vision Tampa General Hospital will be recognized as a leading medical center in Florida and one of the best in the nation. We will be at the forefront of clinical services, medical research and education. With our physician and university partners we will create, teach and deliver tomorrow’s breakthroughs in medical science.

mission Tampa General Hospital is committed to providing the residents of West Central Florida with excellent and compassionate health care ranging from the simplest to the most complex medical services. As a teaching facility, Tampa General partners with academic and community institutions to support both their teaching and research missions. As the region’s leading safety net hospital, we reaffirm our commitment to providing high quality health services to all residents.
On behalf of the board of directors of the Florida Health Sciences Center, Inc., and the employees, physicians and volunteers of Tampa General Hospital, it is our pleasure to present Tampa General Hospital’s 2002 Annual Report.

Part of our mission as the primary teaching hospital for the University of South Florida College of Medicine is to stay at the forefront of medical advances. Whether it involves the latest generation of life saving drugs, or the most innovative new techniques in treating illness, Tampa General Hospital draws upon the broad knowledge and technical skill of both community and university physicians. Our physicians and staff worked together in 2002 to offer even more programs and services.

In the past year, we expanded our nationally ranked organ transplant program to include lung transplants. We also implemented a state-of-the-art stroke program that provides treatment options found nowhere else in the region.

We also completed construction on eight new outpatient operating rooms. The Outpatient Surgery Center now provides patients with a dedicated area that can handle all their needs from admission to discharge.

2002 marked an important milestone as the hospital celebrated its 75th Anniversary with a variety of celebrations for employees and our neighbors.

If you can believe local legend, the original location for a new municipal hospital was designed in a sand trap at a local golf course in 1926. The foursome included the builder of Davis Islands and a future mayor. They determined the point of land closest to downtown would be ideal for what later became Tampa General Hospital. An announcement that marked the November 1927 opening noted that the hospital had been “planned with the thought of giving patients every comfort and convenience that modern science and hospital arrangement could accomplish.”

We continue to strive for that same standard today. In the past year we started the renovation of our main lobby. We also began planning to turn three vacant hospital floors into new patient care areas. Planning also began for the construction of a new multi-story building anchored by a cutting edge emergency trauma center.

Our ability to launch new programs, renovate our buildings and begin planning for new construction is a direct result of our renewed financial health. Working as a team, Tampa General employees achieved a solid financial performance even as the health care industry fell victim to economic woes.

Since Tampa General Hospital is a private, not-for-profit corporation, we are able to reinvest our earnings into providing the residents of west central Florida with continued high quality patient care. Some of the beneficiaries of that care have agreed to share their stories inside this report. Their experiences personify Tampa General Hospital’s mission.
If Rebecca Weisenburger’s stroke last August had occurred at an earlier point in time, she would have died or been left severely weak, paralyzed and dependent on others to care for her.

Instead, Rebecca was able to take advantage of an aggressive new treatment started just a few months earlier at Tampa General Hospital. This treatment stopped the stroke and allowed the 53-year-old woman to remain healthy, vital, and able to continue doing the things she loves such as teaching aerobics, fishing from the river behind her Crystal River home and enjoying her life with husband Rick.

A stroke occurs when brain cells are deprived of oxygen and begin to die. The vast majority are caused by a blood clot that keeps oxygen-rich blood from reaching an area of the brain. In the past, stroke patients that arrived at the hospital within the first three hours could have clot-busting drugs administered into a vein in the arm, which could prevent a stroke’s disastrous results. In most hospitals, there was little to be done after three hours except hope for the best. Fortunately, technology has improved.

Last year, Tampa General Hospital began a new treatment that can be administered up to six hours after a stroke’s onset for patients with blood clots. Intra-arterial thrombolysis involves guiding a wire through a patient’s blood vessels to the area in the brain where the stroke is occurring. Then clot-busting drugs are administered directly into the blockage to immediately dissolve it.

This procedure can only be performed by physicians trained in the highly specialized field of interventional neuro-radiology. Tampa General’s Avery Evans, M.D., is the only doctor on Florida’s west coast trained to perform this procedure.

Physicians determined that a blood clot in her brain was causing her stroke and contacted Tampa General Hospital. Within an hour, TGH’s aeromedical helicopter was flying Rebecca, and her physician husband Rick, to Tampa. There stroke neurologist Erfan Albakri, M.D., confirmed her diagnosis and discussed all the treatment options, including intra-arterial thrombolysis, with the couple. But that procedure is not without danger so the couple faced a decision: opt for the procedure or do nothing.

“We really didn’t have to think about it,” Rick says. “As a physician, I knew there was the possibility that if Rebecca didn’t have it done, she could die within 24 hours anyway. We told them to do what they had to do.”

When she awoke the next morning, Rebecca knew something was different. “Rick was next to the bed. I said to him ‘look,’ and I raised my left arm.”

Rebecca began an intense course of physical therapy, working twice daily on exercises to regain strength and range of motion on her left side. When she went home a week later, she was walking with a cane. Since then, Rebecca has continued to improve. Today there is little to show of her life-threatening ordeal. She and Rick credit TGH.

“I give incredibly high concentrations of medication to the blood clot to dissolve it. I also do things mechanically to break up the clot using a wire. Patients can have remarkable recoveries once we get rid of the blood clot and reinstitute blood flow.”

Dr. Avery Evans
Interventional Neuroradiologist
The sight of his three children lying on the ground motionless and bleeding was like a scene from a nightmare. But for Brian Supple, this was reality.

Just seconds before, Brian had been retrieving groceries from his van with his three children standing close by. Suddenly, an SUV barrelled down the street and through the yard, stopping only after crashing into a next door neighbor’s car. Barely missing Brian, the wayward vehicle sent two-year-old Hunter, seven-year-old Helena, and nine-year-old Jonathan flying into the street where they landed unconscious on the rough pavement.

Jonathan’s injuries – a hairline fracture of his jaw and some cuts and bruises – were relatively minor. But Hunter and Helena were critically injured and desperately in need of immediate trauma care. Hunter’s skull was fractured in three places, his liver was cut, and his brain was injured. Helena also had a brain injury and liver lacerations, as well as punctured and collapsed lungs and broken ribs, teeth and a collar bone. Most perilously, Helena’s heart had stopped immediately after the accident. Fortunately, Charla Moye, a TGH nurse who lived across the street, ran over and performed CPR, helping to restart Helena’s heart.

Helena and Hunter were rushed by ambulance from their South Tampa home to Tampa General Hospital, the region’s only Level I Trauma Center, where a trauma team is on standby 24-hours a day to provide immediate, life saving care. This team of physicians, surgeons and nurses worked quickly to address the children’s most threatening injuries in a concentrated effort to save their lives.

Several hours later, Helena and Hunter were admitted to TGH’s pediatric intensive care unit for constant monitoring and care. Breathing with the help of respirators, their conditions were still precarious. But Helena soon began a steady path to recovery. After two weeks, she was taken off the respirator and moved to a regular patient room in Tampa General’s Children’s Medical Center.

The road was rockier for Hunter. He developed a lung disorder that hindered his ability to breathe and threatened his recovery. Physicians fought back and eventually won that battle with a treatment that allowed Hunter’s lungs to recover and the child to heal. Soon, Hunter was sharing his sister’s room in the Children’s Medical Center.

Now that both children were recovering, it became the hospital’s mission to help them regain the strength and physical abilities they had before the accident. They began a daily program of physical therapy in the pediatric gym working on balancing, walking, climbing and other exercises.

Helena was released from the hospital three weeks after the accident, and Hunter went home a week later. But they retained their ties to TGH for the next two months, returning twice a week for outpatient physical therapy.

Today, Hunter and Helena are back to being typical kids. They show little evidence of the horrific accident that nearly took their lives. Every so often, their grateful parents, Mari and Brian, go to Tampa General Hospital to visit hospital staff and express their appreciation for their children’s life saving care.

“We’re so happy with the care they got at Tampa General,” Brian says. “My children are alive, and they’re perfect.”

For the life saving care she administered to Helena, Charla Moye, RN, was named one of 14 National Nursing Heroes. This honor included meeting with President George W. Bush at the White House.
Jeffrey Smith, 17, is a pioneer of sorts. He was the first Tampa General Hospital patient to be implanted with a Thoratec® Ventricular Assist Device System, or VAD, a life saving technology that can take over the workload of a severely ailing heart.

But that distinction pales in comparison to the remarkable transformation Jeffrey underwent after the device was implanted. Within three months, his status changed from desperately ill heart patient to typical teenager.

Jeffrey was dying of virus-induced heart failure when he came to TGH in April 2002. He urgently needed a heart transplant; without one, he wouldn't last more than a few more days.

But a nationwide shortage of organ donors meant that weeks or months could pass before a suitable heart would become available. His only hope was the Thoratec® VAD, which, hopefully, would keep him alive until a heart was found.

The Thoratec® VAD consists of tubes connecting the heart and blood vessels to a small pump, portable driver, and battery pack that reside outside the patient's body. The tubes carry blood from the heart to the pump, which then sends blood through another tube back into the body's major blood vessels. It allows the heart to rest while other organs are nourished with oxygen-rich blood.

Jeffrey remembers waking up after the device was implanted and knowing that his condition had already changed.

"It was such a great feeling to not feel the sickness, to be able to breathe freely again, to not be choking for air, to be able to eat again," Jeffrey said.

Jeffrey was out of bed and walking the halls a few days later. And as his strength returned, his walks got longer. With a hospital staff member by his side, the teenager explored the hospital buildings and grounds, from the basement to the ninth floor, from the Food Court to the Gift Shop. He also took advantage of a treadmill and exercise bike located on his hospital floor. All this exercise helped Jeffrey's heart grow stronger.

"They did an echocardiogram two weeks after the Thoratec® was implanted, and it showed some improvement," says Jeffrey's father, Dave Smith. "Four weeks later, they did another echocardiogram, and there was significant improvement. That's when we started to dare to hope that his heart might recover."

By July, it was apparent that Jeffrey's heart had healed. He no longer needed a transplant or the VAD's assistance. It was removed and Jeffrey went home to St. Petersburg.

As a precaution, physicians implanted a defibrillator into Jeffrey's heart to prevent any episodes of faulty heart rhythm, and he continues to take medication. Otherwise, Jeffrey's life is back to normal. The high school junior was recently inducted into the National Honor Society and was named a finalist for a National Merit Scholarship. Exercise is also a strong part of his life. He has ambitions as a cross country racer and runs every day with his Jack Russell Terrier, Gator.

"Jeffrey really is back to normal. He now has no limitations on him," Dave Smith says. "We're so grateful to everyone at Tampa General Hospital for the care they gave Jeffrey and for allowing him the opportunity to keep his heart and for letting us get back to a more normal life."
ONCE WEIGHING 425 POUNDS, DANA IS NOW NEARLY HALF THAT SIZE AT 225 POUNDS.

Dana DeVellis’ friends now call her “the incredible shrinking woman.”

Once weighing 425 pounds, Dana is now nearly half that size at 225 pounds. The 28-year-old Tampa woman is aglow with health, energy and optimism. She is a vastly different person from when she first came to Tampa General Hospital in 2000.

“I was morbidly obese. I was starting to have problems with blood sugar and blood pressure, and I was having significant gallbladder problems. I would go to work, come home, and get into bed exhausted,” Dana says. “I just didn’t want to be obese any more. I wanted to be healthy and to not be winded going up a flight of stairs. I wanted to enjoy my life.”

Dana took the first steps by undergoing a Roux-en-Y gastric bypass operation at TGH. Introduced to Tampa General Hospital in 1998, the procedure has been performed on more than 400 people. These are people for whom diets have failed and for whom obesity-related diseases such as heart failure and diabetes would have been inevitable.

In the gastric bypass procedure, the stomach is separated into two compartments; one is a very small pouch that remains connected to the esophagus (food pipe). The small intestine is divided and reconnected to the small stomach pouch. Ingested food bypasses the larger stomach portion and goes directly into the small intestine.

Patients eat less food because of a radically limited stomach size. The surgery also changes the digestive system’s chemistry, restricting the body’s absorption of food. For this reason, gastric bypass provides far superior results compared to other weight loss surgery methods.

But surgery alone isn’t enough to cure obesity. A lifelong commitment to healthy habits is also essential. Candidates are carefully screened and counseled before the operation.

Dana was evaluated by an obesity physician and a psychiatrist. She also met with a nutritionist and an exercise physiologist and attended weight loss surgery support group meetings at TGH.

Dana refers to her surgery as her “new birth date.” And like a newborn, Dana’s diet at first consisted of liquids, then pureed foods. Eventually, she was back on solid food, only more nourishing and in smaller quantities. Junk food is no longer part of Dana’s diet.

Exercise also became an important part of her life. She joined a gym and she now exercises five days a week. She regularly runs and rides a bike. Dana remembers the first time she competed in the Gasparilla Distance Classic’s 5K race.

“It was one of the most incredible moments of my life,” she says. “I didn’t have any great (finish) time, but from where I came from, it was an incredible feeling to go through the finish line.”

Until recently, Dana returned periodically to Tampa General Hospital for follow-up exams. A few months ago, she had surgery at TGH to remove loose skin left after her weight loss.

No longer a patient, she now participates in support group meetings every month at TGH.

“I tell people what to expect,” she says. “I tell them that surgery is not a quick fix. It’s a tool, and you can use that tool to change your life.”

“NINETY PERCENT OF PEOPLE WHO HAVE THIS SURGERY ARE CURED OF DIABETES WITHIN THREE MONTHS. HIGH BLOOD PRESSURE AND SLEEP APNEA ARE CURED WITHIN SIX TO NINE MONTHS. ACID REFUX IS INSTANTANEOUSLY CURED. THERE’S A 50 PERCENT REDUCTION IN THE MEDICATIONS TAKEN FOR ASTHMA AND ABOUT 50 PERCENT WON’T NEED MEDICATION FOR OSTEOARTHRITIS.”

DR. MICHEL MURR
BARIATRIC AND GASTROINTESTINAL SURGEON
Patricia Bullock

Patricia Bullock, 53, was slowly suffocating to death. Afflicted by emphysema, her lungs functioning at only 15 percent of capacity, Patricia labored with every breath. Her life was focused around nebulizers and the portable oxygen tank she relied on 24 hours a day. Time was running out.

Then the telephone rang one morning last July bringing a life saving message from Tampa General Hospital: a lung had become available for transplantation. Patricia was to report to the hospital immediately. By 10 o’clock that night, Patricia had a healthy new lung.

“When I woke up the next morning, I was on a ventilator. A few hours later, they took out the vent and I breathed on my own,” she says. “It was the most wonderful feeling. I could breathe. I could take a deep breath and breathe.”

Until last year, the Palmetto resident and other debilitated lung patients had to travel to Gainesville, Miami, or Jacksonville for a life saving transplant. But in January 2002, Tampa General Hospital added lung transplantation to its well established transplant program. Three patients received lung transplants in that first month. By year’s end, the program had benefited eight patients.

Lung transplantation is extraordinary not only because of the surgery’s difficulty, but also the post-operative care requires a high degree of attention and expertise, according to pulmonologist, Mark Rolfe, M.D., the program’s medical director.

“While hearts and livers are tucked away inside the body, lungs are constantly exposed to the outside environment. You breathe in all the bacteria, viruses, dust, and pollution. This can lead to infections and predispose transplant patients for rejection,” Dr. Rolfe says.

For that reason, lung transplantation patients are put on a regimen of drugs to prevent rejection and infection. They are also placed on an exercise schedule both before surgery to get them into optimal condition and after surgery to exercise and strengthen their new lungs.

Patricia was out of bed the day after her operation. The next day she was walking up and down the hospital corridors. And on the third day a treadmill and exercise bike were placed in her room.

“By the time I left the hospital, I was walking 20 minutes on the treadmill, although not very fast, and doing other exercises as well. A week later, I was walking for 30 minutes. Then I started increasing my speed little by little on the treadmill and the bike,” Patricia says.

Patricia spent seven days in the hospital. She continues to exercise and returns regularly to Tampa General Hospital for checkups. She’s doing great, and she appreciates her renewed ability to enjoy life to the fullest.

“It’s not the big things that are most important to me now; it’s not the bowling league,” Patricia says. “It’s the little things that make life so wonderful; it’s being able to blow bubbles with my two-year-old granddaughter.”

THE TRICK IS IN THE TIMING BECAUSE THE ORGAN HAS ONLY A LIMITED AMOUNT OF VIABILITY AFTER REMOVAL FROM THE DONOR. AFTER SIX HOURS, POTENTIAL PROBLEMS CAN ARISE, SO WE HAVE TO PUSH QUICKLY. WE HAVE TO HAVE A GOOD TEAM OF PEOPLE WHO ARE WILLING TO TRANSPLANT IN THE MIDDLE OF THE NIGHT.

WE’LL HAVE ONE TEAM PROCESSING THE LUNGS FROM A DONOR WHILE TWO OTHERS ARE GETTING THE PATIENT READY. SO WHEN THE TEAM COMES INTO THE OPERATING ROOM WITH THE NEW LUNG, THE RECIPIENT PATIENT IS READY.”

DR. MARK ROLFE PULMONOLOGIST
THE 2002 ANNUAL REPORT WAS PUBLISHED BY THE STRATEGIC SERVICES DEPARTMENT.

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The Tampa General Hospital Foundation, Inc.

Established in 1974, the Foundation has a deep-rooted history in raising community and philanthropic support for Tampa General Hospital through the Foundation’s fund raising efforts. Individuals, corporations and foundations have an opportunity to positively impact the programs and services of Tampa General Hospital.

During the 2002 calendar year, the Foundation raised a record amount of $1.5 million through the support of our benefactors. In addition, the Foundation provided more than $1.1 million to Tampa General Hospital. This is an increase of 54% over 2001. These results are a direct testament to the dedication and generosity of our supporters.

SPECIAL EVENTS – A “GREAT TIME” TO GET INVOLVED

The Tampa General Hospital Foundation is proud to produce three signature events each year to benefit the programs and services of Tampa General Hospital.

ANNUAL NIGHT AT THE “GREATEST SHOW ON EARTH” The 11th Annual “Night at the Circus,” was presented by Feld Entertainment’s Ringling Brothers and Barnum & Bailey Circus on January 3, 2002. The event raised $138,000 in net proceeds for the neonatal intensive care unit. This is a 109% increase over money raised the prior year. Best of all, the event provided families and underprivileged children the opportunity to spend time together and experience the thrills of the “Greatest Show on Earth.”

THE 4TH ANNUAL GOLF TOURNAMENT presented by Wachovia/Davis Baldwin was held at Old Memorial Golf Club on April 15, 2002. This exclusive event raised an unprecedented net amount of $240,000, which benefits both the hospital’s More Health program, (an innovative program that provides children in Hillsborough and Pinellas schools with hands-on health and safety lessons) and the Foundation’s unrestricted account. Gifts to this fund allow the Foundation Board of Trustees and hospital leadership to direct the money where it is most needed.

THE 2002 “MOMENTS IN TIME” GALA was a huge success! This year’s theme, “Explore Ancient Egypt,” was presented by Busch Gardens Tampa Bay on May 4, 2002. The Egyptian Village of Busch Gardens came alive as guests arrived in full costume to travel through time to explore the splendors of the lost world and to dance until dawn. This spectacular event netted $144,000 for TGH’s neonatal intensive care unit.

STATE-OF-THE-ART – Technical innovations are changing the way we care for our patients.

The Portable Echocardiographic Machine, shown here with Foundation friend and trustee, Al Silva, brings technology to the patient’s bedside. The Portable Echocardiographic Machine, shown here with Foundation friend and trustee, Al Silva, brings technology to the patient’s bedside.

NO ORDINARY VAN – When the Rehabilitation Center needed a new van, Ron Bailey and The Bailey Family Foundation stepped up to the plate. Mr. Bailey, a former rehabilitation patient, experienced first-hand how important this van is to the physical and emotional well-being of our patients.

DOLLARS FOR SCHOLARS – The Tampa General Hospital Foundation Board of Trustees is working with Tampa General to support recruitment and retention of nurses. The Foundation raised its educational support for nurses to $10,000 in 2002. In addition to this contribution, the Foundation also established the Friends of Nursing Scholarship Fund, which raised over $50,000 in 2002.

FAMILY WAITING ROOM – Thanks to the generosity of Mr. and Mrs. Edward L. Flom, families of patients now wait in an expanded beautiful waiting room while their loved ones are being treated in our main operating suites. Named in memory of Mrs. Flom’s mother, Mrs. Ruth Adams Morris, this new waiting room provides space for children, a separate physician consultation room and separate bathroom facilities. TVs, movies and volunteers also help to make a family’s stay in the waiting room as comfortable as possible.

ESTABLISHED IN 1974, THE FOUNDATION HAS A DEEP-ROOTED HISTORY IN RAISING COMMUNITY AND PHILANTHROPIC SUPPORT FOR TAMPA GENERAL HOSPITAL. THROUGH THE FOUNDATION’S FUND RAISING EFFORTS, INDIVIDUALS, CORPORATIONS AND FOUNDATIONS HAVE AN OPPORTUNITY TO POSITIVELY IMPACT THE PROGRAMS AND SERVICES OF TAMPA GENERAL HOSPITAL.
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Ms. Doris A. Schmidt
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TGH Nurses and Staff of 5A

In Memory of
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Drs. Derry and Margarita Cancio
Mr. and Mrs. Johnny Freeman
Ms. Deana Nelson
Dr. and Mrs. Evan Packer

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AN HONOR AND MEMORIAL GIFT PROGRAM THAT RECOGNIZES SPECIAL AND MOMENTOUS OCCASIONS, AND/OR HONORS THE MEMORY OF A LOVED ONE. EACH LEAF ON THE GOLDEN TREE OF LIFE REPRESENTS A GIFT OF $1,000 OR MORE.

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* Denotes member of The Gordon Keller Society.
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This special group of children, the Young Davis Islanders, brought toys and Christmas carols to our pediatric patients in the Children's Medical Center.

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Stella Ferguson Thayer honors Jim Warren during the passing of the gavel ceremony at the Annual Dinner celebration.

Thunderbug™ made a special appearance at the Bloomingdale Golfers Club annual golf tournament. In 2002 the club hosted two special events to benefit our pediatric patients.

Left to right: Guests Marc Sachs, Bruce Faulmann, Ron Campbell; President Tampa Bay Lightning and wife Mary Jane, Nancy and Steve Crane celebrate good times at the "Moment In Time" Gala.
Mayor Dick Greco and wife Linda in full Egyptian costume for the "Moments In Time" Gala. Linda Greco served as chairperson of the event.

John Sykes and Don Wallace, with daughter Alexa, enjoy the "Night at the Circus" Patron's Party.

Ron Hytoff and Stacey Packer pose for a picture at the Annual Dinner celebration.
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Tampa General Hospital is very lucky to have the support of these special “santas,” Friends and Neighbors of Lithia, who bring joy and holiday cheer to our young patients.

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Ron Hytoff congratulates the winners at the Annual Golf Tournament.
Left to right: Doug LaCross, Dr. John Downs and Mick McClinmans.

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Stella Ferguson Thayer receives a warm welcome at the Annual Dinner celebration.

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Left to right: Mike O'Malley, Jack Hannon, Al Silva and Steve Unger at the Annual Golf Tournament.

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Stacey Packer presents a year-in-review at the Annual Dinner celebration.

Pediatric patients in the Children’s Medical Center enjoyed a day of fun, thanks to the generosity of A Kid’s Entertainment who donated their services to help brighten the day of our young patients.

Left to right: Monsignor Higgins, Ron Hytoff and Stella Ferguson Thayer at the Annual Dinner celebration.

Stacey Packer presents a year-in-review at the Annual Dinner celebration.
Left to right: Renee Magrane and Debbie Nouss pause for a photo at the “Moments In Time” Gala.

Jim Warren warms up on the putting green before the Annual Golf Tournament.

David Straz and Mayor Dick Greco share a laugh at the “Moments In Time” Gala.
Dr. and Mrs. Alex Rosemurgy show their Egyptian spirit at the “Moments In Time” Gala.

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Jim Warren congratulates his wife Samantha, Chairperson of the 2002 “Night at the Circus.”

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Karen and Lilia Zinszer

In-Kind Donations
AAA Auto Club South
ABC Channel 28
ABC Fine Wine & Spirits
The Aesthetic Skin Care Center
Ahjaleah’s Boutique & Shoe Salon
Air Logic Solutions
Alvin Magnon Jewelers
A’Propos
Dinah Arnette
Artistic Hair and Make Up by Fran Fernandez
Art of the Party
Mr. and Mrs. Richard M. Barcia
Bayshore Plastic Surgery
Ms. Holly Bea-Weaver
Beef O’Brady’s Family Sports Pubs
Benchmade Clothing by Ed Shedd
Berkeley Preparatory School
Better Business Forms
Body by Design
Bostonian Hair Studio and Day Spa-Tampa Palms
Brigittia’s
Buchanan Ingersoll Attorneys

This listing represents gifts received during the period January 1, 2002 to December 31, 2002. Every attempt has been made to ensure that all names and amounts are correct. Please notify the Foundation Office of any changes at (813) 844-7512.

* Denotes member of The Gordon Keller Society.
Mr. Ron Hytoff with Mr. Ron Campbell, President of the Tampa Bay Lightning and St. Pete Times Forum, share a proud moment at the 2nd Annual “Glitz and Sticks” event. This glamorous evening not only lets participants “gamble” for a good cause with Lightning players, but also raised $55,000 for TGH’s Children’s Medical Center. Thank you to our community partners at the St. Pete Times Forum for hosting this fabulous evening!

Busch Gardens Tampa Bay
Cache at University Mall
City of Tampa
Classix Threads
Coach
Cornerstone Health Care Services, Inc.
Mr. Jerold L. Crawford
Tom and Betty Danzi
D’Marie, Inc.
Donatello’s
Steven and Wendy Darbin
Elite Mobile Detailing
Enterprise Rent-a-Car
Extravaganza! Productions, Inc.
Feld Entertainment
Ferman Motor Car Company
Friends & Neighbors of Lithia
Funds Hays Graphic Design
Golf America—Citrus Park Mall
The Honorable Dick A. Greco and
Dr. Linda McClintock-Greco
Juli and Daniel Greenwald
Guido Morana Jewelers
Mr. Ronald A. Hytoff
IMG
J. Alexander’s Restuarant
JB of Florida
JC Newman Cigar Company
Dr. Diane Jeffery
Joanne Centeno Jewelry
Kate Flahart Foundation
A Kid’s Entertainment
King Jewelers
Krewe of Pandora
Lexus of Tampa
Linden Galleries
Lladro Center, International Plaza
Marcos F. Lorenzo, MD
Lowry Park Zoo
Dr. Sandra MacLeod
Muggiano’s
Jean M. Mayer
Mel’s Hot Dogs
Mercedes-Benz of Tampa
Mark Misner
Morrison Management Specialists
Murder For Hire, Inc.
Museum of Science and Industry
Ms. Deana Nelson
Ms. Ginger K. Oliver
Outback Steakhouse, Inc.
Dr. and Mrs. Evnin Packer
Dr. and Mrs. Ferdie Pacheco
Pané Rustica Bakery & Café
P.K.S. Rentals of Tampa Bay
Ms. Judith Ploszek and
Mr. Dane Cutler
Reeves Import Motorcars, Inc.
Mr. Joey Resnick
Dr. and Mrs. Alexander Rosemurgy
Saddlebrook Resort
Mr. and Mrs. Steve L. Short
Something Special
Phil Stambaugh
SS American Victory Ship
Mr. and Mrs. David A. Straz, Jr.

Talbot’s Old Hyde Park Village
Tampa Fire Department, Station #14
Tampa Bay Lightning
Tampa General Hospital
TGH Aeromedical Transport Department
TGH Human Resources Department
TGH Marketing Department
TGH Safety & Security Department
The Tampa Tribune
University of South Florida,
Department of Athletics
VIP Limo, Inc.
Ken Walters
We’re In Stitches
Wine Warehouse of New Tampa
WTSP Channel 10
Young Davis Islanders
TAMPA GENERAL HOSPITAL OPERATING INDICATORS
For the Years Ending September 30, 2002, 2001, 2000 ($’s in thousands)

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total Revenues</strong></td>
<td>$532,530</td>
<td>$411,706</td>
<td>$363,086</td>
</tr>
<tr>
<td><strong>Expenses</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Salaries &amp; Benefits</td>
<td>$206,336</td>
<td>$167,530</td>
<td>$146,008</td>
</tr>
<tr>
<td>Medical Supplies</td>
<td>95,479</td>
<td>78,945</td>
<td>69,666</td>
</tr>
<tr>
<td>Provision for Bad Debts</td>
<td>50,819</td>
<td>38,816</td>
<td>46,668</td>
</tr>
<tr>
<td>Purchased Services</td>
<td>34,159</td>
<td>32,207</td>
<td>28,537</td>
</tr>
<tr>
<td>Depreciation, Amortization</td>
<td>16,927</td>
<td>17,173</td>
<td>17,166</td>
</tr>
<tr>
<td>Professional Fees</td>
<td>14,835</td>
<td>13,579</td>
<td>14,522</td>
</tr>
<tr>
<td>Utilities &amp; Leases</td>
<td>12,742</td>
<td>12,863</td>
<td>10,966</td>
</tr>
<tr>
<td>Interest</td>
<td>7,715</td>
<td>8,001</td>
<td>8,302</td>
</tr>
<tr>
<td>Insurance</td>
<td>4,150</td>
<td>2,749</td>
<td>2,019</td>
</tr>
<tr>
<td>Other</td>
<td>33,166</td>
<td>29,066</td>
<td>26,395</td>
</tr>
<tr>
<td><strong>Total Expenses</strong></td>
<td>$476,328</td>
<td>$400,929</td>
<td>$370,249</td>
</tr>
<tr>
<td><strong>Gain (Loss)</strong></td>
<td>$56,202</td>
<td>$10,777</td>
<td>$(7,163)</td>
</tr>
<tr>
<td><strong>Total Assets</strong></td>
<td>$381,466</td>
<td>$301,857</td>
<td>$284,873</td>
</tr>
</tbody>
</table>

**UTILIZATION**

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Discharges</strong> (excludes newborns)</td>
<td>27,848</td>
<td>26,166</td>
<td>23,700</td>
</tr>
<tr>
<td><strong>Patient Days</strong> (excludes newborns)</td>
<td>183,052</td>
<td>170,788</td>
<td>155,703</td>
</tr>
</tbody>
</table>

**CARE PROVIDED TO INDIGENT PATIENTS**

<table>
<thead>
<tr>
<th></th>
<th>As a % of Total</th>
<th>As a % of Total</th>
<th>As a % of Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Charges Forgone</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicaid</td>
<td>$200,196</td>
<td>12.81%</td>
<td>$138,320</td>
</tr>
<tr>
<td>HCHCP</td>
<td>69,045</td>
<td>4.42%</td>
<td>60,933</td>
</tr>
<tr>
<td>Charity</td>
<td>65,130</td>
<td>4.17%</td>
<td>52,566</td>
</tr>
<tr>
<td><strong>Total Indigent</strong></td>
<td><strong>$334,371</strong></td>
<td><strong>21.40%</strong></td>
<td><strong>$251,821</strong></td>
</tr>
<tr>
<td><strong>Hospital Gross Charges</strong></td>
<td><strong>$1,563,280</strong></td>
<td><strong>$1,212,690</strong></td>
<td><strong>$874,151</strong></td>
</tr>
</tbody>
</table>

**Utilization of Services**

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
<th>2000</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Discharges</strong> (includes newborns)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Medicaid</td>
<td>9,279</td>
<td>29.63%</td>
<td>7,522</td>
</tr>
<tr>
<td>HCHCP</td>
<td>1,171</td>
<td>3.74%</td>
<td>1,372</td>
</tr>
<tr>
<td>Charity</td>
<td>2,877</td>
<td>9.19%</td>
<td>3,813</td>
</tr>
<tr>
<td><strong>Total Indigent</strong></td>
<td><strong>13,327</strong></td>
<td><strong>42.56%</strong></td>
<td><strong>12,707</strong></td>
</tr>
<tr>
<td><strong>Total Discharges</strong></td>
<td><strong>21,313</strong></td>
<td><strong>64.06%</strong></td>
<td><strong>20,574</strong></td>
</tr>
</tbody>
</table>

**PAYOR MIX – 2002**

(percentage of gross revenues)

- Medicare 30.6%
- Medicaid & Hillsborough County Health Plan 20.5%
- Managed Care 35.2%
- All Other 13.7%

**PATIENT DAYS**

(excludes normal newborns)

<table>
<thead>
<tr>
<th></th>
<th>2000</th>
<th>2001</th>
<th>2002</th>
</tr>
</thead>
<tbody>
<tr>
<td>2000</td>
<td>155,703</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2001</td>
<td>170,758</td>
<td></td>
<td></td>
</tr>
<tr>
<td>2002</td>
<td>183,052</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
CENTERS OF EXCELLENCE

REGIONAL TRAUMA CENTER
The only Level I Trauma Center in West Central Florida, providing emergency treatment to adults and children with critical injuries and acute illnesses. This Level I rating means that a designated trauma team is in the hospital 24 hours a day, ready to respond to the most serious injuries. An adult ER trauma room, a pediatric trauma room, and a dedicated trauma operating room are available 24 hours a day.

REGIONAL AEROMEDICAL TRANSPORT PROGRAM
Three aeromedical helicopters equipped with the most advanced life support equipment transport critically ill or injured patients from 23 counties.

REGIONAL BURN CENTER
One of four burn centers in the state. A self-contained unit dedicated to treating critically burned patients from initial emergency admission through reconstructive surgery and follow-up care.

TRANSPLANTATION PROGRAM
The first successful heart transplant in Florida was performed at Tampa General in 1985. TGH is the only hospital in West Central Florida performing adult heart, lung, kidney, liver and pancreas organ transplantation. In addition, pediatric kidney transplants are also performed at TGH. During 2002, Tampa General Hospital transplanted 42 hearts, eight lungs, 150 kidneys, 22 kidney/pancreases, seven pancreases and 73 livers. TGH is one of 12 centers in the nation to have performed more than 500 heart transplants.

NEONATAL INTENSIVE CARE UNIT
As a Level III Neonatal Intensive Care Unit (NICU), neonatologists are in-house 24 hours a day and our Level III status is the highest rating available. TGH provides the most advanced treatments for critically ill newborns including ECMO, a life-saving breathing treatment available at only six hospitals in Florida.

CARDIAC SERVICES
Provides a complete range of non-invasive, invasive, surgical, diagnostic and rehabilitative services.

CENTER FOR BLOODLESS MEDICINE & SURGERY
This program is designed to provide state-of-the-art medical care for patients who choose not to accept blood transfusions or blood products. Bloodless care can be applied to nearly every medical and surgical specialty.

CHEST PAIN AND STROKE CENTER
Patients with symptoms of heart attack or stroke (brain attack) are taken directly to the Chest Pain and Stroke Center. Diagnostic procedures begin immediately and, when indicated, treatment is administered to halt the attack’s progress. This specialized focus substantially reduces the time in which patients are diagnosed and treated compared to facilities without chest pain and stroke centers.

CHILDBIRTH CENTER
Offering prenatal education classes, well baby care, and high-risk obstetrical services. Free infant car seats are given to all new mothers at discharge.

CHILDREN’S MEDICAL CENTER
A dedicated unit focusing on the care and treatment of children, designed with kids in mind from its specialized medical staff to furnishings. Special services include a nine-bed pediatric intensive care unit, pediatric dialysis and certified child life specialists. A Ronald McDonald House is on the TGH campus to serve families of our pediatric patients.

DIGESTIVE DISORDERS CENTER
Referral center for routine and complex disorders of the digestive system. State-of-the-art diagnostic procedures and innovative treatments and therapies are applied to minimize recovery time, pain, and improve outcomes. Advanced technology for treatment of ulcers and heartburn.

INFECTIOUS DISEASE SERVICES
In addition to providing state-of-the-art patient care, this service provides specialized training, consultation and continuing education in infectious disease care for health professionals. Topics address problems arising from bio-terrorism, emerging pathogens, and bacterial resistance.

NEUROSCIENCES SERVICES
Specializes in the diagnosis and treatment of patients with neurological injuries and impairments, including stroke, epilepsy and movement disorders such as Parkinson’s and Huntington’s disease.

ORTHOPEDIC SERVICES
A multidisciplinary team of physicians supported by nurses, physician assistants, and physical and occupational therapists, provides total replacement of failed joints, including hips, knees, shoulders and elbows.

REHABILITATION SERVICES
Provides specialized therapy for patients of all ages with head and spinal cord injuries, stroke, amputations and other neuromuscular disorders. TGH is one of just nine state-designated spinal cord and head injury centers in Florida and is accredited by the Commission on Accreditation of Rehabilitation Facilities.

GOVERNANCE
Tampa General Hospital, a private, not-for-profit corporation, is governed by a volunteer Board of Directors.

ACCREDITATIONS
Joint Commission on Accreditation of Healthcare Organizations, and Commission on Accreditation of Rehabilitation Facilities.

ADMINISTRATOR
Ronald A. Hyloff, President and Chief Executive Officer.

LICENSED BEDS
818 acute care and 59 rehabilitation care beds.

PATIENTS (FY 2001-2002)
Inpatient Admissions – 27,848
Births – 3,970
Emergency Care Center – 59,739
Adult Emergency Care Center – 47,745
Pediatric Emergency Care Center – 11,994

SURGICAL SUITES – (36 total)
Main – 17 (including one dedicated trauma room)
Burn – 1
Cardiac – 6
OB/GYN – 4
Outpatient – 8

MEDICAL STAFF
CHARLES E. WRIGHT, M.D.
Chief of Staff
STEPHEN B. BRANTLEY, M.D.
Vice Chief of Staff
SALLY H. HOUSTON, M.D.
Secretary/Treasurer
JOHN C. BROCK, M.D.
At Large Representative
CATHERINE M. LYNCH, M.D.
At Large Representative
LOREN J. BARTELS, M.D.
Past Chief of Staff

MORE HEALTH, Inc. (school and community health education)
(813) 258-6366

FOUNDATION
The Tampa General Hospital Foundation provides ongoing support to many of Tampa General Hospital’s programs and services. To learn how you can help, please call (813) 844-7250. Every gift is appreciated.