Passion
To provide excellence in health care for the communities we serve

Purpose
To make a positive difference in the lives of others

Pillars
People
Service
Quality
Finance
Growth
Our employees, physicians and volunteers are committed to our passion of providing excellence in health care for the communities we serve. As we reflect on our significant progress over the past five years, we are pleased to share with you what we’ve accomplished and what we provide.

In this report, you will learn of the ways United Regional has elevated the quality of health care. Our highly skilled physicians and staff work together to address not only the most basic medical needs but also have the expertise to treat complex medical conditions and perform the latest surgical procedures. Our programs and services have been awarded nationally-recognized certifications for meeting or exceeding the most stringent quality standards. Our safety and quality standards have reached the highest national benchmarking levels. Our financial strength has allowed us to reinvest in the most advanced and innovative technologies to benefit patient outcomes, build modern and more accessible facilities, bring needed primary care and specialty physicians to the area, and fulfill our strong commitment to provide care for the uninsured.

Our accomplishments have been significant, but we will never be satisfied with the status quo. United Regional will continue to seek new and better ways to provide excellence in health care today and well into the future, benefiting our patients, our community and our region.

Phyllis Cowling
President and CEO
The Shoes Off Her Feet

We have many stories of caring and compassion at United Regional – how our employees have delivered care that surpasses excellent clinical skills and addresses the patient’s emotional well-being. No one knows this better than a patient who was cared for by Christe Jenkins.

Sometimes the best way to care for someone has nothing to do with medicine at all. Often it’s a simple, compassionate gesture that makes a positive difference in the life of another, which Christe made one cold day in December 2011.

Christe had taken care of this patient several times before but had never noticed the over-sized, worn-out shoes the woman was wearing. After looking at her shoes, she glanced down at her own – an almost new pair of pink and brown cross trainers – and she knew what she would do.
“Would you like to have my shoes?” Christe asked. And the woman responded “Yes!” They were both pleased that they were a perfect fit. “I looked down at the new shoes on her feet and then up at her face,” Christe said, “and she looked happy. I could go buy another pair of shoes. She couldn’t.”

Christe commented how nurses tend to learn the needs of their patients, beyond the medical treatment they require, and often have the opportunity to do something more. On that day, Christe did, even if it meant going home at the end of her shift wearing just her socks.

It takes skilled, caring and compassionate employees to provide excellence in health care.

Our employees must be skilled in carrying out their job responsibilities, courteous to patients, guests and coworkers, and compassionate in the delivery of care. This expectation is set beginning with the hiring process, at orientation, and is continuously reinforced by leadership throughout the organization.

And once we have hired the right employees, it is important that we provide the benefits that help retain them, activities that reward them and programs that develop their skills for the long-term benefit of the employee, our patients and our organization.

“We are selective in our interview process, hiring only one applicant out of 49. Our employees must not only have the skills to do their jobs, but they must also be a good fit for our culture of always doing what is best for the patient.”

Kristi Faulkner
Senior Director of Human Resources and Organizational Development
United Regional provides a variety of educational and professional development opportunities for employees including tuition reimbursement, continuing education courses, professional conferences and a unique program, School To Work. Ongoing education ultimately benefits our patients, because it helps us retain high-performing employees and ensure they are skilled in the most current and advanced practices.

The School To Work program gives employees the opportunity to work a weekly 24-hour schedule while attending college for LVN and RN degrees and getting paid for 36 hours with full-time benefits. Tuition and other education-related expenses are also provided. Following graduation from the program, employees commit to continuing their service at United Regional.

Morehead and Associates Apex Award for Workplace Excellence

Every other year, United Regional uses a nationally recognized company, Morehead and Associates, to survey our employees to determine their level of engagement and commitment to our organization. Morehead specializes in employee opinion research and has more than 600,000 hospital employees in their national health care database. In 2010, United Regional won Morehead’s prestigious Apex Workplace of Distinction Award, which recognizes organizations whose employee engagement and commitment survey scores are in the top 10th percentile of their database.

90% of 1920 employees responded that they are proud to tell others that they work at United Regional (significantly above the national health care average)

The survey responses from United Regional employees confirmed their commitment to, and engagement with, our organization to accomplish our passion of providing excellence in health care for the communities we serve.
Compassion In Many Forms

Our employees have the opportunity each year to show their compassion for others in another way – through the United Regional Foundation Spirit of Giving Campaign. Employees donate their financial resources to benefit hospital programs as well as community organizations. Since 2007, the employees of United Regional have donated more than $1.17 million to these community organizations and hospital programs. The high percentage of giving - approximately 75% each year, shows their amazing generosity. The national average for employee giving campaigns is around 30%.

SINCE 2007

Children’s Miracle Network
$390,000
Provides funds for nursery/pediatric equipment & programs

Friendship Fund
$212,000
Provides loans to employees experiencing financial hardships & emergencies

United Way
$189,000
Provides funds to community programs

Bridwell Tower, Chapel & Education Center
$161,000
Capital Campaigns for new campus facilities benefiting patients, visitors & employees

Rathgeber Hospitality House
$128,000
Provides housing for out of town patients’ family members and items for the House

Hands to Hands (new in 2010)
$95,000
Provides funds to community organizations
The Valet Parking staff at United Regional is also generous and have always donated their tips to the United Regional Foundation for Children’s Miracle Network.

**2007-2011 Holiday Benevolence**

Each year our employees reach into their hearts to support coworkers and their families who would not be able to have a joyous holiday without assistance.

- **Thanksgiving Basket**
  - Families helped: 282
  - $34,000 in food donations

- **Holiday Angel Tree**
  - Families helped: 264
  - $69,700 in gift donations

- **Employees that donated time**
  - to pack food baskets, shop & deliver baskets and gifts: 680
2007-2011 Volunteer Services

It would be impossible to calculate the monetary worth of the time and talent our volunteers give. Since 2007, volunteers have given more than 208,000 hours to:

- Projects that support patient care
- Delivering get well messages, gifts & flowers
- Staffing surgical & outpatient services desks
- Escorting patients & visitors to their destinations
- Staffing our gift shop
- Serving delicious snacks in the coffee bar
- Hand-sewing items for newborns & patients

In addition, the Hospital Auxiliary, through the Gift Shop and fundraising activities, raises money that supports programs, services and building projects at United Regional. From 2007 through 2011, more than $340,000 has been donated by the Auxiliary for:

- $163,000 equipment
- $167,000 new & renovated facilities
- $11,000 programs & services

And Pink Darlings have given over $42,000 to the hospital through their fundraising projects.
A Passion for Life-Saving Education

Rosey Scruggs now knows the importance of getting regular mammograms and takes this message to others as often as she can. And she is forever grateful for the tenacity and passion of Susan Basham, RT, coordinator of Mammography Services at United Regional, in helping to save her life.

As part of United Regional's employee health insurance coverage, free screening mammograms are provided. During the year, the staff of Women's Imaging set up booths throughout the hospital to educate employees and hospital visitors on the importance of early detection of breast cancer. In 2009, Rosey Scruggs was one of the employees who passed by the booth. In Susan's typical manner, she enthusiastically invited Rosey, as she does every passerby, to learn more. Rosey admitted that she was over 40 and had never had a mammogram. Susan signed her up that day – and it was a good thing she did.

Rosey admitted that she was over 40 and had never had a mammogram. Susan signed her up that day – and it was a good thing she did.
The results of Rosey’s mammogram showed that cancer had spread throughout her left breast. She chose to have a bilateral mastectomy so she wouldn’t have to worry about another breast cancer diagnosis in the future and started the rest of her treatment plan. From then on her attention focused on spreading the word to other women about the importance of getting regular mammograms.

In October of 2011, we held our annual community-wide Breast Cancer Awareness Month education, this time led by Rosey. Over 400 employees gathered in the street in front of the Bridwell Tower in their “Get Your Pink On” t-shirts and recorded the ending message to a video that was produced for our Facebook page and YouTube. In it, physicians, surgeons, mammography staff and, of course, Rosey reminded everyone to “Get Their Pink On” and to encourage someone they love to fight breast cancer through early detection.

Since 2007, United Regional’s staff has given their time to promote the benefits of mammography.
It takes dedication to serving others to provide excellence in health care

Each year United Regional and our employees dedicate financial resources and volunteer time to respond to the needs of people and organizations in our community. While most of our projects and events address health care related issues, some do not.

**2007-2011**

**1,400**

Events

providing health education, free health screenings, medical tents, & more

**$481,300**

Sponsorships contributed to community organizations & projects

Susan G. Komen Race for the Cure

2011 largest team award

Hotter 'N Hell Hundred

Medical Tents

Trauma Education Events & Child Passenger Safety Seat Checks
Organizations and Events Supported Throughout the Years

- 55 Advantage Luncheons and Educational Seminars
- Adult Literacy
- Albert Moving and Storage Health Fair
- American Cancer Society Relay for Life
- BCI Expo
- Breast Cancer Education
- Call-A-Nurse and Physician Referral Service
- Camp Beyond Student Education Event
- Cattle Baron’s Ball Sponsorships
- Community Education Seminars on Total Joint Replacement, Spine Care and Robotic-Assisted Surgeries
- Downtown Proud Zombie Crawl Medical Tent
- Executive Loan Program to United Way
- Falls Fest
- Fantasy of Lights Basketball Tournament
- Athletic Trainer Services
- Fit In Texoma Partnership with KFDX Channel 3
  - Year-long education program on improving health and fitness through events such as Kids Fest, Sheppard Air Force Base Air Show, health topics interviews with physicians and other clinical experts
- Free Sports Physicals
- Ground Hog Day Student Shadowing Program
- Heart of a Woman Health Screenings
- Hotter ‘N Hell Hundred Medical Tents
- Leadership Wichita Falls, Membership and Event Sponsorships
- MSU Health Fairs
- Partner’s in Education
- Partnership with North Texas Health Underwriters for CHIPS Sign-Up Event
- Playing It Safe Sports Injury Prevention Events
- Pride In the Falls
- Project Back to School
- Senior Focus Health Screenings
- Senior Services of North Texas
- Sheppard Military Affairs
- Susan G. Komen Race for the Cure
- Trauma Education Events & Child Passenger Safety Seat Checks at:
  - Kohl’s Safety Day with Children’s Miracle Network, Kiowa Casino Halloween Carnival, Bike Safety presentations and more
- United Way Chili Cook-off
- United Way Power of the Purse Sponsorships for Early Childhood Education
- WALC Spelling Bee
- Wichita County Health Department Health Fairs
- Wildcat Hockey

Heart of a Woman Health Screenings

American Cancer Society Relay for Life
Room Service
We understand that not everyone gets hungry at the same meal time and that a patient may not know what they will want to eat a day ahead of time. So in 2007, United Regional implemented Room Service – just like in a hotel. Each day a menu, with many food options, is given to each patient. The patient then decides what they want to order and when. Meals are delivered within 45 minutes after placing an order.

Patient Tracker Board
Our Patient Tracker board is located in our Surgical Guest Seating area and shows the patient’s family and friends where the patient is in the pre-surgical, surgical and recovery process. Patients are assigned numbers, which are given only to their loved ones, to protect patient privacy.

Cited as a “best practice” by the Joint Commission surveyors.

The Patient Tracker board, which was implemented in 2011, was cited by the Joint Commission surveyors as a “best practice,” which means that they will tell other hospitals about this feature to help them elevate the standard of care provided to their surgical patients.

Security-Enhancing Service
Our Security Department is dedicated to providing a safe and secure environment for our patient, visitors, staff,
physicians and volunteers. We have invested in training, equipment and new services for the members of this department to help ensure we are providing the very best service. Some of the additions include:

- Training by the International Association of Health Care Safety and Security organization, which is the “gold standard” in health care security
- All officers certified in CPR and CPI (Crisis Prevention Institute)
- Bike Patrol program to survey not only the hospital campus, but also the surrounding streets and neighborhoods
- Relocation of the security monitoring office located to one of the main hospital entrances

**Surgery Patient Liaison**

The Patient Tracker Board informs the patient’s loved ones of where they are in the surgical process. But, no technology can take the place of in-person communication. That’s why United Regional created the Surgical Nurse Liaison position.

For years, Cindy Ochoa, RN, was an OR nurse. Today, she is still in the operating suites – all of them. She visits each suite to get patient updates and then visits with the patient’s family to let them know how the surgery is progressing. Feedback from family members includes, “Cindy is awesome” and “this is a much appreciated service.”
Serious Trauma Changes Student’s Life Goals

Ali Williams was brought to the United Regional Emergency Room on November 27, 2010, after she was involved in a roll-over accident near Temple, Oklahoma. The car she was in went through a section of piped fencing. A piece of the three inch diameter pipe impaled Ali’s right thigh and pelvis, luckily missing vital organs.

Dr. Kevin Thomas, a surgeon in Wichita Falls for 24 years, was the trauma surgeon on call that day. As part of the trauma activation procedure for seriously injured patients, Dr. Thomas arrived in the ER before Ali to prepare for the unknown. Once at United Regional, he and the ER team quickly went into action to stabilize Ali before she could be taken to surgery – Dr. Thomas recalls the injury was worse than anyone could imagine.

It took only 30 to 40 minutes from the time Ali arrived at United Regional to the time Dr. Thomas and orthopedic surgeon, Dr. Michael Sheen, had Ali in surgery to remove the pipe, make sure there wasn’t any damage to major vessels, address the fractured pelvis and repair damaged muscle. But the removal of the 5-foot pipe wasn’t the end of care to help Ali regain the life she had before her accident.

Multiple surgeries were required in order for Dr. Phil Stephan, a plastic and reconstructive surgeon, to rebuild Ali’s right thigh, because the muscle and tissue were so damaged that it left a “huge dimple” in her leg. The surgeries included removal of tissue from her abdomen to help build up the area, skin grafts and liposuction to properly shape the area. When the surgeries were finished, the contour of her thigh was the same as the other – almost identical.
Ali said she feels she’s alive today because of the skill and expertise of the staff at United Regional and the specialized surgeons who all took part in her care. She has returned to the outdoor activities she loves – fishing, riding watercraft and playing sports – and to college.

Ali is a sophomore at Cameron University in Lawton, Oklahoma. She began her college career a few years ago planning to go to Oklahoma University’s dental program. However, witnessing the professionalism and expertise of the staff and physicians at United Regional changed her goal. She is now enrolled at the OU nursing program at Cameron so that she, too, can make a positive difference in the lives of others.

A piece of the three inch diameter pipe impaled Ali’s right thigh and pelvis, luckily missing vital organs.
Advanced Program Certifications and Designations

One of the ways that we can ensure that we are accomplishing our passion of providing excellence in health care for the communities we serve is to measure our quality of care against the most stringent national standards. We have sought certifications and accreditations, which are obtained by participating in rigorous on-site evaluations and surveys by experts in their respective fields, and meeting or exceeding “best practices” in care.

American College of Radiology

The American College of Radiology (ACR) awards accreditation to facilities for the achievement of high practice standards after a peer-review evaluation of the practice. Evaluations are conducted by board-certified physicians and medical physicists who are experts in the field. They assess qualifications of the personnel and the adequacy of facility equipment.

United Regional’s radiology department has achieved accreditation for our stereotactic biopsy unit, digital mammography unit, MRI, CT scanners, ultrasound and nuclear medicine. And we have the only CT scan in the region certified by the ACR for pediatric scanning.

Our digital mammography unit and our MRI are also accredited through the state of Texas. Following our Department of State Healthy Services inspection in October 2009, we were awarded a certificate given to only those facilities with a perfect inspection.
American Diabetes Association
The prestigious American Diabetes Association Education Recognition Certificate for quality diabetes self-management education program was awarded to United Regional in 2010. Recognition of our program assures that it meets the national standards for diabetes self-management and offers high quality education services to the patients we serve.

Bariatric Center of Excellence
The American Society for Metabolic and Bariatric Surgery (ASMBS) created the Bariatric Surgery Centers of Excellence® program to recognize the centers that perform well and to help surgeons and hospitals reach optimal levels of performance.

The Bariatric Center of Excellence designation highlights providers who deliver excellent care and the designation helps identify where patients can expect to receive safer and more effective surgical treatment with excellent short and long-term outcomes. The rigorous inspection includes interviews with surgeons, staff and hospital leaders, and a detailed medical chart review. Bariatric Centers of Excellence are evaluated every three years to ensure that high quality standards are continuing to be met. Our program was re-certified in 2011.

Gold Plus Stroke Award from the American Heart Association and American Stroke Association
The award signifies that United Regional consistently utilizes the latest evidence-based guidelines for care. The award recognizes the hospital’s commitment and success in implementing a higher standard of stroke care by ensuring that stroke patients receive treatment according to nationally accepted standards and recommendations. These standards are all aimed at reducing death and disability and improving the lives of stroke patients.
Primary Stroke Center Certification for the Sixth Consecutive Year

United Regional is proud to have achieved the distinction as a Joint Commission Primary Stroke Center. The Joint Commission’s Certificate of Distinction for Primary Stroke Centers recognizes centers that make exceptional efforts to foster better outcomes for stroke care.

To earn the certification, stroke centers like ours have to meet certain standards to ensure that any patient brought to the emergency department will be treated rapidly with approved therapies shown to reduce paralysis and other disabilities caused by stroke.

Patients treated in stroke units are more likely to recover.

Primary stroke center hospitals are the premier places for the treatment of strokes. By having specialized stroke units, these hospitals show better patient outcomes compared to hospitals that treat stroke patients in medical intensive care units or through a mobile in-hospital stroke team.

Joint Commission Disease Specific Certifications

Because Joint Commission standards are regarded as the most rigorous in the industry, Joint Commission-certified disease management programs have demonstrated their commitment to providing quality care to their patients.

To earn and maintain certification, a disease management program undergoes an extensive on-site review by a select team of Joint Commission professionals once every two years. The purpose of the review is to evaluate the program's performance in areas that affect patient care. Through an assessment of a program's processes, the
Joint Replacement Program
At the on-site review in July 2011, The Joint Commission expert surveyors assessed clinic processes and quality standards and interviewed patients, staff and physicians as part of the certification process. At the survey’s conclusion, The Joint Commission acknowledged our strengths as passion for providing quality patient care, leadership involvement and physician engagement.

We are one of only 14 programs in Texas to have achieved this certification.

Wound Management Program
In 2007, United Regional’s Wound Care Center was the first Texas facility, and only the third independent hospital-based program in the country, to achieve the heralded Wound Management Certification from The Joint Commission. This certification means that the Wound Care Program meets or exceeds the highest standards of care for treatment and outcome. The program was re-certified in October 2011.
Pathways to Excellence Designation

In 2011, we achieved the Pathway to Excellence® designation by the American Nurses Credentialing Center (ANCC). The Pathway to Excellence designation confirms the professional satisfaction of nurses at United Regional and identifies it as one of the best places to work.

To earn the Pathway to Excellence distinction, we underwent a thorough review process that documented the quality initiatives used in creating a positive work environment — as defined by nurses and supported by research. Our nurses verified that the criteria were met by participating in a confidential online survey.

Pulmonary Rehabilitation Program Certification

Our Pulmonary Rehabilitation Program is proud to have received national certification from the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR).

United Regional’s program is one of only 13 pulmonary rehabilitation programs in Texas to achieve this recognition.

This voluntary certification process recognizes programs that have been reviewed by the AACVPR national board and found to have met the rigorous requirements for standards of care. The program includes both education and exercise to help patients with chronic lung disease improve the quality of their everyday lives.

This designation confirms to the public that nurses working at United Regional know their efforts are supported.

The honor encourages other nurses to join their colleagues in this desirable and nurturing environment.
Ongoing Improvements in the Delivery of Care

Over the past five years we’ve implemented many quality initiatives to make patient care safer and outcomes better. We’ve chosen a few to highlight some of our quality improvements that have had great positive impact on patient care. The measurements of success meet and often exceed national standards of quality.

Door-To-Balloon Time

At United Regional, expertise in emergency care and heart care are brought together to rapidly assess and treat patients.

When you’re having a heart attack, where you choose to go for treatment could be one of the most critical decisions of your life. At United Regional Emergency Department, a well-coordinated process helps us move the patient quickly from the assessment to treatment phase in the cardiac catheterization lab where angioplasty – a procedure where a balloon is used to open blocked arteries and restore blood flow – is performed.

The national benchmarking standard for getting a patient from the emergency room door to the cardiac catheterization lab is 90 minutes. United Regional does much better than the national standard because of our advanced technology, highly trained staff and time saving protocols.

Since 2007, we have continued to reduce our Door-to-Balloon time. In 2011, our heart patients moved from our Emergency Department to the cardiac catheterization lab in an average of 65 minutes.
Door-to-Needle Time for tPA Stroke Patients

Ischemic stroke patients – those patients with blood clots in their brains causing damage by restricting blood flow – can be treated with a clot-busting drug, tPA, if it can be given within the first four hours after the patient exhibited symptoms.

The target goal by the American Heart Association is for hospitals to achieve a Door-to-Needle time of 60 minutes or less in 50% of their cases – a goal that United Regional met in 2011 and is trending positively. Other Primary Stroke Centers reporting to the AHA achieved 60 minutes or less only 35% of the time.

Sepsis Screening

United Regional’s advanced technology and clinical treatment “pathway” have saved lives and reduced sepsis mortality to more than half the national average in other hospitals.

Sepsis is a very serious bloodstream infection that even when treated early and aggressively, still has a great potential for patient mortality. When seriously ill patients arrive in our Emergency Department with sepsis symptoms, our emergency room team quickly goes into action. The patient’s blood sample is sent to our lab where it is analyzed to confirm a sepsis diagnosis.

In 2008, United Regional invested in a new piece of laboratory equipment that more quickly confirms a diagnosis of sepsis – within one hour – instead of one to two days as previous technology could provide. With the faster diagnosis, physicians can more quickly begin treating the infection with appropriate antibiotics, and saving more patient lives.
Reducing Ventilator Aquired Pneumonia (VAP)

In 2007, United Regional began the initiative to eliminate VAP, which was commonly considered “just a fact of life” for patients on ventilators in hospitals throughout the country.

VAP refers to pneumonia that occurs in patients who have been on a ventilator for more than 48 hours. VAP increases the risk of death and hospital length of stays among critically ill patients, and can add approximately $40,000 in cost to a single hospitalization.

With the goal of eliminating VAP, United Regional’s respiratory care department and intensive care units implemented a “ventilator bundle.” The bundle includes: raising the head of the patient’s bed 30 to 45 degrees; providing treatment to prevent blood clots; giving the patient medication to prevent stomach ulcers; and daily assessments to determine if the patient can breathe without the aid of the ventilator.

The number of ventilator associated pneumonias has significantly dropped. In the most recent year, 2011, there were only 3 cases of VAP, making our VAP rate 1.0 (1 VAP for every 1000 ventilator days). This is much better than the national rate of 5.0 – 5 VAPS for every 1000 ventilator days.

In 2008, United Regional added new technology that shortens the time to diagnose sepsis from 1-2 days to within just one hour.
**Quality**

**MRSA Screening**
A simple test and nasal ointment prevents the development and spread of MRSA, saving patients added days in the hospital and treatment costs. Methicillin-resistant Staphylococcus aureus (MRSA) is a type of staph bacteria that does not respond to some antibiotics that are commonly used to treat staph infections. There is a percentage of people in any community who are carriers of the infection, without having any symptoms. Because patients who come to a hospital for care are often already immune-compromised, it is important to determine upon admission those patients who may be carriers of MRSA, and prevent the spread of this infection.

United Regional does a simple nose swab test and the results are reported rapidly. If MRSA is present, a nasal ointment is used to prevent the infection from developing in the patient and eliminating the spread to other patients.

**Emergency Department Flow Process**
To provide excellent care and timely service for our community, we improved the turnaround time in our emergency room. Patients who arrive at the emergency room with life-threatening conditions, such as serious injuries and symptoms of heart attack, stroke and poisonings, etc., are triaged immediately for care. However, there are other types of patients who access our Emergency Department who require medical attention.

The number of United Regional emergency room visits from 2007 through 2011 has steadily risen. In 2007, 55,000 visited our emergency room; in 2011, the total was over 77,000 – a 40% increase. We knew that to provide excellent care and timely service to our community, the patient flow process had to be improved, and we did so in 2010. In the most recent year, 2011, our average door-to-doctor time was 37 minutes and door-to-discharge time – the time is takes for a patient to arrive in the ED and to leave after treatment – was 129 minutes.
Advanced Technology for Improved Patient Outcomes

It is important to stay on the forefront of advancing medical technology which benefits patients and improves outcomes. United Regional carefully selects the leading edge technology it invests in to ensure that benefits to the patient are evidence-based and reflect current best practices.

da Vinci Robotic Surgical System

Surgeons at United Regional have been performing minimally invasive surgeries for several years. However, when we learned that individuals in our community had to travel to large metropolitan areas to receive a more advanced type of minimally invasive surgery – robotic-assisted – we concluded that the da Vinci Robotic Surgical System would be a wise investment. Benefits of robotic-assisted surgery include:

- Smaller incisions
- Less scaring
- Less blood loss
- Shorter hospital stays
- Less pain
- Faster recovery and return to everyday activities

In April 2009, we purchased a da Vinci Robot. Since that time, six surgeons have become experienced and skilled in robotic-assisted surgery and are certified to use the da Vinci Robot.
Tremendous advances have been made in joint replacement surgery. In 2008, we invested in a new type of surgical technology to benefit joint replacement surgery even more – the Orthopedic Navigation System. The System provides computer-assisted navigation technology, utilizing special tracking devices that provide orthopedic surgeons with a comprehensive understanding of a patient’s joint mechanics. With this information, a surgeon can make adjustments within degrees, helping to ensure that the new joint has the stability and range of motion needed for a successful replacement.

As the surgeon moves an instrument within the joint, special infrared trackers calculate its position and wireless instruments instantaneously transfer the data to a computer in the operating room. This information is displayed as an interactive “blueprint” that supplies the surgeon with all angles, lines and measurements of the patient’s unique anatomy. The surgeon then replaces the diseased bone with new, artificial joint implants. United Regional is the only hospital in Wichita and the surrounding eight counties that provides surgeons with this technology.

**Orthopedic Navigation System**

**Benefits of Computer-Assisted Surgery**

- Helps the orthopedic surgeon place joint replacement implants with precision, which may increase the life of the replacement
- Helps reduce the risk of dislocation and revision surgery
- Helps provide greater stability and range of motion
- Helps improve the overall function of the joint replacement

**Hybrid Endovascular Operating Suite**

When the Bridwell Tower opened in 2009, larger and more technologically-advanced operating suites were part of the space design – like the hybrid endovascular suite. This suite can accommodate minimally-invasive cardiovascular procedures and then quickly convert into an open heart surgical suite if the need arises. The suite combines endovascular, cardiac surgical, laparoscopic and radiological capabilities, allowing flexibility and speed in the treatment of patients with the most complex cardiac and vascular conditions.
Zeiss OPMI Pentero Neurosurgical Microscope

In delicate brain surgery, surgeons rely on advanced magnification and visual clarity to enhance their skill. In 2011, we acquired the Zeiss OPMI Pentero neurosurgical microscope, which provides surgeons with clearer and more powerful magnification, as well as inter-operative diagnostics and support of fluorescence-based procedures such as tumor removal and resections. With these capabilities, neurosurgeons can easily distinguish between the cancerous tumor and healthy tissue.

Advanced technological features provide the surgeon:

- Crystal clear images with natural colors
- Spot illumination for higher contrast images in narrow and deep vessels
- High-speed autofocus which delivers razor-sharp images
- Freedom of hand and instrument movement, with a short distance to the surgical field
- Video touchscreen with instantaneous access during surgery to important information like patient files
- Technology to superimpose color data and combine diagnostic, navigation and system information while viewing the operating field
- Integration with the hospital network with access to pre-op findings and data from the operation

Vein Finder

For our youngest patients with the tiniest of veins and for adult patients with hard-to-find ones, the vein finder provides illumination directly on the patient’s skin using LED technology. The light causes the veins of a patient to contrast with the surrounding tissue, thereby making it easier for clinicians to locate and assess veins suitable for blood draws and IV therapy.
Giraffe Beds
Through an innovative design and advanced technology, the Giraffe bed serves as an incubator, radiant warmer and crib all-in-one. The bed provides essential heat to maintain a normal body temperature for premature infants. Because the bed is so versatile, babies can remain in it throughout their stay without the stress of being moved from bed to bed.

Infant CPAP
In a premature baby, the part of the central nervous system that controls breathing is not yet mature enough to allow nonstop breathing, causing large bursts of breath followed by periods of shallow breathing or stopped breathing. When this occurs, babies often require a form of assisted breathing called nasal continuous positive airway pressure (CPAP). The pressure from the CPAP machine helps keep preemies’ lungs open so they can breathe on their own.

Infant Ventilators
Infant ventilators breathe for the baby when the baby is too sick or too weak to breath for itself. The newest version has functions that allow us to more closely monitor babies who need equipment to help them breathe. Our Level II Special Care Nursery is able to care for infants in our community in the company and support of their parents while they receive the specialized care they need.
Our Galileo Mission
As part of our quality journey, United Regional embarked on a $22 million, multi-year, multi-phase, information technology initiative, in 2005, to provide physicians and clinical staff the tools they need to make patient care safer and more efficient and effective.

United Regional has also been selected by Allscripts™, the company providing these software solutions, as one of only five Premier Clients nationally. This honor recognizes United Regional as an exemplary site for our progressive implementation of these programs with outstanding results. Allscripts brings other hospitals to United Regional for site visits, showcasing us as a model for advanced data integration and automated processes benefitting patient care.
Some of the most significant information technology implemented since 2007 includes:

**Computerized Physician Order Entry (CPOE)** – allows the clinician to place patient orders for laboratory, medication, radiology, etc., directly into the computer that goes immediately to the designated department. The patient benefits by having the order completed faster and the results provided to the physician quicker for treatment intervention.

**Medication Manager** – automatically checking medications for drug interactions, allergic reactions and duplications

**Knowledge Based Charting (KBC)** – provides nurses over 190 pre-configured evidence-based, clinical best practice guidelines that they use to complete patient documentation for such things as vital signs and patient assessments. Additionally, the patient’s history, which is collected upon admission, can be viewed by all caregivers, reducing the need to repeatedly ask the patient for the same information.
Knowledge Based Medication Administration (KBMA) – allows nurses to administer medication at the bedside to improve patient safety. KBMA reduces potential medication errors by requiring the caregiver to confirm the “five rights” of medication administration (right patient, right route, right dose, right time, right medication) prior to the patient receiving the medication. It also requires a second verification for high-risk medication. If one of the “five rights” fail, the caregiver receives either a warning message or the inability to access the medication.

Radiology Information System – enables physicians to view x-rays and scans on their office or home computers for more timely review and reporting.

Record Manager – provides physicians access to patients’ records from home or office giving them the ability to review the most current patient information around the clock.

Patient Acuity - assists in monitoring and predicting the level of care needed by patients based on acuity so that each unit has the appropriate number of nurses with the needed skill level to provide quality patient care.
A Passion for Helping Others

Program Helps With More Than Financial Assistance

Candy Cooksey, LVN, says that she has one of the most rewarding jobs in the hospital – helping patients find coverage for the drugs necessary to their care – drugs that can cost as much as $5,000 per dose. The program identifies infusion patients who have limited insurance coverage for the medications they need to treat their disease, most often cancer. Then Candy sets out to find grants that cover the drug costs or pharmaceutical programs that provide free drugs, so that patients can concentrate on their care. She remembers one appreciative patient who had more than his own health issues and costs to worry about.

Mr. Bobby Sadler was diagnosed with leukemia. At the same time he was going through outpatient chemotherapy, he was dealing with his wife’s serious illness and eventual death. Candy, who reviews every patient who comes to United Regional for outpatient infusion therapy, contacted Mr. Sadler to offer assistance. She was able to find and qualify Mr. Sadler for grants to cover his medications, lifting a great burden off his shoulders. But, Candy didn’t stop there. When Mr. Sadler told Candy of his wife’s non-covered expenses, she also found a program to assist with those. Candy says, “I enjoy the opportunity to really make a difference in these patients’ lives, to be able to alleviate some of their stress during their difficult time.”

Since the program’s inception in August 2010, Candy has qualified more than 130 patients for grants to cover medication expenses as well as pharmaceutical programs which provide patients with free drugs. This program is just one way United Regional provides financial assistance to patients in need.
It takes financial strength and sustainability to provide excellence in health care

United Regional’s financial strength has allowed us to reinvest capital into worthy initiatives, such as the construction of new facilities and facility upgrades as well as the purchase of new equipment and advanced technologies. At the same time, we’ve continued our commitment to uncompensated care and community benefit programs.

United Regional is also a responsible partner in the access and affordability of health care services for the communities we serve. In January 2008, United Regional reduced emergency room rates and since January 2008, has not increased overall hospital charges through 2012.

**Because We Did Not Receive Full Payment**

(Other Community Benefits Delivered)

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>From those unable to pay</td>
<td>118,940,000</td>
</tr>
<tr>
<td>(Charity Care based on costs)</td>
<td></td>
</tr>
<tr>
<td>From Medicaid</td>
<td>26,943,000</td>
</tr>
<tr>
<td>From Community Benefit programs</td>
<td>35,053,000</td>
</tr>
</tbody>
</table>

**Total Cost of Community Benefits** $180,936,000

(source: 2007-2011 Annual Statement of Community Benefit Standards. (The cost of community benefits does not include unreimbursed Medicare program costs.)

**What We Reinvested In Our Community**

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>To construct new facilities</td>
<td>93,743,000</td>
</tr>
<tr>
<td>On information technology</td>
<td>18,919,000</td>
</tr>
<tr>
<td>To purchase equipment</td>
<td>43,115,000</td>
</tr>
</tbody>
</table>

**Total Cost of Community Reinvestments** $155,777,000

(source: 2007-2011 United Regional internal records)

**How Our Money Was Spent**

<table>
<thead>
<tr>
<th>Source</th>
<th>Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td>To pay our employees’ salaries and benefits</td>
<td>563,668,000</td>
</tr>
<tr>
<td>To purchase supplies</td>
<td>236,978,000</td>
</tr>
<tr>
<td>To allow for wear and tear on our buildings and equipment</td>
<td>95,338,000</td>
</tr>
<tr>
<td>To pay interest on our outstanding debt</td>
<td>19,967,000</td>
</tr>
<tr>
<td>To allow for patient costs that were not paid (bad debt)</td>
<td>97,056,000</td>
</tr>
<tr>
<td>Other operating expenses</td>
<td>247,113,000</td>
</tr>
</tbody>
</table>

**Total Operating Expenses** $1,260,120,000

(source: derived from 2007-2011 United Regional audited financial statements)
Pediatric dentists specialize in the care of infants, children and adolescents. These young patients typically receive their dental care in an office setting. However, there is a growing need for comprehensive care, such as filling multiple cavities and full mouth dental rehabilitation, where children need general anesthesia in an operating suite due to the extensive nature of these procedures. There are also the dental needs of special needs children who often need sedation for even the most basic care.

Timothy Lee, DDS, knew that this service was not provided in our community, and parents had to travel out of the area for their children to receive this care. Dr. Lee approached United Regional about offering these procedures so that children could receive this specialized care in the convenience of their own community. Recognizing the importance of resolving this unmet need, United Regional worked with Dr. Lee; these patients are now provided care through our ambulatory surgery services.

This is just one example of how United Regional responds to unmet healthcare needs of the communities we serve.
It takes purposeful growth based on community needs to provide excellence in health care. For almost 100 years, United Regional and our predecessor organizations, have provided the residents of Wichita Falls and the surrounding area with progressive medical care. As the communities we serve change through the years, we continually assess and reassess their health care needs to make sure we are fully prepared to meet them.

When I was looking for a place to practice, I wanted to find a community that allowed me to do all the things that I was trained to do in my residency. I felt like larger cities force doctors to focus on very specific areas in order to be competitive. Wichita Falls provided the opportunity for me to truly be a general otolaryngologist. At the same time, the leadership of the hospital really struck me as having vision and enthusiasm for delivering high quality care.

Additionally, after having lived in a larger city with a hefty commute, we felt like Wichita Falls offered a much simpler life. We were impressed with the family community and look forward to raising our children here.

- Jed Grisel, MD
New Physicians

Providing excellence in health care depends not only on having skilled hospital staff, advanced technologies and equipment, and high quality care, but also on having physicians in the medical specialties needed to serve the current and future health needs of the communities we serve. Over the last five years, many physicians have joined our community, many recruited by United Regional. We welcome all of them.

Primary Care Physicians

Internal Medicine
• Allen Brajer, MD
• Rami Buchipudi, MD, hospitalist
• Raja Divi, MD, hospitalist
• Reza Khalili, MD, hospitalist
• Ninad Parekh, MD, hospitalist
• Madhu Patalay, MD, hospitalist

Family Practice
• Ahmad Abazid, MD
• Vaishali Bhusari, MD, hospitalist
• Feliciano Bucag, MD, hospitalist
• Alma Gonzales, MD
• Tania Khan, MD
• Sharon Palomo, MD
• Tiffany Skaggs, MD
• Jeffrey Swanson, DO
• Olga Tezaguic, DO,
• Finbar Woitalla, MD

Physician Specialists

Anesthesiology
• Ryan Gray, MD
• Chandler Harvey, MD
• Christopher Lam, MD

Bariatrics & General Surgery
• Christopher Finnell, MD

Cardiovascular/Thoracic Surgery
• James Obney, MD

Dentistry, Pediatric
• Paul Bonner, DDS
• Timothy Lee, DDS

Emergency Medicine
• Joshua Caballero, MD
• John Hilmi, MD
• Tanya Howard, MD
• Jeffrey Lowry, MD
• Paul Toote, DO
• Cortnie Walker, MD
• Lance Watson, MD

Endocrinology
• Michael Duben, MD

Hematology/Oncology
• Srikar Malireddy, MD

Neurology
• Eugene Pak, MD
• Daalon Echols, MD

Neurosurgery
• Yogish Kamath, MD
• John Reeves, MD

Obstetrics & Gynecology
• Ryan Bannon, MD
• Bart Spencer, MD

Oral & Maxillofacial Surgery
• Phillip Harvey, DDS, MS, SAFB

Orthopedic Surgery
• Dan Babbel, MD
• Ken Carpenter, MD, SAFB
• Mary Finn, MD, SAFB
• Todd Grebner, MD, SAFB
• Jason Leaseburg, MD
• Joshua Schacter, DO

Otolaryngology (ENT)
• Jerry Giles, MD
• Jed Grisel, MD

Pediatrics
• Karin Ayer, MD
• Amitha Kadakol, MD
• Jacob Kaiser, DO

Plastic & Reconstructive Surgery
• Phillip Stephan, MD

Podiatry
• Chester Williams, MD

Pulmonology
• Satish Chada, MD

Psychiatry
• Jennifer Dismukes, DO

Radiology
• Reza Kazemaini, MD
Future In The Falls

In 2008, we launched an innovative physician recruitment program that evolved from a conversation between Phyllis Cowling, our president and CEO, and Dr. David Flack, a staff pathologist and father of a medical student. Both agreed that individuals who are already familiar with our community could well be ideal candidates to help build the next generation of local physicians. So began the Future in the Falls program.

The program reaches out to medical students, residents and fellows who have ties to Wichita Falls and the surrounding area.

The Future in the Falls program reaches out to medical students, residents and fellows who have ties to Wichita Falls and the surrounding area. Hospital administration and members of the physician staff regularly communicate with program participants to provide support and guidance as they progress in their medical education. The goal is to recruit them to join our medical community.

Scholarship Fund

Grants from the J.S. Bridwell, Bryant Edwards and Fain Foundations and individual contributions were used to establish a Future in the Falls Scholarship Fund. Since its establishment in 2009, a total of 17 scholarships have been awarded.

At the end of 2011, there were 49 participants actively involved in the program.
New Facilities and Campus Consolidation
As part of our campus master plan, United Regional continues new construction, renovations and major equipment purchases to help ensure the provision of excellent patient care. Some of these projects and purchases include:

2007
ICU
- remodel to improve patient access and privacy

2008
Dialysis Center and Pharmacy
- renovations, updates and expansions
AirEvac Hangar
- built for faster accessibility to emergency patient transport

2009
Bridwell Tower
- opened in August
- our largest expansion project: four-stories, 179,000-square-feet
- named in appreciation of the J.S. Bridwell Foundation’s generous lead gift
- houses outpatient and diagnostic services, surgical suites, a mother-and-baby unit and pediatric unit
- a beautiful environment and advanced technologies support our highly skilled and compassionate staff in the delivery of some of the region’s most progressive medical care

Dining Room Renovation
- to accommodate more staff at meal times with a larger dining room and a wider variety of food choices

2010
Bethania Building First Floor and Second Floor renovations
- part of the campus consolidation plan which relocated services from the 8th Street Campus to the Bethania Building
Chapel Renovation
- redesigned and expanded to accommodate the increased patient and staff population as the 8th Street Campus services were relocated

Emergency Department Renovation
- existing space was re-configured in order to implement the new emergency department patient flow process, which provides for faster treatment of patients through the care continuum

United Regional Physician Group Primary Care Clinic
- renovation of office building on Barnett Road to house United Regional Physician Group (URPG) primary care doctors and other non-URPG specialists, and provided future office space to help with recruiting physicians to our community

2011
Administration Building Renovation to House Patient Education
- patient and employee education services were relocated for easier access and more spacious classrooms

Bethania Building First and Second Floor
- renovations to consolidate all services and employees from the 8th Street Campus and the Administration Building to the Bethania Building and the education center

Cardio-Pulmonary Rehab Facility
- relocated the Cardio-Pulmonary rehabilitation program from the 8th Street Campus to the Heart Clinic, owned by cardiologists on the medical staff of United Regional

Employee Fitness Center
- completed as part of our Bee Healthy program, which promotes the health and wellness of our employees

United Regional Physician Group Specialty Clinic
- remodeled former United Regional Diagnostic building to consolidate the URPG specialties of bariatric surgery, cardiovascular surgery, neurosurgery and orthopedic surgery to one location closer to the main campus for patient convenience
  - also included enlarging the hospital’s outpatient therapy space to accommodate more patients
Senior Leadership Team

**Phyllis Cowling**  
*President and Chief Executive Officer*

**Nancy Townley**  
*Senior Vice President of Operations*

**Robert Pert**  
*Vice President of Finance/Chief Financial Officer*

**Pamela Bradshaw, RN**  
*Vice President of Nursing and Clinical Services*

**Stevie Jo Brown**  
*Vice President of Marketing and Communications*

**Rick Carpenter**  
*Vice President of Facilities Management*

**Scott Hoyer, MD**  
*Vice President of Quality/Chief Medical Officer*

Wichita County/  
City of Wichita Falls  
Hospital Board

**Howard Farrell, PhD**

**Woody Gossom**

**Don Hamlin**

**Darron Leiker**

**Renae Murphy**

**Erwin Soell, MD**

**Rita Vokes**

United Regional Board of Directors

**Blake Andrews**

**Linda Beltchev**

**Phyllis Cowling**

**Larry Cook**

**Mike Elyea**

**Howard Farrell, PhD**

**Paul Foley**

**Don Hamlin**

**Yvonne Hearn, MD**

**Doug Kunkle**

**Leo Lane**

**Carla Nichols**

**Gary Ozier, MD**

**Ash Patel, MD**

**Kevin Thomas, MD**

Ex-Officio Members

**Linda Wilson**  
*President, United Regional Foundation Board*

**Leo Mercer, MD**  
*Past-President, United Regional Medical Staff*

**Scott Myers, MD**  
*President, United Regional Medical Staff*
United Regional Foundation
All who lead the United Regional Foundation are humbled and deeply grateful for the outpouring of contributions from individuals, families, foundations, service organizations, and corporations over the past five years.

We celebrate their generosity and applaud their starring roles in helping United Regional make a positive difference in the lives of others.

The Foundation assists United Regional in further improving community health through investments in life-saving medical equipment, programs which improve the health of the community, advanced information technology, and state-of-the-art facilities.

In 2011, contributions and pledges of $1,529,932 were secured in support of United Regional projects, equipment and programs, as well as improvements and support for the Rathgeber Hospitality House. This generosity was designated for significant improvements such as the renovation of the second floor of the Bethania Building and the creation of a center for community health and United Regional staff education, ensured Future in the Falls Scholarships would continue for another five years, and assisted in the purchase of a new microscope for spine and neurosurgery.
$2,917,458* was distributed by the Foundation in 2011 to United Regional and Rathgeber Hospitality House from funds raised for building and facility improvements, Children’s Miracle Network-sponsored equipment and programs, and other special projects.

Total contributions of $14,241,339 were secured from 2007 through 2011 in support of major projects including constructing and equipping the Bridwell Tower, moving and remodeling the hospital dining room, renovating the chapel, and refurbishing and adding a family room to the Rathgeber Hospitality House. Funds raised through the Children’s Miracle Network provided equipment and programs to ensure quality care for infants and children at United Regional. The J. S. Bridwell Foundation, the Bryant Edwards Foundation, and the Fain Foundation joined forces to provide grants totaling more than $100,000 to the Future in the Falls Scholarship Fund.

$19,600,521

Total distributions made by the Foundation
1/1/2007 - 12/31/2011

*A portion of the funds distributed in 2011 were raised and collected in prior years.
Profiles in Philanthropy

In 2011, a number of significant gifts were received for projects that will continue to improve United Regional’s ability to provide excellence in health care for the communities we serve. We are proud to share these examples of leadership level giving in 2011, and wish to thank all those whose generosity helps United Regional improve health care.

**Education Center**

Kay Dillard of the Dillard Family Foundation provided a generous grant in 2011 to assist United Regional in providing community and staff education and to bring new physicians to the Wichita Falls area.

Mrs. Dillard made a commitment to assist in the renovation of a portion of the second floor of the Bethania Building for a 3,600 square foot space designed to replace similar space in the former Wichita General building, and is ready to match the next $200,000 raised for this project. To date more than $150,000 has been raised toward this match, led by a $100,000 grant from Martha Fain and the Fain Foundation.

The new area is earmarked not only for staff and community education programs, but also as the home of the Children’s Miracle Network Telethon broadcast beginning in 2012.

In addition, the Dillard Family Foundation will be providing $15,000 per year for Future in the Falls Scholarships over the next five years. To date, 17 scholarships have been awarded to medical students from the Wichita Falls area through the
Future in the Falls program, which keeps in touch with local students in medical school, residency programs and fellowships to encourage them to return to the area to begin their medical practices.

**Surgical Microscope**

In 2011, Fred Stephens and the Stephens Family Foundation made a generous gift in support of the new Zeiss OPMI Pentero surgical microscope, leading-edge technology with much higher resolution that allows surgeons to see and remove tumors and make repairs in the delicate areas of the brain and spine. This microscope uniquely combines solutions for basic requirements, such as traditional magnification, with advanced benefits such as intra-operative diagnostics, integration with the hospital’s information and communication networks, digital video recording and editing, and user-friendly operations for the OR staff. It is the world’s first surgical microscope to offer completely integrated support for fluorescence-based procedures, such as tumor resection.

**Peter Pan Birthday Club**

Former CMN Miracle Child, Audrey Barnard, celebrated her sixteenth birthday by becoming the first member of the Peter Pan Birthday Club and presenting a check to Donna Ross, manager of Pediatrics at United Regional. Donations to the Children’s Miracle Network in Audrey’s honor now total more than $3,200. Many are following Audrey’s example by joining her as club members and asking their families and friends to make contributions to CMN at United Regional rather than giving them birthday presents.
Circle of Friends

Circle of Friends membership is designed to thank those who support United Regional and work with us to elevate excellence in health care in Wichita Falls and the surrounding area. Membership includes those whose annual contributions are $1,000 or more. Charter members are those whose contributions over time have reached $50,000 and above.

Members are invited to the semi-annual Circle of Friends Lecture Series, featuring prominent speakers from Wichita Falls and elsewhere who are experts in their respective fields. They bring information on important health care topics and introduce new and innovative programs, equipment and procedures at United Regional.

Topics covered in past Circle of Friends lectures include robot-assisted surgery, the United Regional Supportive Care program, a new microscope used in spine and neurosurgery, and advances in quality and safety in joint replacement procedures.

Circle of Friends Charter Members

**Pillars**
- J.S. Bridwell Foundation
- Dillard Family Foundation
- Mr. Alfred B. Guinn
- James N. McCoy Foundation
- Perkins-Prothro Foundation
- The Priddy Foundation
- Stephens Family Foundation

**Advocates**
- Mrs. Gayle Broday-Rogers
- Ms. Phyllis Cowling
- Hoblitzele Foundation
- Joe & Nan Johnson Family Foundation
- Parker Family Foundation
- Union Square Federal Credit Union
- Wells Fargo
- West Foundation

**Visionaries**
- Mrs. Beverly Bolin
- Mrs. Kay Cannan
- Fain Foundation
- Mr. and Mrs. Robert D. Gunn
- Leota Steed Foundation
- United Regional Auxiliary

**Innovators**
- AT&T Foundation
- Mr. Peyton S. Carnes, Jr.
- Bryant Edwards Foundation
- Kadane Foundation
- John and Nevils Wilson Foundation

**Champions**
- Mr. and Mrs. Doyle Bentley
- Cells-U-More
- Gene Conley Foundation
- Dr. and Mrs. William F. Dean
- Fulbright & Jaworski, LLP
- Mr. and Mrs. J. I. Ginnings
- Mrs. Ann Gunn
- Tres Hood Memorial Cancer Foundation
- Hotter 'N Hell Hundred
- Kohl’s Cares for Kids - Children’s Hospital Program

**Ex-Officio Members**
- Carolyn Allison
  - United Regional Auxiliary
- Fred Krautz
  - Rathgeber Hospitality House

**Foundation Board of Directors**
- Linda Wilson, President
- Brian Stahler, President-Elect
- Arthur Bea Williams, Secretary
- Dale Brock, Treasurer
- Todd Davenport, Past President
- Bill Barnard
- Cathy Biggs
- Yvonne Hearn, MD
- Liz Martin
- Renae Murphy
- Jim Parker
- Jill Patterson
- Julie Pruett
- Rick Schleider
- Marilyn Stafford
- David Welch
- Larry Young, MD

**United Regional Auxiliary**
- Carolyn Allison
- Rathgeber Hospitality House
Rathgeber Hospitality House

2011 marked the opening of a new family room addition for the Rathgeber Hospitality House, the 26-room “hotel-like” facility serving patient families.

Launched as a project of the United Regional Foundation, the Rathgeber House assists those who must stay close to family members hospitalized at United Regional. Providing rest and respite for more than 10,000 visitor nights each year, the Rathgeber House operates solely on contributions. A minimum donation of $40 per night is requested, although no one is turned away if they are unable to contribute.

Rathgeber House Board members and staff began raising funds for a two-phase improvement project in 2010 and completed the campaign in 2011 raising just under $560,000. Phase one, a refurbishment of the House, was accomplished in 2010, and included replacing double beds with queen beds, new linens, improvements to the air conditioning system, new carpet for the entire facility, updates to handicap bathrooms, and a whole host of smaller projects. Phase two, which included the addition of a family room and more storage, was completed and dedicated in the fall of 2011.

“On behalf of the Board of Directors and staff of the Rathgeber Hospitality House, my sincerest appreciation is extended to our donors and supporters. You make the Rathgeber House the special ‘home-away-from-home’ it has become for literally thousands of people.”
- Fred Krautz

Board President
2011 United Regional Foundation Donors

United Regional Foundation expresses sincere appreciation to all whose contributions and participation in Foundation, Children’s Miracle Network and Rathgeber Hospitality House activities help support excellence in health care for the communities we serve. This Annual Report acknowledges contributions and pledge payments of $100 and above between January 1 and December 31, 2011.

Founders
Dillard Family Foundation
Mr. and Mrs. Robert D. Gunn
James N. McCoy Foundation
Penguins-Prothro Foundation
Stephens Family Foundation

Planners
Mrs. Gayle Ireday-Rogers
Bryant Edwards Foundation
Mr. and Mrs. Carroll Laing
The Pridity Foundation
Leota Steed Foundation
United Regional Auxiliary
Developers
American National Bank
B.P.O.E., Elks No. 1105
Mr. and Mrs. Doyle Bentley
Gene Conley Foundation
Ms. Phyllis Cowling
Daisy Queen 14169
Mr. and Mrs. Paul Ernst
Senator and Mr. Craig Estes
Fidelity Bank
First Bank
Futurable & Jaworski, LLP
Mr. and Mrs. Daron
HealthSouth Rehabilitation Hospital of Wichita Falls
Hotter ’N Hell Hundred
Joe & Nan Johnson Family Foundation
Kadine Foundation
Kohl’s Cares for Kids - Children’s Hospital Program
Postal Family Credit Union
Sam’s Club 8224
Security’s Lending Hand Foundation
SIDS and KIDS of TEXOMA
Strasburger & Price, LLP
Mr. Joe, Summar, Inc.
Texas Community Credit Union
Mr. and Mrs. Thomas T. Thacker
Union Square Federal Credit Union
United Regional
United Regional Vast Services
Union Pacific
Walmart Supercenter 269
Walmart Supercenter 420
Walmart Supercenter 1116
Walmart Supercenter 1148
Walmart 5071

WFACF-Darrell Coleman Family Donor Advised Fund
Wichita Falls Teachers Federal Credit Union
The Women’s Clinic
Mr. and Mrs. Ben Woody

Partners
Ace Hardware
WFA/Lawton
Mrs. Dave Adams
Alegis Revenue Group, LLC
Alliance Power Company, LLC
Alico Group
Mr. and Mrs. Tommys Arens
Bank of America Matching Gift Program
Barnard Insurance Group
Mr. and Mrs. Casey Barry
Barwise Jr. High
Bernal Llano Business Solutions
Mr. and Mrs. Scott Berman
Bill and Jan Foundation
Binkenfeld Electric
Blue Cross Blue Shield
Dr. and Mrs. Daniel H. Bolin
Mr. and Mrs. Ric Bradshaw

Dr. and Mrs. Eugene W. Brock
Mr. and Mrs. Richard Bundy
Mrs. Kay Cannon
Carnafo Company
Mr. and Mrs. Rick Carpenter
Celi-U-More
Cima Solutions Group
Ms. Dana Clay
Complete Lawn, Ltd.
Complete Lawn Service, LLC
Coca-Cola Refreshments USA, Inc.
Mr. and Mrs. Jeff Chelsea
Dallas Taxi Construction
Dr. and Mrs. Andre P. Desine
Diversified
Duke Construction Co.
Ms. Martha Fain
First National Bank of Wichita Falls
Mr. Mark Plusche
Mr. and Mrs. Paul Foley
Franklin Pharmacy
Dr. and Mrs. Ved Ganesam
Ms. Joanne Evans
Mr. and Mrs. Larry Goodwin
Golden Corral 0548
Golden Corral 0912
Gunn Oil
Mrs. Rita and Nick Kong
Mr. and Mrs. Doug Kunkle
Ms. Jacqueline Lammers
Lockin Good
Love’s 13
Love’s 269
Love’s Travel Stops & Country Stores
Mr. and Mrs. Mack Lunn
Mr. and Mrs. Jerry Marshall
Mr. and Mrs. John McGowan
Mr. and Mrs. Jeff McKnight
Mr. and Mrs. Rick Moser
Mr. David Pendergrass
Nexion Health/Midwestern Healthcare Center
NuTech Inc.
Ottis Equipment Company
Mr. and Mrs. Larry W. Park
Parker Family Foundation of Byers
Mr. and Mrs. Kevin Parsons
Patterson Auto Center
RFD Taxi of Wichita Falls
Mr. and Mrs. Gregory Ross
Sam’s Club 8239
Mr. Larry G. Sanner
Mr. and Mrs. Joseph N. Sherrill Jr.
St. Jude Medical, Inc.
Mr. Scott Graham
Mr. and Mrs. John Stafford
Mr. and Mrs. Brian Stahler
Dr. and Mrs. Philip L. Stephenson
Stripes Convenience Store 2352
Stripes Convenience Store 2366
Stripes Convenience Store 2368
Stripes Convenience Store 2374
Stripes Convenience Store 2376
Stripes Convenience Store 2378
Stripes Convenience Store 2379
Stripes Convenience Store 2380
Stripes Convenience Store 2381
Stripes Convenience Store 2382
Stripes Convenience Store 2385

Dr. and Mrs. Richard Bundy
Mr. and Mrs. Alex Baggett
Mr. and Mrs. John E. Baker
Mr. and Mrs. Bill Barnard
Mr. and Mrs. Darlene Adams
Mrs. Jamie S. Barnett
Dr. and Mrs. Denny R. Bartel
Ms. Susan Basham
Ms. Peggy A. Beach
Ms. Jana Beasley
Mr. Darrell Beck
Ms. Deborah Beck
Ms. Rebecca L. Bedford
Ms. Joyce Beddian
Ms. Amber Beerman
Mr. and Mrs. Eugene M. Bell
Mrs. Tammy S. Bell
Ms. Veronica Belvin
Ms. Dawn Benham
Mr. and Mrs. Robert Benneff
Ms. Martha Bennett
Ms. Sandra Benoit
Mr. and Mrs. Tim Berardi
Mr. and Mrs. Jerry Beshear
Mr. and Mrs. Jacky Betts
Ms. Dianne Beutel
Mr. and Mrs. Jim E. Biggs, Jr.
Mr. and Mrs. Pablo Bilbao
Mr. and Mrs. Doug Bluye
Ms. Lisa A. Bock
Ms. Tammie Bishop
Bishop Realtor Group, Inc.
Mr. and Mrs. Jim Black
Ms. Gail Black
Mr. and Mrs. Lon L. Black
Ms. Lydia Blackmon
Mrs. Cindy Blades
Ms. Denise Blair
Ms. Kandy Blaisdell
Mr. Mikel Blaylock
Ms. Pierra Boardingham
Ms. Mikel Blaylock
Ms. Larisa Bolling
Ms. Delma Aguilar
Ms. Guadalupe Aguilar
AJON Chemical Co.
Ms. Leslie D. Alexander
Mr. and Mrs. Robert Benneff
Mr. Charles W. Bolin
Mr. and Mrs. Clay Bolin
Mr. and Mrs. Hiram J. Bolinger
Mr. and Mrs. Terry Bolinger
Ms. Patsy Bonner
Mr. and Mrs. Paris Bonner
Mr. and Mrs. Randy Boyd
Ms. Laura B. Boyd
Mr. Robert Boyd
Mr. and Mrs. Donald L. Boydston
Mr. and Mrs. Michael Boyle
Mr. and Mrs. Elizabeth Brouwer
Mr. and Mrs. Eric Bradtke
Ms. Diane Bradshaw
Ms. Holly Bradshaw
Ms. Amy Bragg
Brengle Bowling Products, Inc.
Mr. Joshua Briggs
Mr. and Mrs. Jeffrey Briscoe
Mr. Dale W. Brock
Dr. Mike Brooking
Mr. and Mrs. Joel Brooks
Ms. Libby Brooks
Ms. Paula Brooks
Mr. and Mrs. Benton Brown
Mr. and Mrs. Bobby Brown
Ms. Leslie Brown
Mr. and Mrs. Mark E. Brown
Ms. Rita Brown
Mrs. kim A. Brownlee
Mr. Stewart Brown
Ms. Ginger Bucy
Ms. Cynthia Buford
Mr. Scott Bullington
Ms. Olivia Bucknall
Ms. Mitzi Bussey
Mr. and Mrs. Bradley Butler
Mr. and Mrs. Bill Butler
Mr. and Mrs. Jerry butterfield Jr.
Mrs. Kathy Buckner
Ms. Candace Byrne
Mr. John Budenholtz
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