program (BHOP).

Other equally important Cancer Institute initiatives have emerged, based on the successful BHOP model. During prostate-cancer awareness month each September, hundreds of men across the region receive free screenings for the disease. "Because one in six men will develop prostate cancer in their lifetime, we understand the vital need to provide easily accessible screenings," says Georgette Samaras, education coordinator at the Cancer Institute. The screenings include a blood test for prostate specific antigen (PSA) and a digital rectal exam performed by a medical center urologist. The response to the program has been extremely positive and new sites across the region have been added annually to meet the increased demand and provide access for people with the most need. Excluding skin cancer, prostate cancer is the most frequently diagnosed cancer in men, and early detection is the key to survival.



Skin cancer, however, should never be overlooked where risk reduction, screening, and early detection are concerned. It is the most common form of cancer in the United States for both men and women, yet often there's too little awareness of it. While the incidence rates for many other types of cancer are leveling off, those for skin cancer and melanoma continue to rise. Understanding that more needs to be done to inform the public about the lifesaving benefits of skin-cancer screening, the Cancer Institute established its SunScreeners program. James Lewis, MD, a surgical oncologist specializing in melanoma at the Cancer Institute, says, "The best way to avoid this potentially deadly disease is to limit your exposure to the sun. The SunScreeners program detects skin cancers early and ultimately saves lives."

The Cancer Institute has been spreading the word about skin cancer in a variety of ways. It shares information on the importance of wearing sunscreen and provides special software to visually show people what they will look like after years of exposure to harmful ultraviolet rays. Participants learn about warning signs and are offered free skin screenings that use special lighting to detect skin cancers. The SunScreeners program has been offered in workplaces, at senior centers, and at outdoor sporting events. A number of people have been referred to dermatologists for further evaluation, and several cases of melanoma have been detected in early stages as a result of the free screenings.

The latest program taking the Cancer Institute staff and physicians into the community is the gastrointestinal outreach program that educates participants about colorectal cancer and the importance of the colonoscopy screening. "Because colon polyps can often be detected and removed

before becoming cancerous, we must provide education for both the general public and clinical professionals about warning signs and the importance of early detection," says Keith Gray, MD, a surgical oncologist with the Cancer Institute. The program has been successful in promoting this important screening and will be expanded to more locations in the coming years. Because prevention is crucial in the war against cancer, the Cancer Institute continues to provide a free eight-week smoking-cessation program and a quarterly educational lecture series that's open to the community.

The ultimate goal of all these initiatives is to decrease the burden of cancer across East Tennessee through education and screening. So whether the concern is breast health, sun safety, or prostate cancer, the important message of prevention and early detection is spreading – thanks to the "out of office" professionals at the University of Tennessee Medical Center Cancer Institute.



## Reeling in a Healthier Life *How SunScreeners Helped Make it Happen*

Curtis Moore, divisional director of Oak Ridge National Laboratory's Campus Support and Instrumental Division, is thankful for the SunScreeners program at the University of Tennessee Medical Center Cancer Institute.

*As far as Moore is concerned, the SunScreeners program saved his life. "I had a spot on my arm for about five to six years," he says. "My daughter told me I needed to get it checked out, and I thought I might as well, since it was free and on campus.*

*Because of my results from the SunScreeners program, it was recommended that I follow up with a dermatologist due to suspicious findings, so I did. A biopsy was performed, and I was diagnosed with lentigo maligna, a type of malignant melanoma, also known as Hutchinson's freckle. Two weeks later I had it surgically removed. My dermatologist told me I was lucky that it didn't spread down into my lymph nodes, requiring further treatment.*

*If it wasn't for the SunScreeners program, I probably wouldn't have gone to get it checked out. Now I tell my staff, 'Get it checked out. It saved my life, and it could save yours'."*

## One Beacon of Hope The Cole Neuroscience Center

For more than 35 years, the Cole Neuroscience Center, part of the University of Tennessee Medical Center's Brain and Spine Institute, has provided care to patients with degenerative neurological disorders.

The only neurology subspecialty center of its kind in the region, Cole offers a complete spectrum of care for diseases such as Alzheimer's, Dementia, Movement Disorders, Parkinson's, Multiple Sclerosis (MS), Muscular Dystrophy, Amyotrophic Lateral Sclerosis (ALS or Lou Gehrig's disease), and Epilepsy. Its specialists work together to develop treatment plans that help both patients and their families. From the latest diagnostic tools and information on clinical trials to compassionate counseling and long-term care options, the Cole Neuroscience Center has so much to offer – especially hope.

Thanks to generous contributions from the Robert F. and Monica Cole Foundation, the clinic can offer crucial education and support for a patient's whole family. The team of specialized healthcare providers includes a registered nurse and a social worker, which is not typically found in a physician's office. The nurse's role is to teach the patient and family about the disease and medication management. The social worker meets with the family to identify risk points and provide information about support services. These services might include rehabilitation referrals, the ability to order special equipment, information about support groups, and respite care to give a weary family member a much needed rest. The disease-specific clinics at Cole include:

**The Movement Disorders Clinic –**  
Michelle Brewer, MD, and William Paulsen, MD

**The Memory Disorders Clinic –**  
John Dougherty, MD, Richard Gibson, MD, and Monica Crane, MD

**The Epilepsy Clinic –**  
Steven Rider, MD, and William Paulsen, MD

**The Multiple Sclerosis Clinic –**  
Randy Trudell, MD

**The Muscular Dystrophy Clinic –**  
Brian Wiseman, MD

**The Amyotrophic Lateral Sclerosis Clinic –**  
Randy -Trudell, MD



### Hope

His wife had planned a 40th birthday party for him and invited his closest friends. At the party, a couple who had medical backgrounds noticed some changes in Tom. His friends suggested that he see a neurologist. Tom looked in a medical encyclopedia and skimmed the relevant sections. He read the definition of Parkinson's disease, thought nothing of it, and went to see his family doctor. But he'd begun to become more aware of his body, noticing how his hands moved and how he had to swallow more frequently, which caused sore throats.

"The symptoms and the disease seemed to sneak up on me," he says. After talking to his family doctor, Tom was referred to Michelle Brewer, MD, a neurologist at the University of Tennessee Medical Center. He became a patient at the medical center's Cole Neuroscience Center and began receiving treatment for Parkinson's disease. "Dr. Brewer is very good," he says. "She's able to match my medication with my symptoms, and she adjusts the medication to help with my movement." Tom has had Parkinson's disease for 14 years now. He says he's thankful for the Cole Neuroscience Center. There have been times when he wouldn't have had the medication he needed without the center's help. He's also grateful for the personal support of the Cole staff, with whom he's on a first-name basis. The Cole Neuroscience Center has given him hope.

## Compassionate Nursing Care A Daughter & Mother's Story of Gratitude

"I firmly believe there is a difference between knowing nursing skills and being a nurse," says Elizabeth Hood, recalling what happened after her mother, Betty R. Hood, was admitted to the University of Tennessee Medical Center's Neuro-Stroke Unit. A stroke is terrifying for both the patient and the family, but Elizabeth says the extraordinary nursing care her mother received went above and beyond their expectations and helped them make the best of a tough situation.



In March of last year, Betty Hood was rushed to the emergency room and diagnosed as suffering from a stroke, the right side of her body paralyzed. Betty was admitted into the University of Tennessee Medical Center's Stroke Center, a certified primary stroke center, where her daughter Elizabeth was by her mother's side throughout her stay.

The whirlwind experience of a stroke is daunting and confusing for most patients and family members. Like Betty, patients in particular often can't fully understand what is going on around them.

Speaking with tears in her eyes, Elizabeth remembers her mother was treated with the utmost respect and care for her dignity. "Throughout our entire experience at the medical center, the nurses treated my mother as a person," she says. "It's very easy for staff just to perform nursing duties, but they did more than that. They were kind, attentive, and sensitive to my mother's need for dignity during a stressful and terrifying time."

During Betty's hospital stay, there were times when she needed immediate assistance but her daughter was the only person in the room with her. "When I asked for assistance," Elizabeth says, "they were by my mother's side in a heartbeat." She remembers walking the halls of the hospital and noting how the nurses put 100% of themselves into helping their patients. "I saw absolutely zero reluctance to do sometimes unpleasant tasks, and never did I see a nurse treat a patient or family member with anything less than genuine kindness and caring."

When it was time to discharge Betty, that care and commitment continued. "Not only did her nurses have excellent skills and show consideration for my mom's feelings," Elizabeth says, "but the staff patiently answered all my questions and assisted us with transition plans. They helped both my mother and me through a very emotional and frightening situation." When she and Betty left, they felt more like guests than patients in a hospital. Many of the nurses came to say goodbye to Betty and wish her well. She continues to work on rehabilitation in her hometown in Scott County, Tennessee, but she'll be forever grateful for the excellent nursing care she received at the University of Tennessee Medical Center.



### Get With the Guidelines Stroke & Heart Failure Awards

In 2011, the University of Tennessee Medical Center received the American Heart Association/American Stroke Association's Get With the Guidelines®-Stroke and Heart failure Gold Quality Achievement Awards. The recognition signifies that the medical center met the stringent criterion outlined by the AHA and American College of Cardiology for a period of at least 24 months.

Get With The Guidelines is a quality improvement initiative that provides hospital staff with tools that follow proven evidence-based guidelines and procedures in caring for heart failure and stroke patients. As the region's only academic medical center, the University of Tennessee Medical Center strives to provide quality, evidence-based care to patients throughout the region. Through adherence to the stringent parameters of the Get With the Guidelines® program, the University of Tennessee Medical Center is recognized with hospitals throughout the country for excellence in patient care.



How can we help you make your life “better” today? Through this report, I hope you are enlightened by the many ways we are making life better in the communities we serve on a daily basis.

“Better” means you are not alone when you are trying to understand or cope with an illness. It means you have compassionate people and learning resources that help make life better. It means screenings and workshops that help you make healthcare choices that matter. It means that every member of the community has a right and responsibility to good health, and that by achieving better health for every individual we create a stronger and healthier community overall. By promoting healthy lifestyles through health fairs, screenings and innovative outreach programs, we have an opportunity to touch lives in a meaningful way.

This report demonstrates the positive impact of the University of Tennessee Medical Center on East Tennessee. A core promise to the community is that we provide the programs, education, and resources that improve the overall quality of life. In delivering on that promise, we are accountable to work with our community partners to make the best possible use of health resources to provide access to better healthcare.

For fifty-five years, community outreach has been part of our mission... to serve through healing, education, and discovery. Our success is measured by the changes people experience in their day-to-day lives and the impact in which we have been able to contribute to their overall quality of life.

By promoting wellness and informing people about the resources available to help them live healthier lifestyles and by providing the tools, programs and resources, we hope we can help you make your life better today and make our community better tomorrow.

Sincerely,

Rhonda McAnally, RN BSN CEN  
Director, Network Development  
Community and Corporate Health



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