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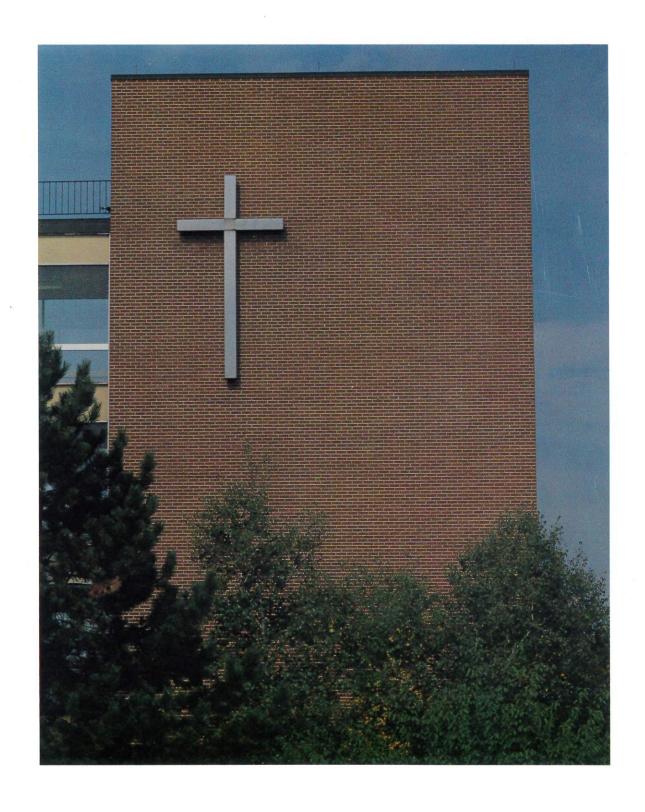
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MUHLENBERG MEDICAL CENTER

1982-1983 Report to the Community

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Cardio-Pulmonary Medicine

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Computer Servic

Jeffery Fuehrer

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Bonnie Scott Dietary

Susan Forrest Emergency Room

Susan Fullenwider 4 South

Theresa Makos Housekeeping William Schellhaas Human Resources

Virginia Stover

Intensive/Coronary Care Unit

Charles Fenstermaker Laboratory

Carl Manley

Materials Management

Eileen Houck

Nuclear Medicine/Ultrasound

Mary Matte

Nursing-Associate Director

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Occupational Therapy

Mary Dorosh

Operating Room

Kathleen Nash Pharmacy Paul Guignet Physical Plant

Richard Frantz Physical Therapy

Gayle Keim Levas
Psychiatry

Martha Witz

Quality Assurance

Helene Wechsler-Oplinger Radiology

Kris Shafer

Social Service Sue Madej

3 South

Shirley Nagle 2 South

Mary Grace Stanton Volunteer Services

Report of the Chairman



The past year has been another exciting experience in the growth and development of the Medical Center. With the advent of TEFRA (Tax Equity and Fiscal Responsibility Act of 1982), it has become evident that the federal government has decided to take an active role in the containment of escalating health care costs. Without getting into details, the Act generally provides that Medicare will no longer pay the actual cost of hospitalization, but will pay on the basis of a formula which rewards the hospital whose costs are lower and penalizes the hospital whose costs are continuing to rise at a high rate. Since Medicare (the Federal Government) is the largest third party payor of health care costs, this is a significant development. Furthermore, it appears to be only a matter of time until the other third party payors (Blue Cross, Medical Assistance and private insurance companies) will follow suit and pay on somewhat the same basis.

Largely motivated by TEFRA, hospitals are now engaged in corporate restructuring, and we are no exception. You may recall some news media coverage some time ago, but I would like to report directly to you what is happening in this regard.

Basically our new organization will be as follows, and the physical assets of the Medical Center will be divided among the new corporations.

This corporate restructuring will enable us to accomplish the following:

- 1. Separate all functions which are not necessary to the operation of the hospital facility into other entities.
 - 2. Increase flexibility in the overall development of the hospital property.
- 3. Remove the burden of administration of the non-hospital properties from our hospital administration.

In addition, there will be another corporation known as:

THE FOUNDATION OF MUHLENBERG MEDICAL CENTER:

This corporation will hold all restricted funds of the Medical Center and in the future all donors will be encouraged to make gifts to the Foundation rather than to MMC itself. It is further anticipated that this corporation will assume an active fund raising role for the Hospital.

All corporations will be non-profit corporations and will be controlled by the Board of Trustees of The Muhlenberg Corporation. The Board of Trustees of The Muhlenberg Corporation will consist of the Executive Committee of the Board of Trustees of the Medical Center, and, accordingly, the overall enterprise will be closely watched by the current Board of Trustees. The Foundation will have an independent Board of Trustees, with representation from the Medical Center.

Already there are many inquiries regarding possible directions of growth for the new corporations, but until the restructuring is complete, there is no commitment which can be made except that whatever takes place will be for the ultimate benefit of the parent corporation, and ultimately the Hospital.

MUHLENBERG MEDICAL CENTER:

The Hospital will remain intact. There will be no change in the Board of Trustees or other personnel or in the mission of the institution. Land and other assets, not used for hospital purposes (leaving, however, room for significant expansion) will be transferred to some of the other corporations.

THE MUHLENBERG CORPORATION:

This new corporation will be a holding corporation which in turn will own the stock of all the other corporations in the group, except the Hospital.

MMC DOCTORS OFFICE CAMPUS:

This corporation will own the present doctors office buildings and additional land to the north along Schoenersville Road. Many possibilities exist as to the future of the doctors office complex.

MMC REALTY CORPORATION:

This corporation will own the blood bank building and the land where we presently hold the annual Summer Festival. Once again, there are exciting possibilities in the development of this asset.

MMC LEHIGH INVESTMENT CORPORATION:

This corporation will own all remaining land west of Schoenersville Road and north of the IBM access road. We have already had a significant number of inquiries regarding possible development of this land.

MMC NORTHAMPTON INVESTMENT CORPORATION:

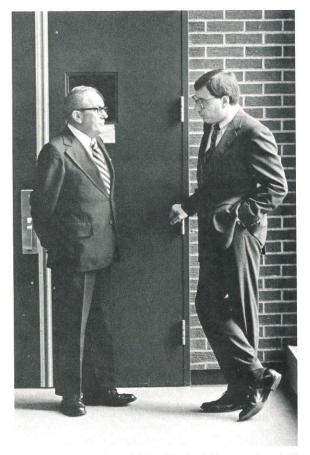
This corporation will own all land of the Medical Center in Northampton County, i.e., east of Schoenersville Road. Again, development is inevitable in that area.

This report could not possibly be complete without an acknowledgment on my part of the tremendous support and assistance I have enjoyed for another year from the Board of Trustees and its committees; the Auxiliary of MMC, Men of MMC and Summer Festival Committee; all our other dedicated and loyal volunteers; the Administration and Hospital staff; and our wonderful Medical Staff. My heartfelt thanks to the Board of Trustees, and I am sure the Board joins me when I give thanks to all of the others who make Muhlenberg Medical Center what it is.

Jacob S. Kolb, Esq.

Chairman of the Board

President's Report



Geo. L. Donaghue, M.D., Medical Director (on left) and Joseph W. Fitzgerald, President

From a historical perspective, this past year will probably be documented as one of the most turbulent years for the health care industry. The enactment of the Tax Equity and Fiscal Responsibility Act of 1982 and the most recent enactment of the Prospective Payment System have caused many institutions to begin speaking in terms of "survival." Yet this past year marked the most successful year in the history of our fine hospital.

This is no one individual, department or group that can claim to be the sole reason for our success; rather, it is clearly a viable outcome of the activities of the Trustees, Medical Staff, management, employees, volunteers and auxiliaries moving ahead in a coordinated approach. It becomes apparent now that the internal organizational structures of these groups, revised last year, have proven to be most effective as we move further into the 80's.

The Board of Trustees initiated a progressive planning process that caused all of us to examine our mission and objectives. Today, our Chiefs of Services and departmental directors are still active in delineating our future objectives with our Planning Committee, in order to ensure continued high quality service at an affordable price.

The physician community, under the guidance of our Medical Director, Chiefs of Services and the Quality Assurance Division, planned and executed more steps to make the hospital more efficient in its delivery of services. According to governmental statistics, our hospital presently has the second highest acuity level (measure of patient illness severity) in our area. Yet these Medical Staff actions reduced our length of stay per patient by an average of two days, while maintaining the high standards of care.

The management staff continued its efforts in controlling costs. Programs relating to productivity, materials management and energy management (which will be described later in this report) have been extremely successful and maintained our hospital's cost structure position as a leader in our area. In fact, the average cost per admission for the past year actually decreased over prior years—all due to the combined efforts of the physicians and management working together.

We, at Muhlenberg, recognize the challenge ahead. We believe that the efforts of our "family", with the dedication and competency that they demonstrate, positions us to continue to "thrive" in the future.

Joseph W. Fitzgerald

President

Jaye W. Sitzguale

Muhlenberg Medical Center Statistics

For Year Ending June 30, 1983

Patient Days	43,377
Medical/Surgical	29,858
ICU/CCU	1,995
Psychiatry	11,524
Percentage of Occupancy	
Total	80.7
Medical/Surgical	78.7
ICU/CCU	68.3
Psychiatry	87.7
Operations	2,773
Radiology Procedures	29,607
Laboratory Tests	202,224
Nuclear Medicine Procedures	3,200
Physical Therapy Procedures	49,091
EKG—Stress Tests	8,093
Pulmonary Therapy Treatments	9,834
Respiratory Therapy Treatments	8,708
Emergency Room (visits)	21,761

This Audited Statement Shows Our Income and How It Was Spent in the Year Ending June 30, 1983*

From the health care services to our patients and from other sources, we earned We had to reduce those earnings for contractual arrangements with Medicare, Blue Cross and Medical Assistance, and for those patients unable to meet their financial	\$25	,622,500
obligations, by	7	,008,000
This provided us a real operating income of	18	,614,500
In providing quality care for our patients:		
the hospital had operating costs of		
for total operating costs of	18	,516,300
This provided an excess revenue over expenses for reinvestment in the future of $\ \ .$	\$	98,200

^{*}As audited by: Bert W. Palo & Associates Moorestown, New Jersey

Responding to the Community's Health Care Needs

No one relishes the thought of a family member in the hospital. But when the unforeseen occurs, part of the reassurance that a hospital can offer to a patient's family is that the hospital will treat the patientas something more than a disease entity—as a unique individual. We at Muhlenberg Medical Center believe that caring is an essential part of curing and that the social and emotional aspects of a person cannot be separated from the physical and clinical.

New Intensive and Coronary Care Unit

The March 1983 opening of the new intensive and coronary care unit added to the quality of Muhlenberg Medical Center's care of the acutely ill patient. Designed with patient care and comfort in mind, the new unit ensures patient privacy while giving the clinical team a full view of the patient—as well as providing rapid access to the bedside in an emergency. Sophisticated monitoring equipment, including closed circuit cameras, alerts the professional staff to any changes in a patient's condition.

Yet the patient care goes beyond state-of-the-art technology . . . Right in step with a growing trend in the treatment of the acutely ill, the unit's therapeutic environment enhances recovery. Spacious private rooms buffering noise and activity levels, windows permitting visibility to the world outside—these are just a few elements which the planners incorporated to help the patient remain oriented to life's daily activities and to reduce sensory deprivation. In the world of a patient whose surroundings consist of tubes, monitors, ventilators and a variety of other sophisticated medical machinery, privacy and contact with a caring staff and family certainly enhance recovery.

Pharmacy Moves into Expanded Quarters

The hospital's Pharmacy continues to affirm its role as a partner in health care.

A "typical" patient requires an average of three medications or eight doses each day, and in order to meet this need, the Pharmacy dispenses nearly 500,000 doses per year—an enormously important endeavor in the provision of quality patient care.

One of the features of the Pharmacy's new quarters designed to accommodate the specialized tasks of a modern hospital pharmacy is a specially equipped room for compounding IV solutions. A laminar air flow hood removes all dust, impurities and contaminants from the air and provides a sterile work area under the hood. Also, because of the velocity and direction of the air flow, the room air and the clean air do not mix.

Muhlenberg Medical Center's Pharmacy applies special knowledge of pharmaceutical and biomedical sciences to optimize the efficiency, safety and precision of drug therapy.

Good medical care is predicated on the skills of physicians, nurses and other health care professionals . . . the latest scientific knowledge . . . and the best equipment that modern technology can offer. New technology improves diagnosis, treatment and surgery. With this in mind, Muhlenberg Medical Center took several steps this past year to keep pace with the increasing technology of medicine.

Through the acquisition of a Dynamic Electrocardioscanner, the hospital's Cardio-Pulmonary Medicine Department expanded its cardiac monitoring capabilities. This computerized instrument provides high-speed analysis of data gained from a continuous ambulatory electrocardiogram or EKG.

Furthermore, the instrument can reduce the length of time a patient is in the hospital since the monitor





may be conveniently and comfortably used at home. After data is accumulated for a 24-hour period, the patient returns to the hospital merely to drop off the cassette for analysis.

The Clinical Laboratory now has in place two new pieces of equipment to help meet the growing needs of a department which last year performed over 200,000 tests. The MLA-600 Coagulation Analyzer and ASTRA-4 Chemistry Analyzer combine efficiency, speed and accuracy to ensure that test results are available to the physician who uses such data for aid in diagnosis.

The hospital's Radiology Department houses some of health care's most complex technological equipment. The information revealed in radiologic diagnostic studies is essential in determining treatment and therapy. The installation last year of a new radiographic and fluoroscopic procedure room has had significant impact on the efficiency and accuracy of certain studies.

With the acquisition of a Real Time Ultrasound Unit, the Nuclear Medicine and Ultrasound Department has the most up-to-date equipment available today for the diagnostic ultrasound imaging needs of a hospital our size. A non-invasive, painless technique, ultrasound testing uses high frequency sound waves to produce images of body structures. The new instrument yields sharp, clear images and has great potential for ultrasonically-guided thin needle biopsies.

The Physical Medicine Department now has a High Voltage Galvanic Electrical Stimulator, a new development in the field of physical therapy. This electrical modality adds another dimension to the treatment of certain traumatic injuries and neurological problems.





Recognizing the generous support of individuals with time and talent to share

We at Muhlenberg Medical Center are very fortunate to have a broad base of voluntary support. During the past year, many people gave of their time, themselves and their resources to assure that the special aspects of Muhlenberg Medical Center would continue to thrive.

To each of you who has given to the hospital in some way, thank you for your thoughtfulness.

Auxiliary of Muhlenberg Medical Center

1982-1983 brought changes to the Auxiliary of Muhlenberg Medical Center, and the Auxilians met these exciting challenges with characteristic enthusiasm and energy. A new method of membership renewal was inaugurated in the new year. The outcome was encouraging: Not only was members' support reaffirmed in all the Auxiliary areas, but this network of community-minded people added to its membership rolls.

The Thrift Shop, a long-time Auxiliary community project, had a "face lift." Over the years the Thrift Shop, in its South Bethlehem location, provided clothing and household items at a reasonable cost and donated the proceeds to the hospital. With its new look, the shop promises to continue serving

Muhlenberg Medical Center and the community.

The Auxiliary also presented a check for \$38,000 to the hospital reflecting funds raised through numerous projects throughout the year. Without a doubt, these projects illustrate the unfailing dedication shown by the Auxiliary in over 25 years of service to the hospital.

Men of Muhlenberg Medical Center

The Men of MMC, one of the few all-male hospital auxiliaries in the nation, continued to serve the hospital. During the year they made a final payment on a \$20,000 pledge. These funds, along with proceeds from the popular Christmas wreath sales, were generously contributed to help meet the financial obligations of patients unable to pay.

Summer Festival

Muhlenberg Medical Center's Summer Festival is the Lehigh Valley's most popular attraction year after year. The Festival is the culmination of the efforts of countless volunteers. Comprised of representatives from the Auxiliary and the Men of Muhlenberg Medical Center, the Summer Festival Board sponsors the event. The tremendous work these people do all year within the context of the committee structure is the key to the success of the event.

The 1982 Summer Festival broke all attendance records, and the Board generously turned over \$60,000 to the hospital. These funds were earmarked for the intensive and coronary care unit renovations.

Junior Auxiliary

The Junior Auxiliary of Muhlenberg Medical Center donate an indispensable resource—their youthful idealism and vigor. This past year saw their numbers

swell to 150, a record for these "volunteens." After school, on the weekends, and during the summer months, these youths assisted in many areas of the hospital.

They were busy . . . busy with bake sales, cheese sales, cash raffles. They donated a record \$6,600 to the hospital from their fund-raising efforts.

Volunteers

One cannot stress enough the importance of volunteers or the vital role they play in patient care at Muhlenberg Medical Center. Their 51,100 hours of service in 37 hospital areas is an outstanding accomplishment.

. . . All of these people are just some of the reasons why Muhlenberg Medical Center continues to provide the excellent, personalized care that it is known for . . .

Managing a Critical Health Care Resource—Information

Computers are tools whose role in the delivery and administration of health care has just begun to be realized. For almost a decade Muhlenberg Medical Center has been a part of a cooperative effort with three other area hospitals directed at applying data processing technology to hospital management . . . with benefits for the patient, the hospital and the community.

A look at Muhlenberg Medical Center reveals that computerization has greatly enhanced a critical health care resource—information. Over the past years the hospital has implemented and refined informational systems on the firm belief that accurate, timely collection and reporting of information are of paramount importance if a hospital is to deliver quality health care. Quite frankly, the data that a hospital gathers is vital to the health of the patient and to the health of the institution itself.

The positive effects of information management are seen in almost every department of the hospital. For example, patient admission processing time has decreased by 60% as a result of procedures which "pre-register" the patient data into a computer even prior to the day of admission. The information is rapidly updated upon admission, requiring only a few minutes of the patient's time.

Computerization speeds the *flow* of information from one area of the hospital to another. For example, when a physician orders a diagnostic procedure for a patient, this request can be immediately transmitted to the clinical area which will perform the procedure. Not only does this enhance patient care by ensuring prompt testing and results reporting, but this system also organizes and stores accurate and complete patient data.

This information forms the basis for follow-up and quality assurance studies aimed at monitoring each patient's progress. Furthermore, quick retrieval of this data is vital as the uses and demands for clinical information increase.

Effective utilization of information makes us better managers of our financial, as well as clinical, resources. Indeed, through our informational systems, Muhlenberg Medical Center has taken an active role in responding to the changing environment of health care and the increased demands for health care at an affordable cost. We are closely scrutinizing our resources with the aim of managing them as efficiently and effectively as possible.



Over the past year, the hospital developed a sophisticated system which merges clinical and demographic patient data with financial particulars. In this way, we can analyze factors that determine the total cost and utilization of our hospital services. Furthermore, the system offers immense planning potential as Muhlenberg Medical Center positions itself to meet future health care needs.

Managing the Hospital's Resources

Today, certainly more than ever before, hospitals are being challenged to deliver quality medical care and professional services to patients at an affordable price . . . Hospitals must also manage their dollars in a business-like manner, tackling head-on important concerns such as effective utilization of facilities and personnel and energy management. These are just some of the issues that Muhlenberg Medical Center continued to concern itself with over the past year.

Ambulatory surgery is one of the more innovative and successful health care alternatives growing rapidly in response to patient demand. Also known as outpatient surgery, it is designed to serve patients who require certain minor or routine surgical procedures but who do not require inpatient hospitalization. By eliminating some expenses associated with overnight hospitalization, surgery costs can be significantly reduced.

This concept is not new to Muhlenberg Medical Center. For a number of years in our Ambulatory Surgical Unit we have eliminated a patient's hospital stay and increased patient convenience and cost savings . . . while at the same time providing a high quality of surgical care.

Not only does the unit offer patients a comfortable and convenient alternative to inpatient care, but the unit continues to meet the growing demand for more efficient utilization of hospital beds and facilities.

October, 1982, heralded a new phase for the hospital's Ambulatory Surgical Unit as it moved into renovated quarters. The thriving unit offers a variety of procedures and specialties, including gynecologic, urologic, orthopedic, plastic surgery, general surgery, eye, dermatologic, dental and podiatric.

Ambulatory surgery is good "medicine" for the patient. The atmosphere is friendly and relaxed, the care personalized and reassuring.

Pre-admission testing is yet another service the



medical center offers to reduce patient costs while maintaining the highest standards of care. To spare the patient an extra day in the hospital prior to elective surgery, the necessary testing is performed at the convenience of the patient within one week of admission.

Furthermore, the scheduling patterns for preadmission testing ensure that the hospital's professional staff and its facilities are utilized efficiently. These innovative clinical services are just part of the picture . . . At Muhlenberg Medical Center, good management practices also help us provide the community with the best possible care at the lowest possible cost. Management practices include materials management and energy management, just to name a few.

Over the past years we have scrutinized our purchasing practices and restructured the programs to reflect a centralized materials management concept. This approach centralizes under one manager the integral functions of planning, acquiring, storing, distributing and disposing of the vast quantities of materials used by a modern hospital.

By using this integrated management approach, we are able to buy needed materials and services in the right *quantity*, of the right *quality*, at the right *price*, from the right *source*, and at the right *time*.

The direct outcome of this has been cost savings. Through these programs, Muhlenberg Medical Center is able to more fully take advantage of the competitive marketplace.

Muhlenberg Medical Center's on-going energy management program implemented ten additional energy conservation measures last year. Experts estimate that these measures will save thousands of dollars annually for the hospital and the community it serves.

The changes, which reduce energy usage, range



from operating and maintenance procedures to capital improvements. Installing double-pane windows and treating the exterior masonry walls with a waterproofing chemical are just two ways that energy loss is being reduced. Another adjustment to the hot water heaters in the hospital's north wing reduced by 50% the electricity required to heat water in that wing.

... And that's just good business.

Assuring the Quality of Care

Quality has been defined as a degree of excellence; superiority in kind. In a health care institution, quality is interpreted as the assurance that all patients who are treated receive the best quality care that can be rendered.

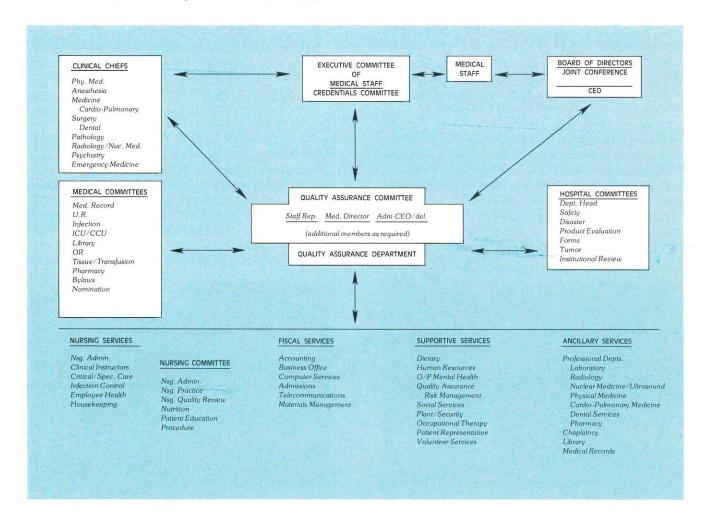
Because of the complexities of a hospital, no one individual department or committee can be held accountable for assuring that the standards of all the services provided at Muhlenberg Medical Center are met. Because of this fact, the Quality Assurance Division was created in order that each department and service is scrutinized through an objective review and evaluation on a daily basis for the services they provide.

For every department or service, this continuous process serves as a mechanism by which a problem-solving approach is incorporated into a department's daily activities. The central components of such an approach include the identification of potential problems, an objective assessment of the cause and scope of these concerns, and the implementation of mechan-

isms to improve or correct these issues. The Quality Assurance Division also maintains regular follow-up in order to evaluate the effectiveness of the actions that have been taken to continue to meet the standards set by the Medical Staff and the Board of Trustees.

There are also many internal or external changes that can directly affect the quality of care. Some of these may be new procedures or advancements in technology, as well as the recognition of the changes in community health care needs.

Another goal of this review and evaluation process is to enable the hospital to remain abreast of these changes in order to ensure that the quality of care is maintained as defined.



The organizational structure (see above) also ensures that all hospital departments or services, medical and hospital committees, chiefs of services and department directors, and administrators are held accountable for the decisions that they make in our continuing effort to improve.

The organizational structure also allows two-way communication at all times between all of these groups with a focal point of all reports being coordinated by the Quality Assurance Department. By doing so, this not only assures accountability but also proper coordination of a complex hospital environment. This on-going review of all facets of the hospital operations provides the necessary information to ask the questions "what have we done, where are we now, and what remains to be done" in an effort to provide maximum quality to the patients and community which we serve.

Mission Statement and Commitments

Mission Statement

Muhlenberg Medical Center, an acute care hospital, shall provide primary health care services consistent with the community needs, and with due consideration to quality care and appropriate cost effective measures.

Commitments

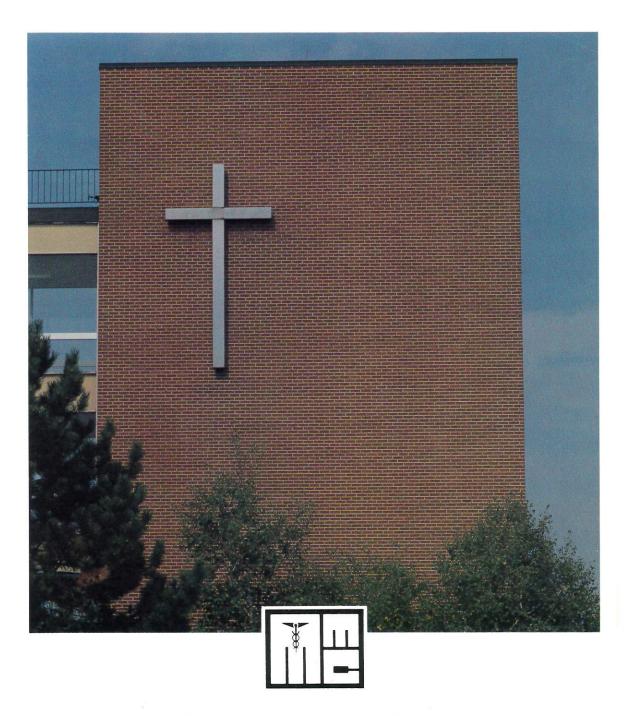
Muhlenberg Medical Center will strive to accomplish its mission, upholding high standards of integrity and operating within the framework of the following commitments:

- To be an acute care hospital providing quality medical, surgical and psychiatric services.
- To provide treatment to patients irrespective of race, color, creed, sex, national origin or ability to pay.
- To be a humane institution that is responsive to our patients and supportive to the improvement of health care in our community.
- To continue fostering an atmosphere that enables us to attract and retain qualified people and to encourage self-development and job satisfaction.
- To require the Medical Staff to maintain the highest professional standards through adherence to the Bylaws and regulations as approved by the Board of Trustees; further, to support the Medical Staff in their efforts to render maximum health care to those entrusted to us.
- To be receptive to the needs and concerns of the community.
- To cooperate with other health care providers in order to enhance patient care.
- To recognize our responsibility to the community to operate as a not-for-profit hospital in a fiscally sound and cost-effective manner.
- To act in a responsible manner within prescribed regulatory policies.
- To be cognizant of new developments in the health care field and implement those changes that are appropriate to our hospital.

Adopted by the Board of Trustees, January 26, 1983



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MUHLENBERG MEDICAL CENTER

Schoenersville Road, Bethlehem, Pa. 18017