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HEALTHCARE CONSTRUCTION, DESIGN & FACILITY PLANNING

Grand Openings

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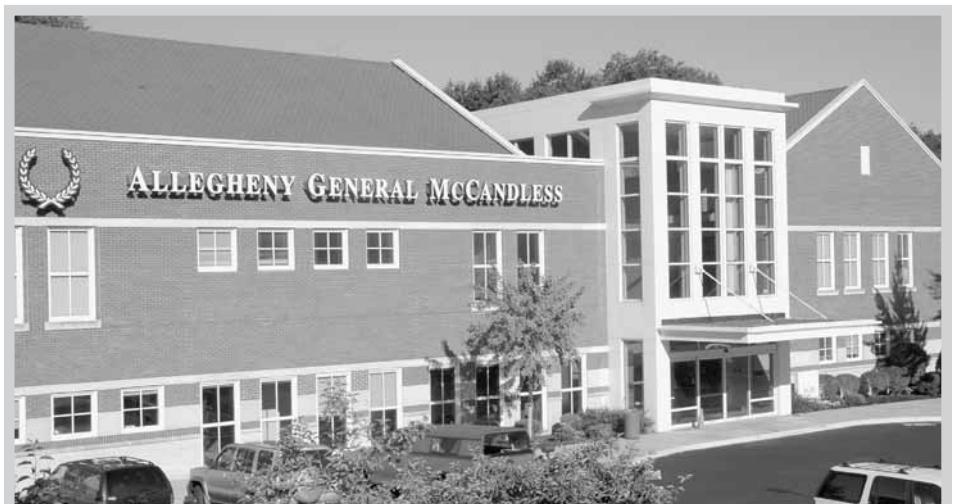
VNA Hospice, Western Pennsylvania has recently held a dedication for the opening of the Bob Schmieler Memorial Library. The library consists of over 200 books for adults and children on a variety of grief and loss issues and on coping with serious illness. The library is open to the public and is housed in the VNA Hospice Building at 160 Hindman Road in Butler.

The Library was made possible through a generous contribution from Claire Schmieler of Harrisville in memory of her late husband, Bob. A retired school teacher, Claire states, "Bob was a husband, father, and pappy who valued life, family and education. When the opportunity arose to earmark donations for a library, I knew it was the right thing to do." The contribution enabled VNA Grief Specialists to purchase carefully selected reading materials covering a wide range of loss subjects.

The construction of the library was taken on as an Eagle Scout project by 14 year old Neal Skibicki of Chicora. The project included planning, designing, and building library shelves, raising funds for supplies, organizing friends and volunteers to assist, and decorating the area.



(l-r) **Claire Schmieler, Jolene Formaini, Bereavement Coordinator, VNA Hospice (she is holding a dedication plaque for Bob Schmieler), and Neal Skibicki, Eagle Scout Candidate.**



Allegheny General Hospital Opens Region's First Center for Women's Heart Disease

Allegheny General Hospital (AGH) recently opened The Women's Heart Center, a comprehensive outpatient program that provides women with an array of preventive, diagnostic and therapeutic cardiovascular services in one convenient location.

According to Srinivas Murali, M.D., director of AGH's Division of Cardiovascular Medicine and medical director of the McGinnis Cardiovascular Institute, the demand for a program focused entirely on women's cardiovascular health is significant considering the increasing prevalence of the disease and a growing body of knowledge about its distinct manifestations in women.

"Cardiovascular disease strikes women in epidemic proportions, yet studies consistently show the vast majority are largely unaware of their risk for this disease. In western Pennsylvania, with its aging demographic, the incidence of heart disease is even more pronounced. Our goal with this new center is to create a resource for women unlike any other, a facility where patients can be evaluated, diagnosed, medically managed and educated about risk reduction all in one place," Dr. Murali said.

Women visiting the new Center will have the opportunity to undergo a comprehensive cardiovascular disease risk assessment that helps doctors develop an individualized prevention and treatment plan.

Advanced non-invasive cardiovascular diagnostic capabilities available onsite include echocardiography, nuclear stress testing, treadmill stress testing and holter monitoring.

If more extensive diagnostic testing is necessary, the center affords women swift access to AGH's nationally recognized cardiac catheterization and cardiovascular magnetic resonance imaging (MRI) programs.

Novel diagnostic modalities such as cardiac MRI and multi-slice computed tomography (CT) will also be available at The Woman's Heart Center in the near future, Dr. Murali said.

"This program has been designed to provide state-of-the-art, multi-disciplinary, gender specific cardiovascular care throughout a woman's lifespan. By employing a proven disease prevention model of care and surrounding patients with the highest level of clinical expertise and technological innovation, we hope to empower more women to take a proactive role in addressing and improving their cardiovascular health," said Indu Poornima, M.D., AGH cardiologist and medical director of The Women's Heart Center.

Dr. Poornima is one of four female cardiologists on staff at the AGH McGinnis Cardiovascular Institute who will oversee the care of patients at the new center. The others include Kimberly French, M.D., Rina Gandhi, M.D., and Rachel Hughes-Doichev, M.D.

Bobby Khan, M.D., Ph.D., one of the nation's preeminent cardiologists specializing in cardiovascular disease prevention and cardiometabolic syndrome, will also play a key role at the center when he joins AGH from Emory University in April, 2008.

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J.C. Blair Replaces 52 Hospital Beds

Two large tractor trailers recently rolled into J.C. Blair Memorial Hospital's parking lot with 52 new hospital beds. Hospital staff formed an assembly line from the loading dock to the Hospital's three inpatient units, moving the 52 new beds in and 52 old beds out.

Hospital beds have a useful expectancy of 12-15 years. The beds being replaced have been in service for 27 years. "This project is long overdue. Our patients have told us and our nurses have told us," said Vice President of Patient Care Pam Matthias. "This is a big investment – a total cost of \$299,000 – that will pay off in improved patient comfort, care and safety."

The new beds are manufactured by Hill-Rom, the leading manufacturer of hospital beds. The new Tempur-Pedic Medical mattresses have been proven to reduce the incidence of pressure ulcers more effectively than foam and air mattresses. The beds also have built-in scales to weigh patients, television controls, and bed alarms to alert nurses of patient needs.



J.C. Blair Memorial Hospital patient Stella Finkle of Mill Creek was the first patient moved into one of the 52 new hospital beds.

Alle-Kiski Medical Center Breaks Ground for the Emergency Department Renovation and Construction Project

Alle-Kiski Medical Center (AKMC) recently held a ceremonial groundbreaking at the Carlisle Street main entrance of the hospital. The ceremony marked the beginning of a \$13 million construction project to renovate and expand emergency and urgent care services at the hospital.

The project will more than double the capacity of the Emergency Department from 9,000 square feet to 20,000 square feet and increase the number of patient exam/treatment rooms from 12 to 24. The plan involves expansion of the current department into existing hospital space, renovation of the existing Emergency Room and external construction. The project will provide flexibility to meet changing patient needs, improve patient flow, accommodate growing patient volume, enhance the patient's experience and satisfaction, decrease patient waiting time, improve security and increase patient privacy.

The project is expected to take about 24 months to complete and will be accomplished in various consecutive phases so as not to interrupt the flow of patient care.



(l-r) Congressman Jason Altmire; Charles J. Jacques III, chairman, AKMC Trust board; Dr. M. Stephen Heilman, chairman, AKMC hospital board; Cindy K. Schamp, president and CEO, AKMC; Dr. Calvin Miller, assistant director, Emergency Department; State Representative Frank Dermody, and W. Keith Smith, interim president and CEO, WPAHS



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HEALTHCARE CONSTRUCTION, DESIGN & FACILITY PLANNING

Governor Rendell Delivers Redevelopment Funding to UPMC Braddock

Governor Edward Rendell, State Senator Sean Logan, Allegheny County Chief Executive Dan Onorato, and State Representative Paul Costa shared in presenting a check for \$2,975,000 from the Commonwealth's Redevelopment Assistance Capital Program (RACP) to support UPMC Braddock hospital and assist with economic growth and development within Braddock and its neighboring communities. The Commonwealth funds will be matched with \$4 million from UPMC to provide for renovations and expansion at UPMC Braddock.

Cynthia Dorundo, president and chief executive officer, UPMC Braddock, and Elizabeth Concordia, executive vice president, UPMC, and president, Hospital and Community Provider Services, accepted the check in the formal presentation attended by more than 100 local community leaders and health care partners. "This is a truly momentous occasion for UPMC Braddock and our community," stated Ms. Dorundo. "These funds will enhance care and access for our patients and our community. The partnerships that are evident in this room – leaders of our Commonwealth and County governments, our local elected officials, community and business leaders, staff and physicians, and UPMC leadership – attest to the commitment to continue UPMC Braddock's rich tradition of quality and accessible health care into its second century."



The improvements will also help to "green" the environmental footprint of UPMC Braddock and create new and sustainable jobs within Braddock and its neighboring communities.

In addition to Governor Rendell's RACP presentation, Senator Logan presented a check in the amount of \$250,000 in additional funding for the UPMC Braddock Steps to a Healthy Community health disparities initiative. Steps to a Healthy Community, with previous financial support from Senator Logan and the Commonwealth of Pennsylvania, has developed focused initiatives and programs to address diabetes, asthma, cardiovascular disease, cancer, maternal and child health, and oral health within the minority community. The new funds will provide for a special "Steps to Home" program providing home visitation services for continuity of care and health maintenance for patients recently discharged from the hospital.

The funds will be utilized to: build a new patient and visitor entrance on Braddock Avenue, the main thoroughfare within the community, enhancing pedestrian public transportation access; provide a new Magnetic Resonance Imaging (MRI) suite with upgraded technology and equipment; increase monitored bed capacity for Medical/Surgical patients on inpatient care units; and expand parking, lighting and security features throughout the hospital campus.

The new facility also is expected to create more than 250 permanent health care jobs in Monroeville.

Demand by Patients and Physicians Fuels UPMC's Growth in Eastern Suburbs

In response to a growing demand by patients and physicians, UPMC is expanding its world-class services in the region by establishing a new adult outpatient facility and expanding its pediatric services in Monroeville.

"Many Monroeville area parents have asked us to provide more specialty care for their children," said William Varley, M.D., a Children's Hospital of Pittsburgh pediatrician with a practice in Monroeville. "This will allow us to expand our pediatric presence and offer comprehensive care closer to home."

The new facility also is expected to create more than 250 permanent health care jobs in Monroeville.

The new UPMC adult outpatient facility will be in the former Palace Inn Hotel and will include outpatient clinics, diagnostic imaging services such as CT scans, x-ray, ultrasound and mammography, an ambulatory surgery center, an urgent care center and physician offices. UPMC closed on the hotel March 5, with a purchase price of \$18,975,000. The building, which sits on 12 acres, will be completely renovated. There is no cost estimate for the new facility, which is expected to be completed in about two years.

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Cover Story: Expansion Project, HAP Role Keep Uniontown CEO Busy

Continued from page 1
reinvestment."

Having been involved with HAP for many years, Bacharach said he has come to recognize the "complexity of these matters and the great difficulty in finding solutions for a diverse membership organization."

"The politics and economic factors require a very delicate balance between competing priorities and the ability to reach consensus to the extent possible," he said.

Asked if health care has become an even more important issue on the national level this year because of the presidential campaigns and election, Bacharach said the significance is amplified "because of the cost of meeting the expectations of an aging population."

"In my opinion, a unified approach to addressing health care delivery in the United States must be a priority for the next administration," Bacharach said. "A continuation of the disjointed, incremental approach to health care reform only delays what can ultimately become a crisis for our nation. Like it or not, I believe that the ultimate solution is a nationalized system of care."

Addressing the lingering medical liability problem for physicians and hospitals in Pennsylvania, Bacharach said it has "eased a bit as a consequence of reforms that have been enacted."

"But there are still problems which make Pennsylvania an unattractive location to practice medicine," he quickly added. "Resolving the Mcare issue for physicians is clearly the primary issue which must be addressed now. Enacting reforms to correct the basic inequity of Joint and Several liability is also a key issue for health care providers as well as businesses operating in the Commonwealth. Given the state, legal and political obstacles, I am skeptical that caps on economic changes can be enacted. This may need to be corrected through Federal action to level the playing field across the country and ultimately make the United States more competitive globally."

Bacharach also emphasized that HAP does work, and will continue to work, with the Pennsylvania Medical Society on "this and other issues of mutual concern."

Recruiting and retaining other critical (key) health care professionals also remains as a hurdle for hospitals in Pennsylvania and across the country, he said.

"Nursing continues to be challenging; however, other clinical areas have proven to be as difficult or in some cases more problematic," Bacharach said. "In particular, the changes in training requirements for pharmacists and physical therapists has suppressed availability while demand has expanded. The lack of training programs in areas such as medical laboratory technologists is also of great concern. For hospitals, we face the additional obstacle of operating 24/7 with high acuity patients in a much more stressful environment. We are at a disadvantage due to our collective commitment to care for patients regardless of when and why they present themselves for care, or their ability to pay for services."

Reaffirming his position on inadequate reimbursements for treatment of Medicare and Medicaid patients, Bacharach agrees this issue constantly threatens the financial stability of hospitals and health systems. It is, he concurred, difficult to "keep your head above water when you are realizing only about 70 cents in return for each dollar you spend."

"Being the CEO at a hospital with eighty percent of our activity covered by either Medicare or



Taking part in traditional groundbreaking ceremonies for the expansion project at Uniontown Hospital are (l-r) Ben Wright, Chair, Hospital Board of Directors; Paul Bacharach, President/CEO; Dr. Richard Pish, President of the Medical Staff; Joseph A. Hardy III, Fayette County commissioner; state Senator Richard Kasunic, and state Representatives Timothy Mahoney and Deberah Kula.

Medicaid carries substantial consequences," he said. "With Medicare, the disparity created by the wage index methodology has been extremely detrimental to providers. On the horizon we have recovery audits (RAC's) and proposed payment adjustments, which don't come close to covering the cost inflation associated with staffing shortages and the demands of clinical and information technology."

Medical Assistance continues to be "extremely problematic due to the inadequacy of payment and the larger proportion of care carried by hospitals," he said.

"Some progress may be made in the current year but the plethora of problems inherent in the system will take more than one year to resolve," Bacharach continued. "Meanwhile, in the background, HAP is trying to assess the implications of the Governor's Cover All Pennsylvania plan in an objective manner recognizing that covering the uninsured has always been one of the association's goals."

Also in the area of finances, Bacharach sees investments in new technology "an unavoidable requirement to deliver quality care."

"Clinical technology cannot be overlooked," he said. "Information technology likewise is essential both from a business and clinical perspective. Once again, the availability of capital to upgrade and replace creates competing priorities which are difficult to resolve. We have taken the approach of trying to plan on a long-term (five-year basis) to pace these demands."

Bacharach also points to transparency of data related to hospitals as a continuous evolving issue.

"It has grown much more extensive and cumbersome," he said. "I applaud the efforts to consolidate these reporting requirements and trust that in the long-term the public will recognize how hard we work every day to protect the safety of our patients and to improve the quality of care and services provided by hospitals across the country."

Uniontown Hospital has emphasized its commitment to meeting community needs in many ways throughout its history. And the current expansion project epitomizes that mission.

"Our project entails an expansion of the facility which will allow for conversion to private rooms, consolidation of outpatient diagnostics into one easily accessible location, and doubling the size of our Emergency Department," Bacharach said. "We also will be making a number of changes to our campus traffic patterns and infrastructure improvements."

Bacharach said Uniontown Hospital has seen growth in Emergency Department



Heavy duty construction equipment clears the way for the foundation of the expansion project at Uniontown Hospital.

patients comparable to other facilities across Pennsylvania with a modest increase as a result of the closure of Tara Hospital in Brownsville in 2006. Uniontown Hospital is located only 12 miles from Brownsville.

"We expect to treat approximately 55,000 patients this year in an Emergency Department designed to handle fewer visits," Bacharach said. "Expansion of this department obviously is a necessity and a priority."

The expansion project also includes upgrading the hospital's mechanical systems and positioning facilities for future expansion.

Bacharach began his career in health care as a laboratory medical technologist. Ensuingly, he returned to the University of Pittsburgh to attend graduate school. He spent eight years in senior level positions at Westmoreland Hospital in Greensburg before becoming president and CEO at Uniontown Hospital in 1992.

"While I enjoyed working in the clinical lab, ultimately I sought a career path that offered more diversity and use of my analytical and personal skills," Bacharach said.

Bacharach grew up in the East End of Pittsburgh where his family owned a small bar and restaurant. Neither his siblings nor his children work in the health care industry, but his wife is director of a business/technical school that offers several health care programs.

Bacharach has no problem mixing his busy professional schedule with family activities.

"I have been fortunate in always being close to work," he said. "I found time to attend (his children's) soccer games and violin recitals and not feel that I short-changed the organization," he said. "My

leisure time is always focused on family and such personal interests as travel."

As for role models and mentors, Bacharach said he reads a lot of biographies "which usually provide insight into how one can be a productive contributor to society."

"Most recently reading biographies of Teddy Roosevelt, Robert Oppenheimer and Marquis de Lafayette, I found numerous parallels and lessons in how to deal with the challenges faced in large, complex organizations."

The inspiration Bacharach finds in those biographies complements his philosophy on the benefits of being a member of the Hospital and Healthsystem Association of Pennsylvania.

"There is no replacement for a single voice and consistent message from our industry," he said. "I am a firm believer in the view that a divided industry ultimately works to everyone's detriment. I have no doubt that going it alone can, at times, produce short-term gains, but ultimately a cohesive message developed by group consensus will work in our favor. It is distressing to see organizations that choose to sit on the sidelines and benefit from the fruits of the efforts and resources of others."

Given his track record of success and commitment to health care, Bacharach will never be found sitting on the sidelines. He has earned the respect of his peers in the profession and, perhaps more important, the gratitude of the people in his community, and beyond, who have benefited from his presence.

For more information, contact Karen L. Deicas, Director of Community Affairs, Uniontown Hospital, at (724) 430-5284 or deicas@utwn.org.



Donald Spalding



Scott Elste



Judy Abel



Chris deKoning



Kathy Vincent



Georgia Ray



Misty Bauman



Jessica Hmel



Lisa McDannell



Chris Schrum



Nancy Tyrrell



Christina Gatehouse



Brenda Blough



Jennifer Ratay



Tammy Rile

AROUND the REGION

UPMC Northwest Announces Staff Members' Achievements

A UPMC Northwest staff member has earned recertification in her specialty and another hospital employee has been chosen to serve on a state diabetes committee.

Sandy Strickland, MS, RD, LDN, CNSD, has been recertified as a nutrition support dietitian by the National Board of Nutrition Support Certification (NBNSC). Strickland is the first member of the UPMC Northwest nutrition staff to achieve this credential.

Diabetes Care Center manager Amy Uhler, R.N., has been elected to the Pennsylvania Diabetes Action Partnership (PDAP) Executive Leadership Team.

Mammography Technologist Added to Canonsburg General Hospital

Judy Abel, B.A. R.T. (R) (M) has been hired as a mammography technologist at Canonsburg General Hospital. Judy transferred from Allegheny General Hospital where she had worked since 1991.

Judy is a graduate of Robert Morris University with an associate degree in science and LaRoche College with a bachelors degree in radiography.

Chris deKoning, R.N., B.S.N., who works in the cardiac catheterization laboratory at Altoona Regional Health System, has earned his Bachelor of Science degree in Nursing from Mount Aloysius College, Cresson.

Altoona Regional Medical Staff Administrative Director Kathy Vincent, RHIT, CPMSM, CPCS, and Credentialing/IT Coordinator Georgia Ray, CPMSM, CPCS, have been recertified by the Certification Commission of the National Association of Medical Staff Services.

Misty Bauman, Jessica Hmel, Lisa McDannell and Chris Schrum have passed a national registry examination administered by the National Board of Respiratory Care. It earns them the title of Registered Respiratory Therapist.

Sewickley Valley Hospital Foundation Announces 2008 Board Officers

The Sewickley Valley Hospital Foundation has announced its board leadership for 2008. Donald Spalding will continue to serve as chairman, and Scott Elste is the secretary/treasurer.

Spalding has been a member of the Sewickley Valley Hospital Foundation board for five years. As the chair of the foundation board, he will also serve as a member of the Heritage Valley Health System board of directors. He is the retired president of Sewickley Valley Hospital.

Elste has been a board member of the Sewickley Valley Hospital Foundation for two years. He is the General Manager and Treasurer of Keystone Manufacturing, Inc. in Rochester.

Two Memorial Employees Join Elite Group of KAPE Examiners

Memorial Medical Center employees, Nancy Tyrrell and Christina Gatehouse, have joined just 30 individuals across the Commonwealth of Pennsylvania to have successfully completed extensive training to become state examiners for the Keystone Alliance for Performance Excellence (KAPE). As examiners, Tyrrell, RN, BSN, NHA, Director of Good Samaritan Nursing Care Center, and Gatehouse, who is the Director of Human Resources at Memorial Medical Center, will review applications for those entities applying for the KAPE award, a process that takes 40 hours to complete and includes attending consensus meetings with the KAPE team, writing a detailed report identifying the organization's strengths and weaknesses and conducting a site visit. The KAPE team then recommends recipients to the judges and Board for final determination of the KAPE award.

Promotions and Additions at Providence Point

Brenda Blough has been named Director of Resident Services for Providence Point, while Jennifer Ratay has moved to Options and Move-In Coordinator, and Tammy Rile joins the team as Marketing Counselor.

Blough joined Providence Point in 2004. She has worked in the senior housing industry for more than 14 years and holds a Bachelor of Science Degree, Certification as an Aging Services Professional, and a Masters Degree in Healthcare Administration.

Ratay, a graduate of the University of Pittsburgh, spent five years in health care sales following six years in retail banking with both Mellon Bank and PNC Bank.

Rile is a graduate of Waynesburg College, she has been active in a variety of sales positions for the past 20 years, most recently as Director of Marketing for the Covenant at South Hills Senior Living Retirement Community.

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The Medical Center Foundation Announces 2008 Board Officers

The Medical Center Foundation has announced its board leadership for 2008. Donald Flick will continue to serve as chairman, I. David Atcheson, D.M.D., is the vice-chair, and Judy Madder will serve as the secretary/treasurer.

Flick has served as the chairman of the Medical Center Foundation board for two years and in that capacity, is also a member of the Heritage Valley Health System board of Directors. Flick is a senior account executive with METLIFE in Monaca.

Atcheson has been a board member of The Medical Center Foundation for five years. He is an oral and maxillofacial surgeon with offices in Beaver and East Liverpool, OH.

Madder has served on The Medical Center Foundation board for five years. She is a former board secretary of CASA (Court Appointed Special Advocates) Beaver County.

UPMC Names Paul Wood to Lead Public Relations Team

The University of Pittsburgh Medical Center (UPMC) announced the appointment of Paul Wood to the newly created role of vice president of public relations. Wood will lead all of UPMC's global media relations and internal communications activities, reporting to Sandra Danoff, senior vice president and chief communications officer.

Wood spent more than 17 years at Ford Motor Co. where he was responsible for developing and executing communications strategies supporting a variety of Ford's operations, including the Office of the President, global purchasing, supplier relations, information technology, Lincoln Mercury, e-commerce and international public affairs.

Wood joined Ford from Chase Manhattan Bank, N.A., where he was vice president of corporate planning and development. Before joining Chase, he was with the Federal Reserve Bank of New York.

Wood earned a bachelor's degree in mathematics and a master's degree in statistics from The Ohio State University in Columbus, Ohio. He also holds an Accreditation in Public Relations from the Public Relations Society of America.

Centers for Rehab Services Announces New Facility Director

Kimberly (Zeske) Maguire, OTR/L, CHT has been promoted to Facility Director of Centers for Rehab Services Hand and Upper Extremity Rehab Clinic in Oakland.

Prior to being named facility director Kim worked as a staff occupational therapist, within the hand program, for CRS for 10 years. Kim has over 12 years experience working in long-term care, in-patient, out-patient and the rehabilitation settings.

Kim received a Bachelor of Arts degree in Psychology with a minor in Communications from Carlow College, and a Masters degree in Occupational Therapy from Boston University. Kim has been certified in hand therapy since 2001.

Wolstoncroft Appointed Director of Development at Waynesburg University

Peggy Wolstoncroft recently accepted appointment as Director of Development in the Office of Institutional Advancement at Waynesburg University.

A graduate of Louisiana Tech University, Wolstoncroft comes to Waynesburg University having spent the past eight years as Director of Annual Giving at Grove City College.

Wolstoncroft is a member of the Association of Fundraising Professionals and the Western Pennsylvania Roundtable for Annual Fund Directors.



Donald Flick



Dr. David Atcheson



Paul Wood



Judy Madder



Kimberly (Zeske)
Maguire



Peggy Wolstoncroft

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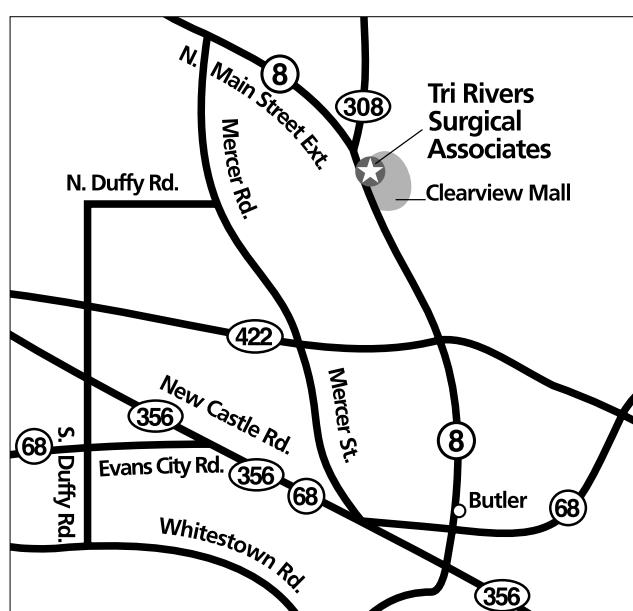
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EDUCATION

Investing in Education Technology Yields Dividends

One of my colleagues, Dr. Val Howard, and I just returned from a presentation we gave in Nashville titled "Transitioning to Technology." We were asked to share some of our developing expertise with an audience of nursing faculty regarding the role of technology in the education of nursing students. What has become clear to many of us is that the question is no longer if technology should be incorporated into the teaching/learning environment but how and what are the best practices.

When incorporating new teaching/learning tools into a course or curriculum, it is essential to plan the process thoroughly. In my presentation, I used the structure of the nursing process to illustrate how to incorporate technology: Begin with Assessment by examining student needs, professional standards, and available resources; continue with Planning, selecting the technology, planning the integration, developing the resources; move to Implementation, launching the technology, supporting the efforts of faculty and students; and end-



BY LYNN GEORGE,
PH.D., R.N.

ing with a thorough Outcomes Assessment.

Incorporating technology requires a thoughtful overview. A quality product will not result from just superimposing technology over a pre-existing course or curriculum. When considering and implementing change in a teaching/learning environment, an overarching concept must always be "Does this change represent an enhancement?"

Some research indicates that nurses lag behind physicians and others in embracing technology. However, in the academic arena, many nursing faculty are among the first adopters of technology for their teaching/learning environments. This is certainly true at Robert Morris University, where the nursing faculty has earned a reputation as early adopters of technology. Their use of simulation, learning management systems for online teaching, the incorporation of handheld technology (PDAs) and informatics into nursing curricula is contributing to a growing national trend. At this time, research is limited on the outcomes of these educational strategies, but early indications are very

positive with more studies underway.

There are challenges, however. With the average age of nursing faculty being over 50, most of us represent the group labeled by Marc Prensky as "digital immigrants." Our students, on the other hand, represent the "digital natives." This distinction can make the transition to technology worrisome for some faculty. However, as educators we understand the need to consider the learning styles of our students.

As Prensky and others suggest, we need to communicate with our students in their "native language". For example, I know that if I call my young adult children and leave a voice message I am less likely to get a response than if I text message them the same question. So while I would much rather hear the sound of their voice, I recognize that the method of communication is important if I want a timely response. It is necessary for me as an educator, and as a parent, to utilize new tools for communication based upon the most appropriate options available. Certainly, as educators, we need to make decisions that are pedagogically appropriate. Developing a comfort level with technology is a first step toward incorporating the use of that technology in an educationally sound manner. Technology can enhance our teaching by providing tools

for us to prepare our students for real world experiences in healthcare. Practice using electronic medical records (EMR) and simulation-based competency testing are examples.

Another challenge is the cost of technology. Mechanisms for funding technology upgrades are varied and include expanding department budgets, adding student fees, utilizing educational discounts and grant funding. All have implications for those affected. Each program must find the right budgeting process and match expenditures with outcomes.

Among the perceived benefits of the use of technology in nursing education programs are improved confidence and leadership skills. Students who use technology such as simulation or PDAs report that they find these tools to be beneficial to their learning. Preliminary studies also show that students who use technology report higher confidence and leadership skills. As faculty continue to find new and innovative strategies to establish teaching/learning environments that engage students, technology is sure to play an important role in the process.

Lynn George is the Associate Dean of the Robert Morris University School of Nursing and Health Sciences. She may be reached at george@rmu.edu.

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COVER STORY:

Lake Erie College of Osteopathic Medicine Makes Large Footprints

Continued from page 1

"Our students have the choice of four pathways, depending on how they excel in learning," explains Dr. Ferretti. Three of the pathways are traditional, four-year programs and include a system-based lecture/discussion curriculum; small-group, problem-based learning; and an individually-directed, independent study pathway.

The fourth pathway – the Primary Care Scholars Pathway – is an accelerated, year-round three-year program that LECOM began this academic year. "This pathway has generated a lot of interest," notes Hershey Bell, M.D., Associate Dean for Faculty Development and Evaluation. To gauge student interest, the College accepted six students into this program in October. Dr. Bell reports interest peaked beyond expectations, with 30 students expressing interest for the eight available spots in next year's program. The program will be able to enroll 12 new students in its fourth year of operation. "After that, if the pathway is as successful as we think it will be, we will open the program to accept whatever number seems appropriate."

Dr. Ferretti notes that one of the primary appeals of osteopathic medicine is its focus on the patient first, then the disease. "The student going into osteopathic medicine is philosophically driven to include osteopathic manipulative treatment as well as treating the mind, body, and spirit of the individual patient. Over the past 15 years, we have seen more of a focus on prevention, which has always been key to osteopathic medicine. Now we are seeing this philosophy becoming more commonplace."

Because LECOM is a private institution of learning, the College maintains affordable tuition. "We have one of the most affordable tuitions – about \$25,500 per year – in the country for a private medical school," states Dr. Ferretti. "Affordability is very important because the indebtedness of a medical student can be in the realm of \$160,000, which could drive students from practicing in primary care, for which there is a huge need in the country."

Dr. Bell notes all U.S. medical schools face a big challenge in proving to the public that high-quality medical care is a primary concern for medical educators. "About a decade ago, a report stated that hospitals and physicians were a major source of error leading to patient death. As a result, the entire medical profession is being held more accountable to produce only quality physicians. Here at LECOM we have responded to that challenge by incorporating competencies into our curriculum that specifically focuses on high quality care and high-quality outcomes. We want to ensure we produce students who will go out there to practice medicine above and beyond the standards. We are fortunate in that we have the ability to offer these mul-



Dr. Hershey Bell

tiple learning pathways and flex our curriculum to respond quickly to these new trends and requirements in the profession."

Dr. Bell notes the current generation of students entering higher learning has never known a time when there were no computers and therefore they have expectations in terms of what a school will deliver within a curriculum. "They expect technology, innovation, and multiple platforms of delivery," he reports. "One example is how we are responding to these expectations through our distance education product that allows us to offer online chat rooms, discussion forums, and podcasts. If a medical school can't offer these things, it is perceived as anachronistic."

LECOM is also developing a distance education, core curriculum for its third- and fourth-year students on clinical rotations throughout the country. "This assures that every student can access the same curriculum, dialog with the same professors, and see the same lectures through podcasts," explains Dr. Bell. "This to me is one of the great challenges in medical education and a challenge we can meet because we were able to create a strategic plan that suggested we needed to think about these things. So, now we are fortunate to be at the forefront of this kind of educational delivery."

Dr. Bell adds that it is important that physicians live up to their oath to promise to teach the next generation of physicians. "The truth is that not every physician has the skills to do that effectively. But through our master's degree program, we designed a program to help physicians become better teachers so they can become educational leaders in their medical settings and in their communities. Here at LECOM we strive to be leaders in teaching physicians how to be educators. Although we've been around for only 16 years, we are already looked to by the profession for leadership."

For more information, contact Dr. Bell at (814) 866-8458

"Here at LECOM we strive to be leaders in teaching physicians how to be educators.

Although we've been around for only 16 years, we are already looked to by the profession for leadership."

– Dr. Hershey Bell

The Journey to Improve Hospice Care in America

Leadership begins at home. Before an organization can achieve leadership status in its own industry, it must promote leadership within its own workforce. It must be fostered and encouraged at all levels of the company. The business will, in turn, benefit from the skills and knowledge of the internal leadership, therefore setting the stage for external success.

Often leadership is associated with only certain positions or titles. At times, when asked to define a leader, the employees will name the CEO. Identifying the CEO as the sole leader can greatly limit an organization's potential by not letting leadership opportunities be promoted throughout. Extending leadership opportunities throughout a work force helps elevate morale, motivation, and communication.

The organization must be willing to encourage and recognize leadership at all levels. Sometimes the leader might change depending on the particular needs of the business or the project. For example, a social worker may be the leader of the hospice team for a specific patient. That patient and family may trust and confide in the social worker more than anyone else. On another case it might be the nurse who takes the lead.

On complex projects there may need to be more than one leader – each directing their area of expertise. When Family Hospice and Palliative Care started the renovations for the new Center for Compassionate Care many people took on a leadership roles – all vital to the success of The Center. One person directed the physical renovations, another spearheaded the Capital Campaign, while still another lead the team with marketing and promotion of The Center. By being able to accept and pro-



BY RAFAEL J. SCIULLO,
MA, LCSW, MS

mote many leaders, Family Hospice and Palliative Care benefited greatly from the multiple leadership roles.

A business can use many ways to support leadership throughout its workforce. First it must embrace the idea that it is beneficial to have numerous leaders. And it must be flexible enough to let the leadership change along with the organization's needs. Family Hospice and Palliative Care promotes leadership through mentoring, communications, and the dissemination of vision and key strategies. In addition, employees are empowered and their accomplishments are acknowledged. The Shining Star Program allows employees to highlight the outstanding work of their fellow colleagues – therefore laying the groundwork for building leadership skills. Thereby, Family Hospice and Palliative Care also provides training and education so that employees can move into leadership roles.

Promoting leadership roles from within is an important component to the success of an organization. Companies that nurture and encourage leadership at all levels create a business that can expand and can become a model for other organizations. An organization that is able to have such a productive, progressive internal structure is poised to become a regional or national leader in the industry.

Rafael J. Sciullo, MA, LCSW, MS is the President and CEO of Family Hospice and Palliative Care and Past Chairperson of the National Hospice and Palliative Care Organization. He may be reached at rsciullo@familyhospice.com or (412) 572-8800.

Integrating Home Healthcare into the Hospitalist's Discharge Process

Home. It's where both the patient and the hospitalist want the patient to go. After all, discharge is the ultimate goal, indicating recovery and independence. For the hospitalist, it's where their patient responsibility ends. Right?

There's a new push for hospitalists to get more involved in what happens to their patients after they leave the hospital. A holistic approach to healthcare, integrating all aspects of care from hospital to home, is proving to be beneficial to everyone involved – the patient, physicians, and other care providers.

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Chatham University Professor Promotes Best Practices in India for Lymphedema and Lymphatic Filariasis

BY APRIL TERRERI

Mary Jo Geyer, Ph.D., had prepared herself well for the opportunity of a lifetime, which she welcomed when it came knocking at her door. "I wanted to do some kind of international work that was linked to a project I am very much aware of – but one that a lot of people are not aware of – and that is the problem of lymphedema and lymphatic filariasis," says Dr. Geyer, assistant professor in the department of physical therapy at Chatham University.

Hands-On Exercise and Massage Training

The opportunity that came knocking was the 2007 grant from the Benter Initiative Program. Dr. Geyer is the first recipient of this grant that allowed her and five of her students to travel to Vellore, India for two weeks late last summer. They worked with medical professionals affiliated with the Christian Medical College and Hospital in Vellore, which is a private medical college in southern India with a worldwide reputation for excellence, says Dr. Geyer.

One of the criteria for the grant is to create educational experiences that would be sustainable for students and faculty. "Nationally, physical therapists are expanding their sphere of influence and as the demographics in the US shift multi-culturally, there is a greater emphasis on training in cultural diversity and cultural competence. I thought this opportunity would be a wonderful experience for our students doing a service learning project," Dr. Geyer explains.

Over 120 million people worldwide have lymphatic filariasis, which is endemic to 83 tropical and subtropical regions. Lymphatic filariasis is the second-leading cause of chronic disability worldwide. The disease is caused by mosquito-borne parasites that find their way into the human body, where they can live and reproduce for up to 40 years. Geyer linked the Benter Lymphedema Project to the morbidity management phase of the World Health Organization's Global Program to Eliminate Lymphatic Filariasis. This is the largest public health campaign ever in the world. Bill Gates funded this program with \$250 million, and Merck and GlaxoSmithKline also are funding portions of the program.

The gold-standard skill for treating people with lymphedema is a hands-on process known as complex decongestive therapy consisting of skin care, massage called manual lymph drainage-compression, and exercise, explains Dr. Geyer. "Our approach was a train-the-trainers process for physicians, nurses, and physical therapists. At the same time my students were helping with the training, they were also learning themselves. In addition to the primary care training, we offered training in WHO's community-based approach."

Dr. Geyer says the opportunity to teach in the community-based approach was 'powerful.' "We taught the informal caregivers, plus



Kristen Carlin teaches diaphragmatic breathing.



Dr. Geyer supervises manual lymph drainage techniques.

the nurses who actually go out into the community to do the basic intervention." She has received reports back from Vellore that this effort has grown significantly into a larger effort to help the medical professionals there get the kinds of supplies they need to continue the work she began in care management. "They will keep the advanced skills intact and continue to teach others. The biggest emphasis is on the community home-based care, where they teach caregivers to do hygiene primarily, along with elevation and exercise techniques."

Teaching Best Practices

India was the first choice of where to do this work, as about 40 percent of all the cases worldwide of lymphedema filariasis exist here. The disease is commonly found in sub-tropical and tropical areas where poor sanitation conditions offer the perfect breeding ground for mosquitoes. Mosquito vectors transmit the disease. When people don't have money to buy bed nets or bug repellent, their chances of being bit are heightened, explains Dr. Geyer.

When the larva enters the body, it crawls into the hole a mosquito has made in the skin and the larva sets up house inside the human lymphatic system. "When children are bitten, they usually don't develop the manifestations of the disease until adolescence because it takes time for the worms to develop, hatch, and grow," Dr. Geyer explains.

The disease attacks primarily the lower extremities and genitals, causing bodily disfigurements from the high-protein fluid trapped in the tissues. Elephantiasis is the most severe manifestation, causing the affected area to swell and grow hard. "Elevating the affected limb helps reduce the net fluid leaking into the tissue," explains Dr. Geyer. "Since the worms live in the lymphatic system – or the immune system – patients become immune-suppressed and contract super infections on their skin that causes high-fever lymphatic attacks. Keeping their skin clean prevents infections that exacerbate the lymphatic damage."

One woman Dr. Geyer and her students treated was in her 60s and had been suffering from elephantiasis for 30 years. "She impacted all of us. She slept on a concrete slab outside her tiny house and she didn't have anything on which to elevate her leg. She had to walk one-quarter mile to get water from a pump so she could clean her leg. Not only did she have no money for soap, but also she had no private bathroom. When my students saw all of this, they realized that even the basic interventions for these people are quite an effort."

Physical therapy approaches to this disease incorporate a four-step best-practices technique. First, the skin must be kept clean and supple and care should be taken to keep the affected area from being injured. "Because of the increased fluid, it takes a

longer time to eliminate the bacteria and other byproducts of metabolism. It also makes it difficult for nutrients to diffuse to the surface of the skin," explains Dr. Geyer.

The second step is to teach massage techniques, which essentially moves the lymph from the affected part through the existing lymphatics left in the body. "So you are rerouting it from one part of the body to another part of the body using massage techniques, which are very specific and require additional training," Dr. Geyer says.

The third step requires compression by wrapping the affected area to keep the lymph reduced. Over a short period of time, there is a dramatic reduction and the fibrotic changes in the tissues disappear, notes Dr. Geyer. Finally, patients learn how to exercise and that they must wear compression garments or bandages for the rest of their lives.

Although medications kill the larva so it cannot be transmitted, it takes a minimum of five years to get an effective dosage. This is because the medication kills the larva in the bloodstream, but it doesn't kill the worms, which continue to reproduce for a number of years.

Life-Changing Experience

Dr. Geyer first got interested in this kind of work when she was treating lymphedema patients in a small community hospital in Butler in 1990. "But we did not have any training in physical training that made any sense in treating these patients properly. So I began to read a lot on the subject and took courses from a renowned instructor in primary manual lymph drainage. I felt this kind of training should be included in our PT curriculum here at the university so students get an understanding of what is the right thing to do."

This experience has led to Dr. Geyer's participation in WHO's Working Group on



Female patient with elephantiasic leg.

Wound and Lymphedema Management in Resource-Poor Setting, which is currently developing clinical practice guidelines to standardize treatment across a variety of conditions where wounds and lymphedema are common – such as leprosy, lymphatic filariasis, diabetics, and buruli ulcers.

Dr. Geyer admits her experience has really changed her life. "This is what I will do for the rest of my life. The experience there has opened a lot of doors for me." One of those doors will take her to Tanzania in April, where she will attend a global alliance meeting to review the results of the mass drug administration. Another opportunity will take her to Africa in June, where she will participate in a footwear workshop to help people with lymphatic filariasis as well as diabetic foot ulcers and leprosy.

Dr. Mary Jo Geyer can be reached at (412) 365-1831.



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A black and white portrait of an elderly woman with curly hair, smiling warmly at the camera. She is wearing a light-colored patterned top.

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The Issue Not the Instance

Healthcare organizations have a number of internal and external customers. Employees are forced to juggle more and more responsibilities while trying to keep everyone happy. It is inevitable some of these customers will end up dissatisfied.

When we miss an internal deadline or fail to hit a goal, what do we say to our boss? When our service is lacking, what do we tell the patient, family member or referral source?

"We were crazy busy and things got pushed back a little bit."

"(Insert supposed crisis) happened so I had to spend time fixing it."

"He was a difficult patient. He was impatient and rude."

"(Name) was working on that and I had to wait for her to finish it."

"(Referral source) likes (competitor) better so we lost the referral."

And the list could go on...

Sometimes legitimate roadblocks keep us from meeting deadlines, being on time or reaching our goals. However, bosses, peers and patients are often frustrated and perceive the responses as excuses rather than reality.

Why the disconnect?

It could be the focus is on the instance rather than the issue.

If internal and external customers are continually disappointed or you regularly



BY DAVID M.
MASTOVICH, MBA

miss deadlines or goals, it doesn't really matter what happened in the most recent instance. The issue is you do not deliver what you promise. After the fact, time is wasted rationalizing with phrases like "We were crazy busy," and self improvement opportunities are lost.

You obviously need to attempt to fix 'the instance' as soon as possible. But, more importantly, you need to concentrate on the issue – the reason why deadlines aren't met or customer service is lacking—and how to improve your skills in this area.

Set clear, specific targets and prioritize activities to achieve goals and meet deadlines. Follow-up with your boss, peers, and subordinates to make sure milestones within the action plan are being met. Listen to the customer and provide value added service when something doesn't go as well as expected.

And, stay away from those tired, old excuses.

The next time you are asked why something didn't go as planned, take personal responsibility and focus on the issue not the instance.

David M. Mastovich, MBA, is the president of Massolutions, a Pittsburgh based strategic marketing firm.

He can be reached at info@massolutions.biz or (412) 201-2401.

New Software Making Blood Collections More Accurate and Efficient

Memorial Medical Center's Laboratory recently adopted the Sunquest Collection Manager, a new software system that automates many of the specimen collection processes. This new system helps to ensure positive patient identification, more efficient specimen gathering, and printing specimen labels at bedside, even for extra tubes collected before orders are placed.

"By using this new computer software and barcode technology on in-patients, we've eliminated the potential human error that can occur when a health care professional is collecting blood from patients," says Lary Koval, Director, Laboratory and Courier Services, Memorial Medical Center.

The application works on a portable handheld computer that accesses the Laboratory database via a wireless network. The ability to scan the barcode on a patient's armband enables accurate, safe scanning of the patient collection information and permits patient bedside label printing.

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LEGAL HEALTH UPDATE

Expansion of FMLA to Affect Healthcare Institutions

When President Bush signed the National Defense Authorization Act (NDAA) early this year, it marked the first ever expansion of the Family and Medical Leave Act (FMLA).

NDAA says that employees who need time off to care for a recovering service member are eligible for up to 26 weeks within a single 12-month period, more than twice as long as the standard 12 weeks of FMLA leave.

As labor-intensive operations, most healthcare institutions and physician practices will likely have to respond to employees seeking time off under the expanded FMLA.

The new law defines recovering service member as a member of the armed forces who falls ill or is injured during active duty, and as a result is unable to perform his or her duties. To qualify for leave, the employee must be the spouse, parent, child or nearest blood relative of the injured service member. NDAA defines "serious injury or illness" to mean "an injury or illness incurred



BY ANTOINETTE OLIVER

by the member in line of duty on active duty in the Armed Forces that may render the member medically unfit to perform the duties of the member's office, grade, rank, or rating." This expansion of the FMLA thus applies to all service members no matter where they are serving, including in the United States.

Under the FMLA, employers can require employees seeking leave to

provide a certification from a health care provider attesting to the serious health condition of the employee or family member. Under the NDAA amendments to the FMLA, employers may require such a certificate from the service member's health care provider.

An employee also can get leave because of "any qualifying exigency" that arises out of a family member's service in the Armed Forces or because a family member is called to duty. A family member under this provision is limited to spouse, parent or child. Employees who take leave for this "qualifying exigency" reason will be entitled to 12

weeks of FMLA leave. The Department of Labor has not yet announced regulations defining "qualifying exigency", but employers must act in good faith to comply with the provision until the regulations are released.

When an employee is seeking leave because of a "qualifying exigency" arising out of the service member's being called up for active duty or being on active duty in a contingency operation, the employer may require that such an absence be supported by a certification, but again, DOL has to develop a regulation for employers to know what, if anything, they can require from employees to prove that this type of FMLA leave is warranted.

The amendments are effective immediately, so healthcare institutions and physician practices should update their handbooks and company procedures to comply. It is also important that healthcare employers train supervisors and human resource staff on the new rights that employees now have under the FMLA.

Antoinette Oliver, an employment law attorney with the Pittsburgh law firm of Meyer, Unkovic & Scott LLS, can be reached at aco@muslaw.com.

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Investors' Lab

Investing in a Bear Market

Two of the most frequently used strategies in a bear market are shorting stocks or ETF's and buying bear market funds. To determine if these strategies will lead to better performance in a down market, we need first to examine a few basic concepts of risk and return.

Shorting stocks and buying bear market funds are "market timing" tools, which means that one would have to know the future direction of the markets to effectively use them. Yet a look at the month-to-month pattern of market activity over years reveals that there is no discernable pattern of behavior on a month-to-month basis for the U.S. stock market.

Let's examine the serial correlation of large company stock returns. Serial correlation is the correlation of a variable with itself over successive time intervals. Technical analysts use serial correlation, also called autocorrelation, to determine how well the past price of a security predicts the future price. A series of returns with a serial correlation near 1.0, for example, would be highly predictable from one period to the next and indicative of a trend. If the serial correlation is near -1.0, the series is highly cyclical. If the serial correlation is near 0, then the series has no predictable pattern, which Roger Gibson for one describes as "a random walk."

For the period 1926 – 2005, the serial correlation of large company stock returns

is 0.03. This data would indicate that we have absolutely no way to predict the short-term behavior of the market based on the past returns for large company stocks.

While not predictable in the short-term, the U.S. large company stock market has a clear positive bias for growth. Take the movement of the S&P 500 since the end of 1968, a period in which the S&P enjoyed compounded average annual return of 10.33%. During this period, there were 358 positive 12-month periods and 100 negative 12-month periods. The best 12-month return was 61.18% and the worst was -38.94%, occurring during the 12-month periods ending June 1983 and September 1973 respectively.

That said, I think it's important to examine the performance of bear market funds to gain a clear understanding of what they bring to the table. For this we'll turn to Morningstar, the mutual fund tracking service. Morningstar tells us that there are 111 "bear market" funds to choose from. This data provided by Morningstar covers the period of January 1, 1994 through January 31, 2008. On a year-by-year basis, bear funds had 11



BY PAUL BRAHIM,
CFP® AIFA®

years of negative returns and just 4 years of positive returns.

The temptation is to believe that we can somehow predict when to add these tools to our portfolio and when to take them away. To understand the difficulty in this task, I would suggest that an investor flip a coin and then use that experience to accurately predict whether heads or tails will come up on the next flip. I think all would agree that it

couldn't be done with any real consistency. That's the notion of serial correlation.

Finally, I think it's important to address risk versus return. Bear funds as a whole have substantially more risk, as measured by standard deviation of return than the S&P while producing substantially less return.

What about shorting stocks or ETFs? Short selling is the practice of borrowing and then selling securities you don't own, in the hopes of buying them back at a lower price. When you return the borrowed securities, you've profited on the differential between the sell price and the buy price. There is a limit to your profit, though. Once the stock goes to zero, there are no more profits on the short. If the stock goes up, however, your loss is theo-

retically unlimited. And let's not forget about the costs of short selling, including margin interest, the cost of selling the shares and the cost of buying them back. In short, we see short selling as a form of expensive market timing that has unlimited downside risk.

Each time the markets become volatile these bear tools surface and people who fancy themselves as seers tell us about the strategies we could have used. I chose the word could because in fact these tools are best used before the market declines. Unfortunately, you don't know that until after the fact.

Investors are better served diversifying asset classes and the securities within those asset classes. They should periodically rebalance portfolios back to their target allocation to manage risk. Investors should establish long-term strategies that are realistic with respect to capital market returns and not try to get more from the market than it can actually deliver. Invariably, most investors, professionals or not, who try to time the market will be caught on the wrong side of a "trade" and suffer the pain of substantial loss.

Paul Brahim, CFP® AIFA®, Managing Director, BPU Investment Management, Inc, can be reached at pbrahim@bpuinvestments.com

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April 16

Living With Grief: Children and Adolescents National Teleconference

Living With Grief: Children and Adolescents National Teleconference will take place on Wednesday, April 16th from 1:30 to 4:00 p.m. This teleconference will focus on the experience of grieving children and adolescents and ways professionals and parents can best support them. Being shown at Family Hospice and Palliative Care's Center for Compassionate Care at 50 Moffett Street, Mt. Lebanon. For reservations, call (412) 572-8829.

May 20-23

HIMSS Asia Pac Conference

Designed to be dynamic and interactive, the HIMSS AsiaPac Conference & Exhibition will engage participants in thought-provoking discussions and offer ways to experience technology applications firsthand. For more information, visit www.himssasiapac.org.

May 4-7

25th Annual VHA Leadership Conference

More than 1,500 hospital executives are expected to attend VHA's 25th Annual Leadership Conference: The Power of Innovation, in Philadelphia, May 4-7. For more information, visit www.vha.com.

May 16

15th Annual Nursing Horizons Conference

The 15th Annual Nursing Horizons Conference, Best Practices in Patient Safety: Sharing the Evidence, will take place May 16, 2008 at the University of Pittsburgh School of Nursing, 3500 Victoria Street, First Floor. The target audience is clinicians, educators and managers in clinical and academic settings. For more information, contact (412) 624-3156 or chb30@pitt.edu.

June 9-11

National Results Management Spring '2008 Conference

On June 9-11 at the Pittsburgh Airport Crowne Plaza Hotel, Results Management's Spring '2008 Conference will feature six outstanding consultants as problem-solvers for NHA's and department heads in nursing, pharmacy, personnel, and finance at America's foremost long term care conference. They will address the topics selected as most important to long term care by vote of LTC administrators.

This conference will also be held May 19-20 at the Harrisburg East Holiday Inn. For more information, call Results Management at (412) 216-9557.

June 17-20

CMSA's 18th Annual Conference & Expo

The 18th Annual Conference & Expo of the Case Management Society of America (CMSA) will be held in Orlando, Florida, June 17-20 at Rosen Shingle Creek Hotel & Golf Club. The theme is "Go Beyond Expectations, Find the Balance, Raise the Standard –

Engage Case Management." For complete program and online registration information, please visit www.cmsa.org/conference.

September 5-6

2008 Hospice and Palliative Nurses Association Clinical Practice Forum

The Hospice and Palliative Nurses Association (HPNA) is very proud to offer the 2nd Clinical Practice Forum, "Caring for People Who are Not Like Me.", on Friday, September 5 and Saturday, September 6 at the Hilton Pittsburgh Hotel. This course is designed for practicing hospice and palliative registered nurses and any other professional nurses. For more information, call (412) 787-9301 or visit www.HPNA.org.

September 9-11

21st Annual Healthcare Facilities Symposium & Expo

The 21st Annual Healthcare Facilities Symposium & Expo will take place September 9-11, 2008 at the Navy Pier, Chicago. The Healthcare Facilities Symposium & Expo (HFSE) is the longest running event focused on how the physical space impacts the delivery of healthcare. Facility Managers & Planners, Consultants, Architects, Planning & Construction Professionals, Interior Designers, Product & Service Providers, Executive Healthcare & Operations Management will meet for three days to discuss, learn about and share today's design, construction and operational challenges. HFSE truly brings together today's evolving marketplace. Visit www.hcarefacilities.com for complete event information or call (203) 371-6322

The Kiddie Tax Continues to Grow

Under the Small Business and Work Opportunity Tax Act of 2007, a tax law passed earlier this year, Congress extended the reach of the so-called "kiddie tax." Now this onerous tax provision might begin to affect physicians' families with children well into their twenties.

Normally, income is taxed to the person who receives it at his or her ordinary income tax rate. However, unearned income received by a child may be taxable at the top marginal tax rate of the child's parents to the extent it exceeds an annual threshold. In other words, instead of being taxed at a child's low tax rate (usually either 10% or 15%), the effective rate on the income may be as high as 35%.

The annual threshold is adjusted for inflation. For 2007, the limit is \$1,700, which is unchanged from 2006. The first \$850 is tax-free; the next \$850 is taxed at the 10% rate. The tax only applies to unearned income (such as capital gains, dividends and interest). Any other income your child earns is exempt from the kiddie tax.

Prior to 2006, this kiddie tax provision only applied to children under the age of 14. Then a major tax law passed last year raised the age limit to age 18. Now the new law extends the kiddie tax to older children.

Beginning in 2008, the age limit is increased to age 19 or age 24 for full-time students. These higher age limits apply if the child doesn't have earned income equal to half of his or her annual support. In



BY PAUL RUDOV,
CPA/PFS

other words, you can't avoid the kiddie tax just because you are no longer claiming the child as your dependent.

Keeping this change in mind, here are several possible ways to reduce the impact of the kiddie tax.

- Monitor your child's investment income. If you are careful to stay below the \$1,700 fault line, you will not have any kiddie tax problems at tax return time. For instance, in 2008 you might buy CDs for the child that will not mature until 2009.
- Emphasize tax-deferred investments. Instead of investments that produce current income, shift more of your child's portfolio into long-range vehicles such as growth stocks. Similarly, if you buy U.S. Savings Bonds in the child's name, he or she doesn't have to pay any current tax.

- Employ your own child if you're in a position of authority. Since the wages are earned income, the kiddie tax doesn't apply. Assuming the child is paid a reasonable amount for the services actually performed, the business can deduct his or her salary.

Despite the new law change, you may be able to avoid dire tax consequences with astute advance planning. Seek professional advice for your own family.

Paul Rudoy, CPA/PFS, a partner at Horovitz, Rudoy & Roteman, has over 20 years experience in strategic consulting, tax and wealth management for high net worth individuals and closely held businesses. He can be reached at pkrudoy@hrrcpa.com.

HPI

Health Policy Institute Governance Briefing
8:30 AM, Friday, April 4, 2008

Health Policy Institute Governance Briefing Spring 2008 Final Briefing

Friday, April 4, 2008

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8:30-9:30 Briefing**

The Excellent Healthcare Board: A Bond Rating Agency's Perspective

Jeff Schaub, Senior Director Healthcare Group, Fitch Ratings

Fitch Ratings, a Nationally Recognized Statistical Rating Organization, is acknowledged by authorities around the world. Dual-headquartered in New York and London, Fitch operates offices and joint ventures in more than 49 locations and covers entities in more than 90 countries. Mr. Schaub joined Fitch's healthcare group in 1993 and is a senior director in Fitch Ratings' public finance department based in NY and head of Fitch's healthcare ratings group.

Location: University of Pittsburgh's William Pitt Union on the first floor, corner of 5th Avenue and Bigelow Boulevard in Oakland. Ample parking is available nearby at Soldiers & Sailors parking garage and metered parking.

Briefings are free. Registration is required and available through these options:
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FAX: 412-624-7747
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St. Barnabas Health System offers a continuum of care at its two campuses in the North Hills. Skilled nursing care is offered at the 172-bed St. Barnabas Nursing Home in Richland Township, Allegheny County, and the 47-bed Valencia Woods at St. Barnabas in Valencia, Butler County. The Arbors at St. Barnabas offers assisted living for up to 182 persons. All three facilities offer staff-run, on-site rehabilitative services, extensive recreational opportunities, and beautiful, warm decor. Home care is available at the St. Barnabas Communities, a group of three independent-living facilities: The Village at St. Barnabas, The Woodlands at St. Barnabas and The Washington Place at St. Barnabas. The Washington Place, a 23-unit apartment building, has hospitality hostesses on duty to offer residents support as needed. St. Barnabas Health System, a non-denominational, faith-based organization, has a 106-year tradition of providing quality care regardless of one's ability to pay. For admissions information, call:

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GATEWAY HEALTH HOSPICE

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Quality nursing and home health aide visits exceed most other agencies. Our commitment to increased communication and responsiveness to those we serve is our priority.

Medicare certified and benevolent care available. Gateway serves patients in Allegheny and ALL surrounding counties. Care is provided by partnering with facilities and hospitals in addition to wherever the patient "calls home".

For more information call 1-877-878-2244

HEARTLAND

At Heartland, we have a special understanding of the health care challenges of our patients, as well as their families and loved ones, may be experiencing. Through our passion for excellence, we are committed to enhancing their quality of life through our compassionate and supportive care.

Most of the care Heartland provides is covered under Medicare, Medicaid or many health care plans including HMOs, PPOs, and private insurance.

Our team can provide more information about Heartland's services and philosophy of care at anytime. Please feel free to contact us 800-497-0575.

HOMEWATCH CAREGIVERS

Homewatch CareGivers serve our clients with affordable and trusted care providing families with peace of mind and freedom. Staff are selected based on experience, skill and dependability and are provided orientation to the client and continuous training.

We provide free initial assessments, individualized care plans and in-home risk assessments. Our services are professionally supervised to meet quality assurance standards.

Homewatch CareGivers go the extra mile to make a meaningful difference in the lives of our clients.

Penn Center West Two Suite 120

Pittsburgh, PA

412-788-1233 or 412-999-2611

1789 S. Braddock, Pittsburgh, PA 15218

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PUBLIC HEALTH SERVICES

ALLEGHENY COUNTY HEALTH DEPARTMENT
The Allegheny County Health Department serves the 1.3 million residents of Allegheny County and is dedicated to promoting individual and community wellness; preventing injury, illness, disability and premature death; and protecting the public from the harmful effects of biological, chemical and physical hazards within the environment. Services are available through the following programs: Air Quality; Childhood Lead Poisoning Prevention; Chronic Disease Prevention; Environmental Toxins/Pollution Prevention; Food Safety; Housing/Community Environment; Infectious Disease Control; Injury Prevention; Maternal and Child Health; Women, Infants and Children (WIC) Nutrition; Plumbing; Public Drinking Water; Recycling; Sexually Transmitted Diseases/AIDS/HIV; Three Rivers Wet Weather Demonstration Project; Tobacco Free Allegheny; Traffic Safety; Tuberculosis; and Waste Management. Bruce W. Dixon, MD, Director 333 Forbes Avenue, Pittsburgh, PA 15213 Phone 412-687-ACHD • Fax 412-578-8325 • www.achd.net

THE CENTER FOR ORGAN RECOVERY & EDUCATION

The Center for Organ Recovery & Education (CORE) is a non-profit organization designated by the federal government to provide individuals an opportunity to donate life through organ, tissue and corneal donation. CORE devotes a large portion of its resources to developing innovative educational programs and engineering research that will maximize the availability of organs, tissue and corneas. Lastly, CORE strives to bring quality, dignity, integrity, respect and honesty to the donation process for the families, hospitals and communities it serves.

For more information, please contact CORE at 1-800-366-6777 or www.core.org

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For more information, or to schedule a tour, contact:

Deborah Flowers, Chief Clinical Officer
The Children's Home of Pittsburgh & Lemieux Family Center
5324 Penn Avenue, Pittsburgh, PA 15224
412-441-4884 ext. 304

PROFESSIONAL DEVELOPMENT

THE SOCIETY FOR HEALTHCARE STRATEGY AND MARKET DEVELOPMENT

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REHABILITATION

THE CHILDREN'S INSTITUTE

The Hospital at The Children's Institute, located in Squirrel Hill, provides inpatient and outpatient rehabilitation services for children and young adults. Outpatient services are also provided through satellite facilities in Green Tree, Irwin and Wexford. In addition, The Day School at The Children's Institute offers educational services to children, ages 2-21, who are challenged by autism, cerebral palsy or neurological impairment. Project STAR at The Children's Institute, a social services component, coordinates adoptions, foster care and intensive family support for children with special needs. For more information, please call 412-420-2400.

The Children's Institute
1405 Shady Avenue
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www.amazingkids.org

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Derry - 724-694-5737 Moon Township - 412-262-3354
Greensburg - 724-838-1008 Mt. Pleasant - 724-547-6161
Greensburg West - 724-832-0827 Murrysville - 724-325-1610
Harrison City - 724-527-3999 New Alexandria - 724-668-7800
Irwin - 724-863-0139 Penn Hills - 412-241-3002
Jeannette - 724-523-0441 Pittsburgh Dtnw. - 412-281-5889
Latrobe - 724-532-0940
Ligonier - 724-238-4406
Lower Burrell/New Kensington- 724-335-4245

PHYSICAL THERAPY FOR WOMEN

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Monroeville - 412-373-9898

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Greensburg - 724-838-1008
Harrison City- 724-527-3999
Irwin - 724-863-0139
Jeannette - 724-523-0441
Latrobe - 724-532-0940
McKeesport - 412-664-9008
Monroeville - 412-373-9898
Moon Township - 412-262-3354
New Alexandria - 724-668-7800
Penn Hills - 412-241-3002

FUNCTIONAL CAPACITY EVALUATION SCHEDULING

Greensburg - 724-838-7111

OCCUPATIONAL THERAPY

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Harrison City- 724-527-3999 McKeesport - 412-664-9008
Irwin - 724-863-0139 Monroeville - 412-373-9898
Jeannette - 724-523-0441 Murrysville - 724-325-1610
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EXECUTIVE LIVING

Cranberry Township \$360,000

MLS# 71574
Experience pure delight when you step inside of this attractive 4 bedroom, 2.5 bath all brick home in a fantastic neighborhood. Quality features include two story foyer, dentil crown molding, new hardwood in living room and dining room, sun-lit kitchen, butler's pantry, whirlpool tub and skylight in master bath, Heurich construction, park-like setting and much more!



Gloria Carroll/Diane Allhouse 412-367-8000 x242/296

For more information, tour or brochure... Call Today or Visit Our Website at www.prudentialpreferred.com for a visual tour.
Gloria Carroll: 412-367-8000 x242 • Ruth Benson: 412-367-8000 x589 • Patty Pellegrini: 412-367-8000 x232
Gina Machado: 412-367-8000 x281 • Diane Allhouse: 412-367-8000 x296

Adams Township \$750,000

MLS# 716191
Custom architectural elements abound throughout this outstanding 4 bedroom, 3.5 bath design. Nestled on a quiet cul-de-sac in Treedsdale, features of this fantastic home include open floor plan, Palladian windows, sleek island kitchen with dining area, desk area and built-in appliances, dramatic two story family room, first floor master suite, expansive lower level and more!



Gloria Carroll 412-367-8000 x242

Pine Township \$330,000

MLS# 717081
Not just another pretty face, this sparkling 3 bedroom, 2.5 bath design offers an ideal floor plan filled with special amenities. Features include neutral décor, hardwood flooring, bright family room with lofty ceiling, fireplace and skylights, spacious newly completed gameroom with powder room, private yard in lovely neighborhood and more. MUST SEE!!



Gloria Carroll/Patty Pellegrini 412-367-8000 x242/232



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Karen Marshall • Keller Williams • 412-831-3800 ext. 126 • karenmarshall@realtor.com



CUSTOM BUILT HOME • 104 Marcur Lane

\$430,000

Gorgeous 5 BR, 3.5 BA, 3 car att/grg on 2.19 acres w/many amenities and stunning design. Grand 2 ST entry, spacious maple kitchen w/access to deck through breakfast area and elegant DR w/chair rail, crown molding and tray ceiling. Enjoy a first floor family rm w/gas log FP and huge finished lower level game rm w/den and full bath for easy entertaining. Bright, spacious, neutral and truly an exceptional home.



Ruth Kitterman and Wendy Krah
REMAX Select Realty
412-567-4200 x121
wendykrah@remax.net



Cranberry Township \$314,500



Upgraded pleasures in a cul-de-sac setting! Attractive 4 bedroom colonial affords special amenities & wonderfully designed features! Spacious 2 story foyer with custom Oak banister leads to bright living room with crown molding. Arched doorways guide you to a dining room presenting chair rail & into fabulously functional kitchen! Practical beauty comes from the granite counters, while delight comes from 18' special ceramic heated floors & touch under-cabinet lighting! Space is endless with a first floor den & large bedrooms upstairs. The exterior presents new stamped, stained concrete & a generous, level yard! AHS Warranty included! #708323

Visual Tours at www.HoneywillTeam.com
Call Linda Honeywill 412-367-8000 x237

Pine Township \$539,500

Exceptional 2 story brick home located in the Eagle Point neighborhood of Treedsdale Golf Community. Begin your journey through this 4 bedroom 4.5 bath residence in the gracious entry with rich hardwood floors and double closet. Gourmet kitchen boasts Maple cabinets, granite countertops and stainless Jennair appliances. Fine dining begins in the spacious but intimate dining room. Breathtaking coffered ceiling draws you in to the expansive family room where a two sided gas log fireplace passes through into the elegant first floor library, complete with double closet and attached full bath. Master bedroom boasts huge walk in closet and luxurious bathroom suite with oversized shower and Kohler fixtures. Finished game room features Bose surround sound and exercise area. Enjoy a private retreat for your morning coffee or your evening meal on the pergola-covered patio finished with beautiful perennials. #714836



Visual Tours at www.HoneywillTeam.com
Call Linda Honeywill 412-367-8000 x237

Pine Township \$589,900

This Colonial Williamsburg Reproduction offers many amazing features blending classic style and modern conveniences. Begin the journey in the two story hardwood foyer with custom made transom. First floor den has nine foot ceilings, built-in books cases, and warming fireplace. Enjoy meals together in the quiet dining room with hardwood floors and swinging butlers door. Red Oak kitchen boasts granite island, double oven 5 burner cook top and hand made brick fireplace. Spacious family room has rich log burning fireplace and walk out to rear patio through French doors. Retreat to the master suite or warm yourself by the fireplace after relaxing in the corner Whirlpool tub in the master bath. Three additional bedrooms offer plenty of space and natural light. Entertaining is easy on the rear deck overlooking an acre of private wooded land. Truly a must see! MLS#716218



Visual Tours at www.HoneywillTeam.com
Call Linda Honeywill 412-367-8000 x237

Pine Township \$1,095,000



Elegantly appointed and distinctly designed! This extraordinary 4 bedroom, 4.5 bathroom home resides in the choice neighborhood of The Heights of North Park. Setting the stage for an atmosphere of casually refined elegance, the residence's exterior boasts brick with limestone trim, governor's drive and immaculate landscaping on over 2 acres of land. Inside, a stunning floor plan flows and welcomes entertaining. Noteworthy features include 2 story marble foyer with wedding staircase and Shoenbeck chandelier, gourmet kitchen, huge family room with wet bar and additional hot tub room. Upper level offers luxurious master suite and expansive bonus room. Outdoors boasts a 4 car garage and rear patio with beautiful view! #668884

Visual Tours at www.HoneywillTeam.com
Call Linda Honeywill 412-367-8000 x237

Adams Township \$899,000

Enjoy country club living on 1.4 acres in the Treedsdale Golf Community! This Brennan built home is very spacious w/a 1st floor master & a 2nd floor master guest suite. The first floor offers a 2 story great room w/granite hearth & a top-of-the-line kitchen with granite counters, custom hickory cabinets and Viking stove & oven. Don't miss the recently finished 2nd floor GR/5th BR suite or the 10 zone sprinkler system & 4 car attached garage. #694793



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Call Linda Honeywill 412-367-8000 x23

Richland Township \$749,900

Arts and crafts style custom home is rich with style and character. Custom Oak door welcomes you into the Hickory foyer. Elegant dining room featured faux finished wall and built in china closet. One of a kind Ash kitchen offers hand made crown molding, slate floors and backsplash with hand painted accent. Cooking is made easy with a stainless double convection oven and 5 burner Thermador gas range. Man made stone wall with Briar Hill stone hearth surrounded by limestone hearth, is the main focal point of the spacious family room. Master suite with Hickory floors provides access to the master bath with heated slate floors, Whirlpool Jacuzzi and 5' slate shower stall. Cherry ceiling beams add to the flow of the game room complete with wet bar and synthetic stone fireplace. Many more unique features to see! #715845



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Just Listed in Point Breeze – Minutes to Oakland's Hospital!

\$344,900 – 530 South Lang – 5 bedroom, 2.5 bath stunning total renovation steps from Frick Park! Over-sized rooms, soaring ceilings, high end finishes. Grand master suite. Gourmet quartz kitchen with breakfast room. Dining room with wet bar. Rear yard with deck. New hardwoods, carpet, lighting, paint, moldings.

View virtual tour and more photos at www.julierost.com!



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SPECTACULAR VIEWS

\$1,560,000

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1040 Valleyview Dr.
Unity Township

\$419,900

Perfectly sized all brick ranch newly constructed on 1.2 wooded acres in desirable East High Acres II. Enjoy views of the woods from almost every room with level land included for a pool or garden. Large deck and patio. Attached garage and first floor laundry enhance one-level living with the added convenience of a huge lower level with 9 foot ceilings and walk-out patio doors. Gracious home, energy efficient construction. Easy commute to Greensburg, Latrobe hospitals and various Pittsburgh hospitals.



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\$549,900

Mint Condition! 2-Story Custom White Brick Provincial Resides On A Cul-De-Sac In Moon Twp's Most Desirable Neighborhood. Beautifully Appointed With 4 Br's, 3.5 Baths, Extensive Custom Woodwork Throughout, NEW Gourmet Kitchen w/Granite and Stainless, Spacious Master Suite, Finished Lower Level w/Full Bath and a 3-Car Garage. Designer Landscaping and a Lot That Backs To the Woods Make This Home A Must See! #698040



Hampton – Fabulous Home

\$659,900

You'll love this beautiful 2 story brick home with all the executive amenities. Only 5 yrs. Old, 4 bedrooms, 4.5 baths, 2 fireplaces, finished lower level with gameroom, den, bath, storage and exercise area. Much more. Home warranty included.



Mt. Lebanon **\$599,000**

A unique home on a double lot. Close to the heart of Mt. Lebanon. Executive amenities include marble foyer, gourmet eat-in-kitchen, spiral staircase, sunken family room and 3-car garage. Large private yard w.wrap around deck and outdoor spa. Don't miss this one!



The Villa – Hampton

\$849,000

You must see this magnificent home in a prestigious neighborhood bordering North Park. All brick with 3 car garage, this home has 5 bedrooms, 3 fireplaces, an exceptional lot and professional landscaping. Too many amenities to list.



South Side w/Garage

\$324,900

All the modern conveniences with old world charm. This great home has 4 large bedrooms and 2 full baths. Family room has access to fenced-in courtyard and garage. Fabulous equipped kitchen, 2nd fl. Laundry. Move-in condition. Call now!



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\$419,900

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O'HARA TOWNSHIP
224 CORNWALL DR.

AUCTION DATE:
Sat., April 26 • 12:00 P.M.



Beautiful and well maintained 4 BR, 3.5 bath home with 1st floor family room w/cathedral ceiling & FP, HW floors, new eat-in-kitchen w/stainless appliances.

Call Whit @ X16 for auction brochure.
In Conjunction with Prudential Preferred Realty.

SQUIRREL HILL
6585 ROSEMOOR ST.

AUCTION DATE:
Sat., April 5 @ 12:00 P.M.
OPEN Sun., March 30,
from 1-4 P.M.



Great Location! Remodeled 4 BR-2 Bath in walking distance to schools; large rooms; garage; private patio/yard.

Call Whit @ X16 for auction brochure.
In Conjunction with Prudential Preferred Realty.



Cranberry Township
\$449,900

Beautifully maintained custom home on great lot!

Stunning maple kitchen with abundant cabinetry, ceramic backsplash, and imported Italian ceramic tile. Den with built-in bookcases. Turned staircase leads upstairs to 4 spacious bedrooms; master suite has a tray ceiling and includes a luxurious bath with jet spray tub. Unbelievable lower level with gorgeous fireplace and large picture windows open into the rear yard! Large rear deck has a covered patio below, one of the largest yards in Ehrman Farms!

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Coldwell Banker Real Estate
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(724) 776-2900 ext. 266 Office
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EXECUTIVE LIVING

1390 HOLLOW TREE DR., UPPER ST. CLAIR



Magnificent estate on 1.7 acres in Deerfield Manor. 6 bdrms, 7 baths, elevator to all 4 floors. Gourmet kitchen and breakfast area, 2 story family room, private master suite, paneled study, sun room, 3 see through fireplaces, gameroom w/bar and pool table area. Exquisite landscaping, incl. ponds and waterfall.

\$3,150,000

Susan Highley
412.833.3600,
889-1214, 854-3644



2312 SOUTHAMPTON DR, UPPER ST. CLAIR



Fabulous open floor plan, 2 sty entry, impeccable woodwork detailing, HW floors, truly gourmet kitchen w/arched cabinets and breakfast area. Private deck, private office and paneled library, great master suite, exquisite lighting fixtures. Lovely landscaping, private cul-de-sac, great community.

\$580,000

Susan Highley
412.833.3600,
889-1214, 854-3644



Simply Spectacular!

PINE TOWNSHIP
\$459,900



Entertain in style in this elegant 4 bedroom, 3.5 bath home in the premier golf community of Treedsdale. Handsome study with built-ins, judges paneling, dentil crown molding. Stone fireplace in Family Room. Master Suite includes sitting room. Walkout lower level. Four-car garage. Beautifully landscaped. Move in!

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ABR, CRS, GRI
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MOON TOWNSHIP

2302 Myrtle Drive

Traditional elegance with today's amenities, this recently constructed custom design is reminiscent of a grand European estate. This provincial home is truly a show piece of exemplary design on nearly two acres.

It shares a unique cul de sac location with only one other executive home. A two story entry is highlighted by a sweeping curved staircase leading to a lavish master suite and sitting room with a bridge opening to five other suites and bedrooms. In addition to a formal parlor and dining room with columned entries as well as a two story great room, the first floor boasts a guest suite, fully paneled study with fireplace, enormous sunroom currently used as a luxurious workout area, gourmet kitchen with multiple dishwashers and refrigerators, sun-filled breakfast room, wet bar, back staircase and mud room with custom wood lockers. Detailing throughout includes crystal chandeliers, elaborate crown molding, tray and cathedral ceilings, built-in handcrafted cabinetry, four fireplaces, imported porcelain tile and granite. A formal governors drive presides over the magnificent front entry and also serves the four car garage. Professional landscaping and patios and terraces surround the home creating a gracious welcome to all who visit. Offered for \$1,950,000. Please call for a private tour.



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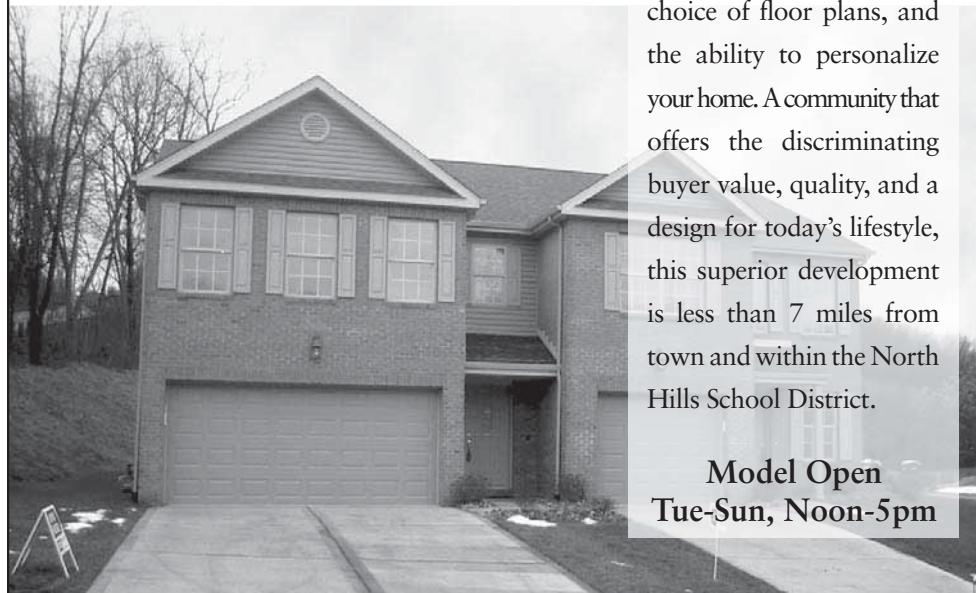
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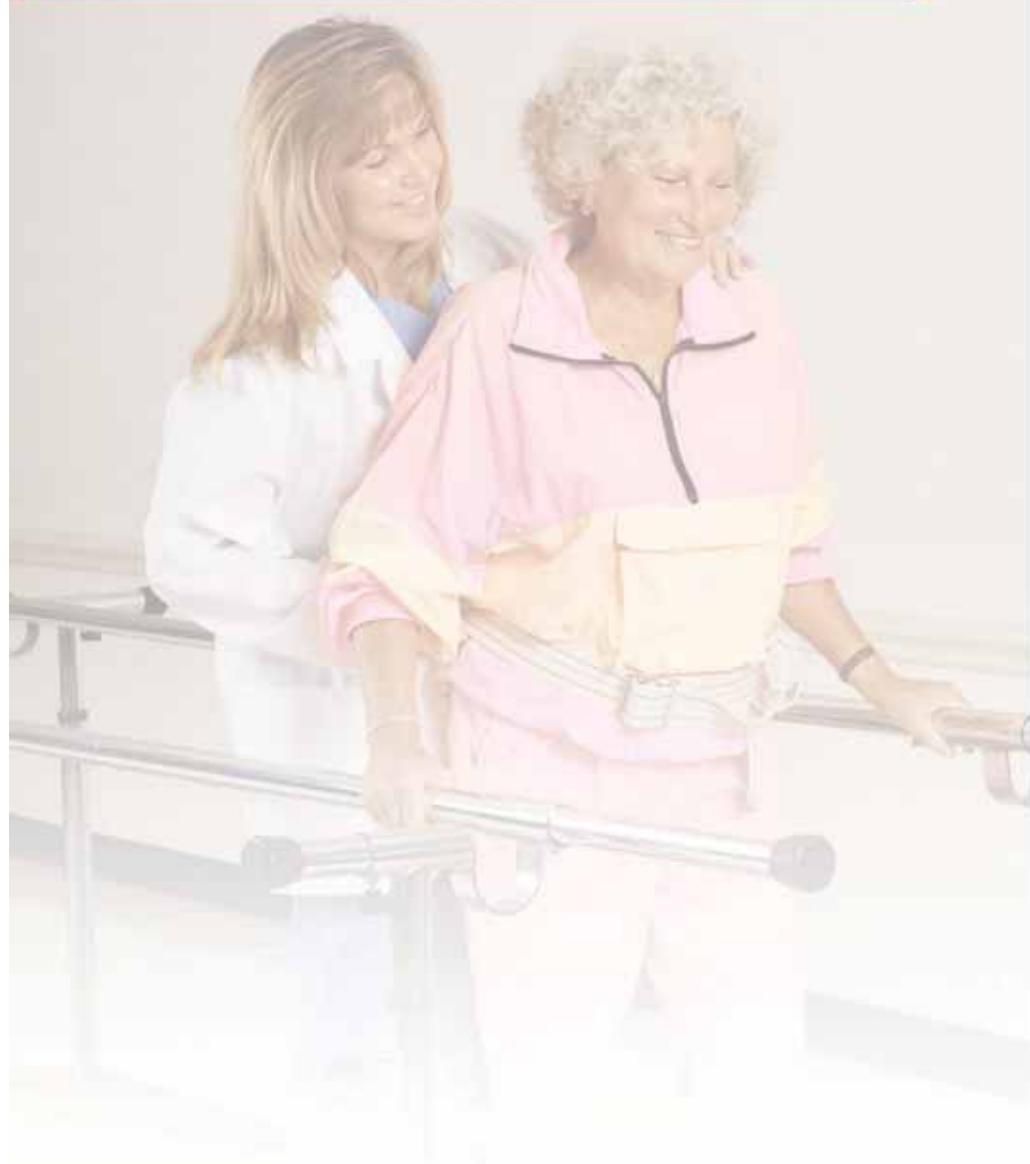
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- Utilizing the Medicare eligibility benefit following a hospital stay within the last 30 days and you need more care.
- Following surgery, your rehabilitation at home is not going as well as expected
- A physician recommends medical attention, but not a hospital stay
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WHEN MIGHT YOU USE THIS?

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- Occupational therapy
- Speech therapy
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- Other medical conditions, including wound care

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- Your family physician's office
- Your orthopedic surgeon's office
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Sky Vue Terrace
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