Annual Report

PCMH

PCMH

Pitt County Memorial Hospital Greenville, North Carolina

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Annual Report 1978-79
Pitt County Memorial Hospital

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PCMH

Pitt County Memorial Hospital
P.O. Box 6028
Greenville, North Carolina 27834

Produced by the Office of
Communications and Publications

Introduction

This year, we said, let's take time for a brief look at how we've grown from a 205-bed hospital to a 403-bed facility that in conjunction with the East Carolina University School of Medicine is becoming the regional medical center for Eastern North Carolina.

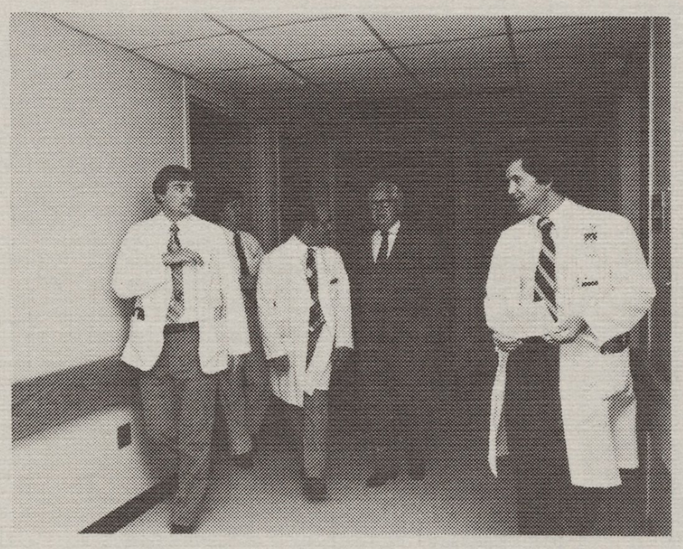
And it has all happened in just 10 short years.

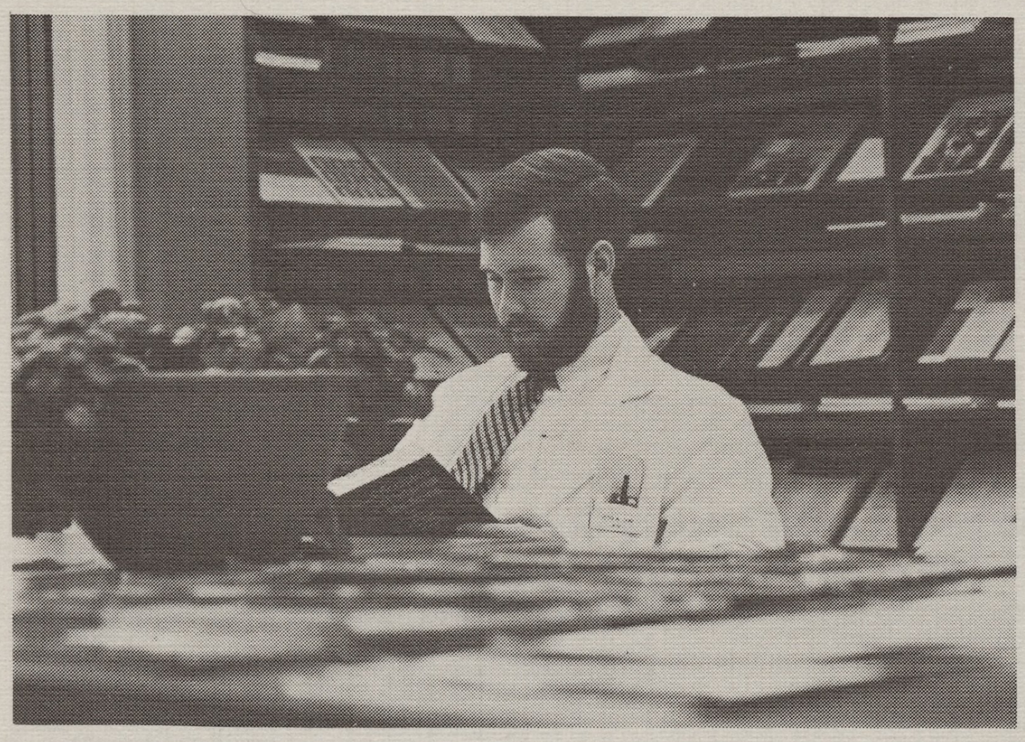
Although our facilities and professional staff continue to grow, our mission remains the same: to provide quality medical care to all those who seek help. And while we have been expanding our facilities, developing new services and strengthening our staff to provide a better environment for patient care, we have not forgotten that our services must be offered in the most beneficial and cost-effective manner possible.

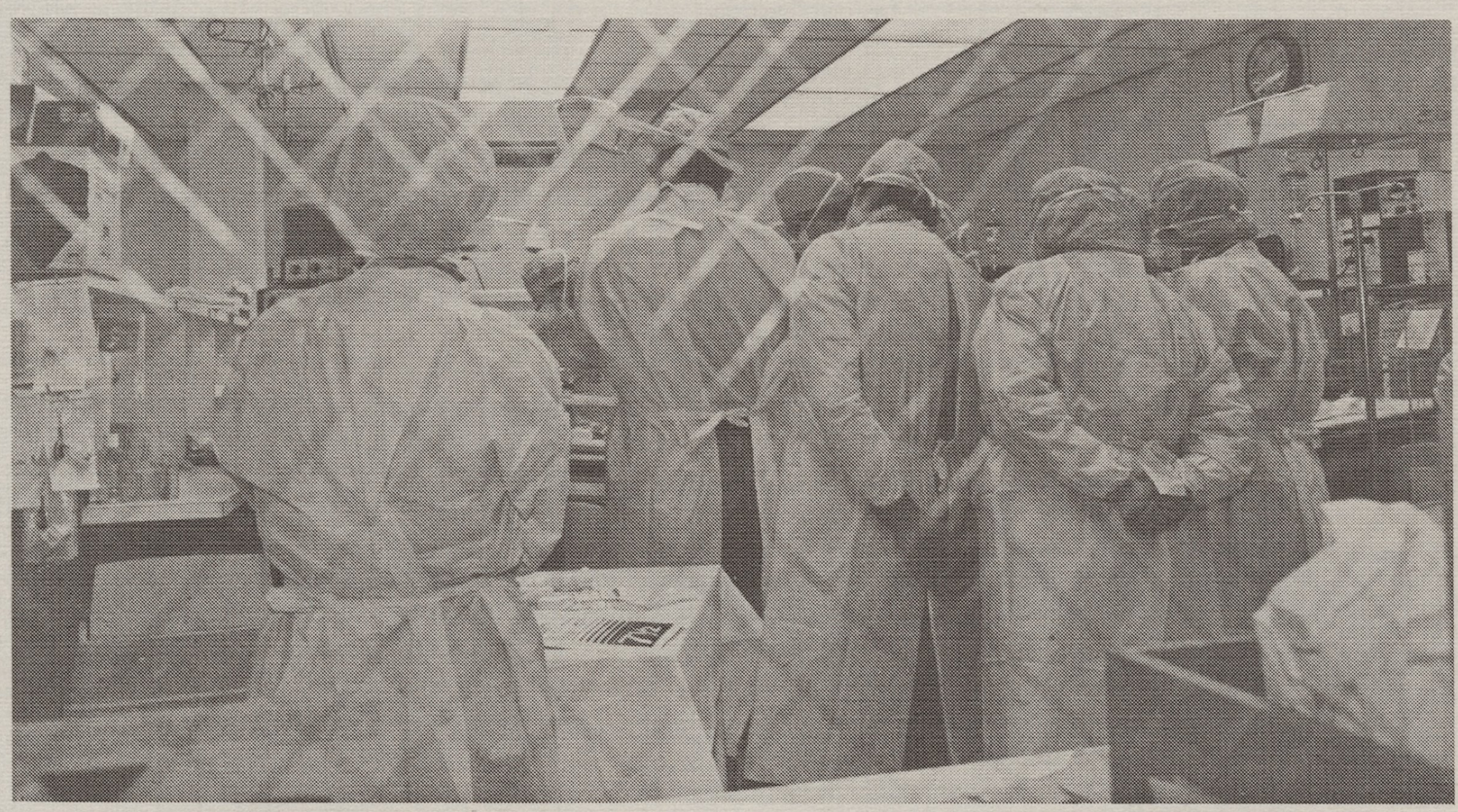
We're still Pitt County's community hospital, but as our services have grown, so have our responsibilities to patients who come to us in Greenville from throughout Eastern North Carolina. They're coming to us for specialized care, some of which was previously unavailable anywhere in our region. And they come to us with the knowledge that the care they receive here is delivered professionally, expediently and compassionately.

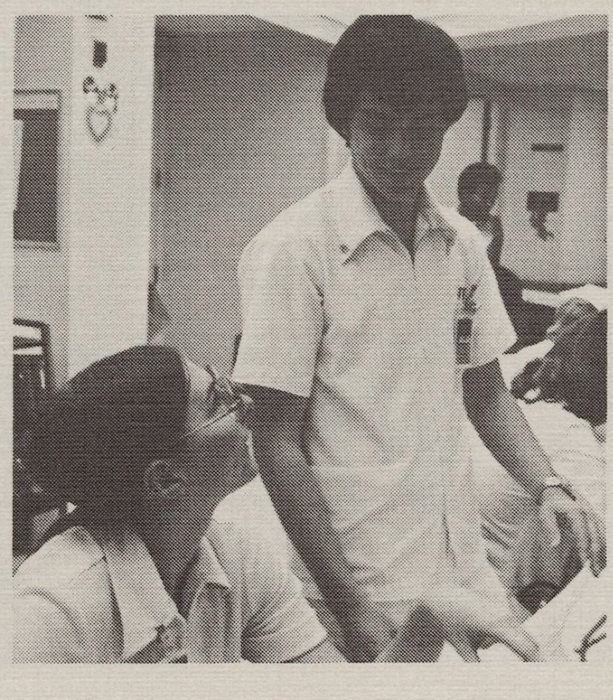
As in previous years, we continue to provide the highest level of professional skills and technological standards that established and continue to maintain our status as an outstanding provider of advanced care in our region.

Our progress is continuing, and we proudly share it with you in the 1978-79 Annual Report.









1969-79
The Years in Review

1969

Hospital officials, the Board of Trustees, the medical staff and Pitt County Commissioners meet with representatives of private corporations to discuss the possibility of selling the hospital to a private group, one of many alternatives that were explored before making the final decision to build a new facility.

1970

The Board of Trustees asks the Pitt County Commissioners to call for a $9 million bond issue to finance construction of a new 300-bed hospital. In November, Pitt County citizens pass a $9 million bond issue to build a new facility.

1971

Site selected for new Pitt County Memorial Hospital.
PCMH celebrates its 20th Anniversary.

1972

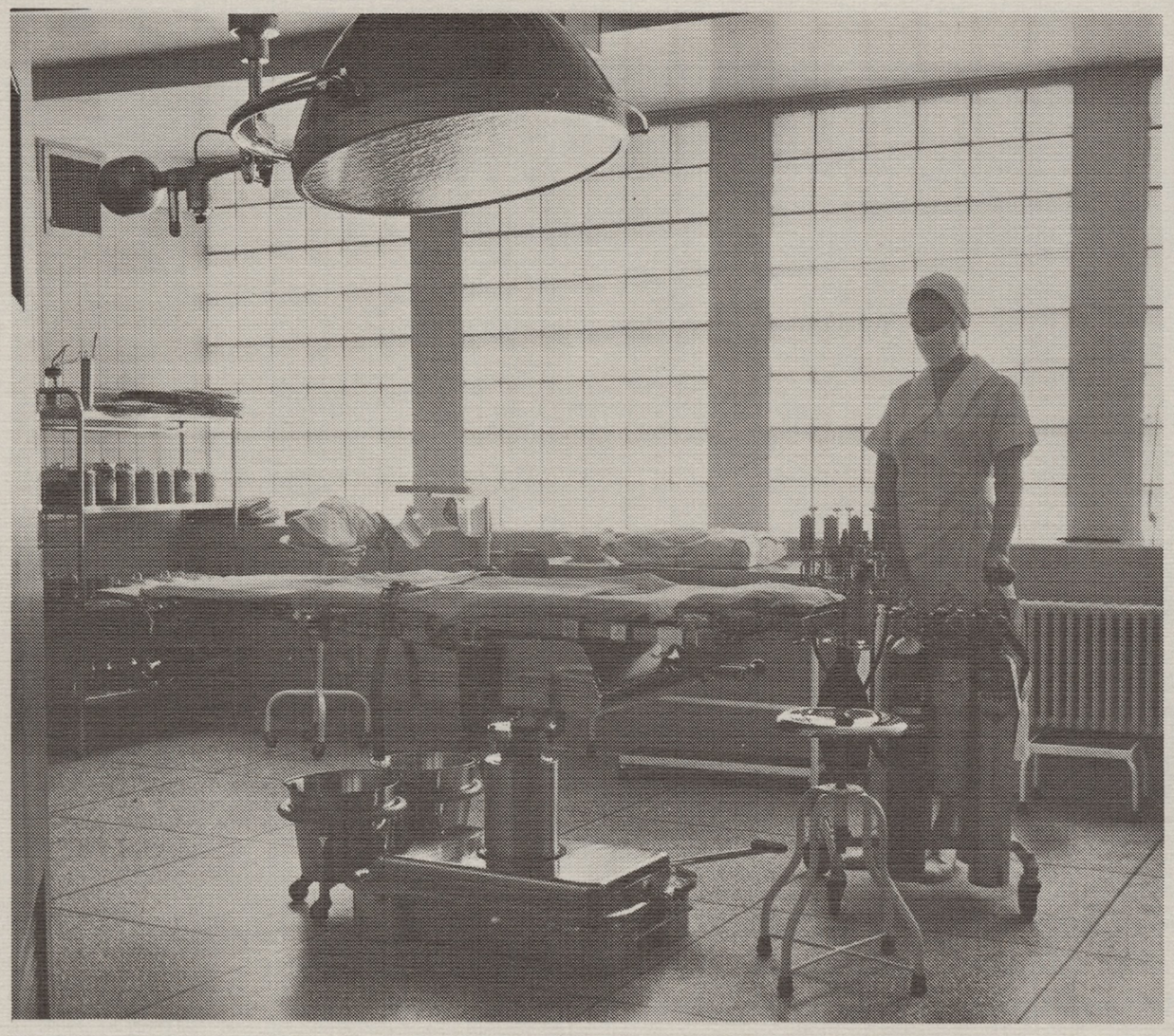
The Board of Trustees announces the establishment of a Memorial Gifts Committee.
The Environmental Impact Study is completed on the 100-acre site for the new hospital facility.

1973

N.C. Legislature appropriates $2.2 million for construction of the Regional Rehabilitation Center, which receives matching federal funds for its 58,000 square foot facility.

1974

Groundbreaking ceremony held for new PCMH and Regional Rehabilitation Center.
Construction begins on new hospital facility.



Now and Then

	1978-79	1968-69
Beds	403	205
Admissions	16,879	9,121
Days of Care	119,790	65,335
Births	1,749	1,248
Emergency Room Visits	26,530	12,353
Operating Room Visits	9,155	5,462
Lab Procedures	708,400	120,029
Radiological Procedures	48,571	16,514
Medical Staff	193	72
Employees	1,448	475
Size of Physical Plant (Sq. Ft.)	440,000	114,000
Budget (Expense)	$23,407,118	$3,262,000
House Staff	57	-0-
Payroll	$11,410,900	$1,837,000
Meals Served	578,122	270,661

The "old" Pitt County Memorial Hospital: an aerial view, "modern" operating room and nursing station.

1975

Affiliation Agreement with the East Carolina University School of Medicine developed and implemented.
Construction begins on the Regional Rehabilitation Center.

1976

Certificate of Incorporation for the Board of Trustees amended to authorize the UNC Board of Governors to appoint 40 percent of the board members.

1977

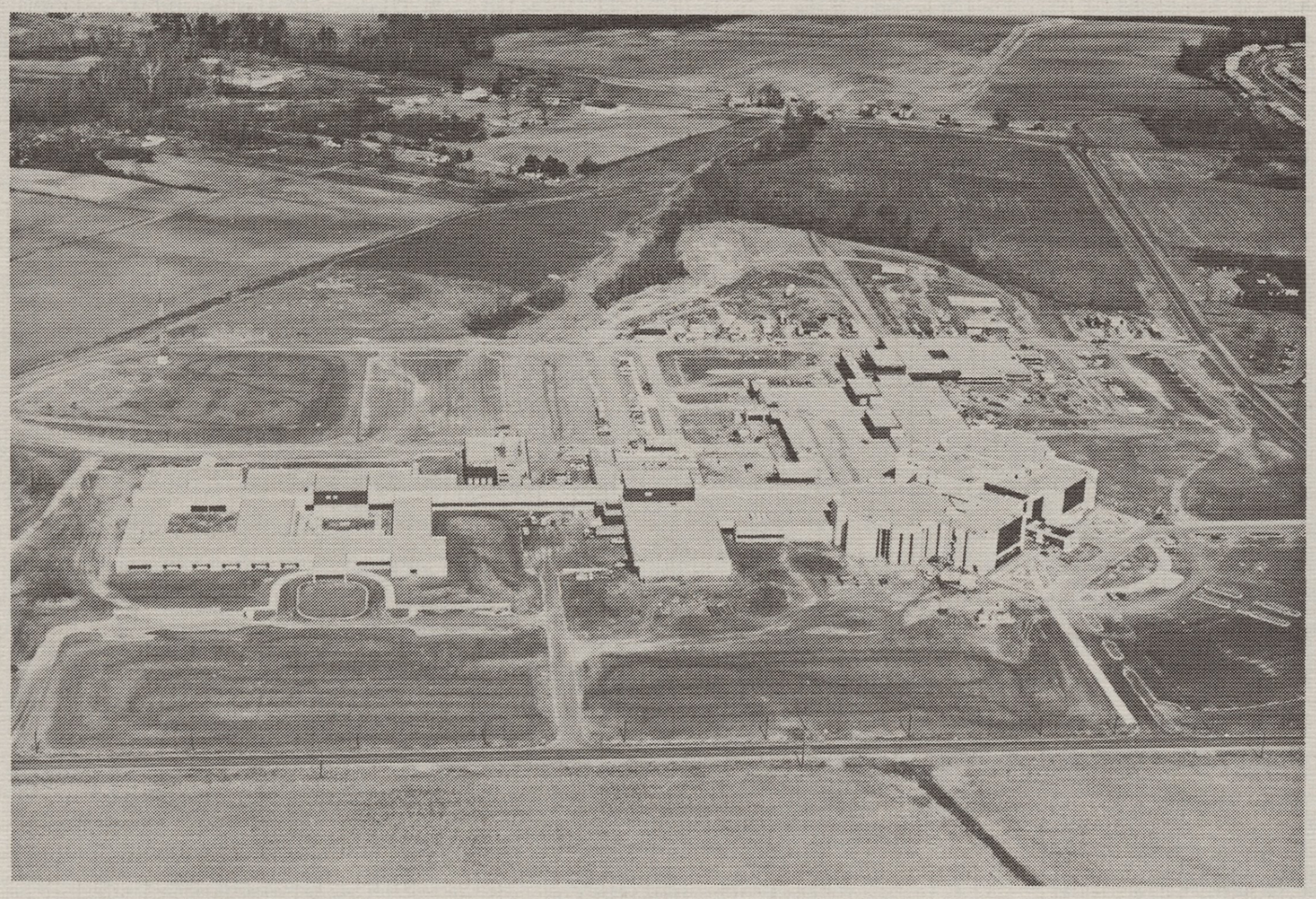
PCMH moves into its new $23 million facility.
ECU School of Medicine admits its charter class of 28 students.
Regional Rehabilitation Center opens first 10 beds.

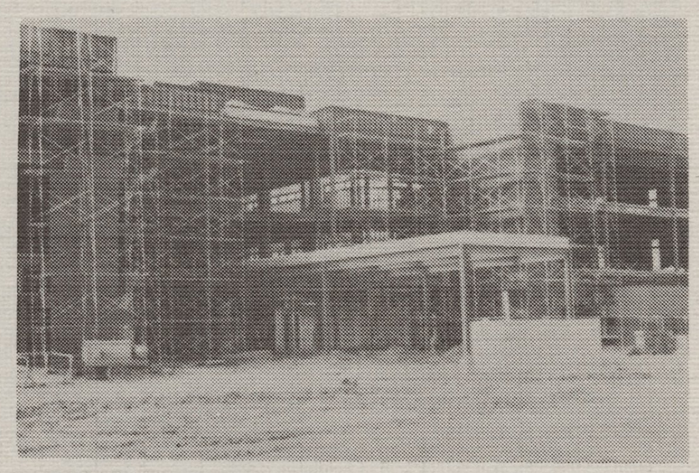
1978

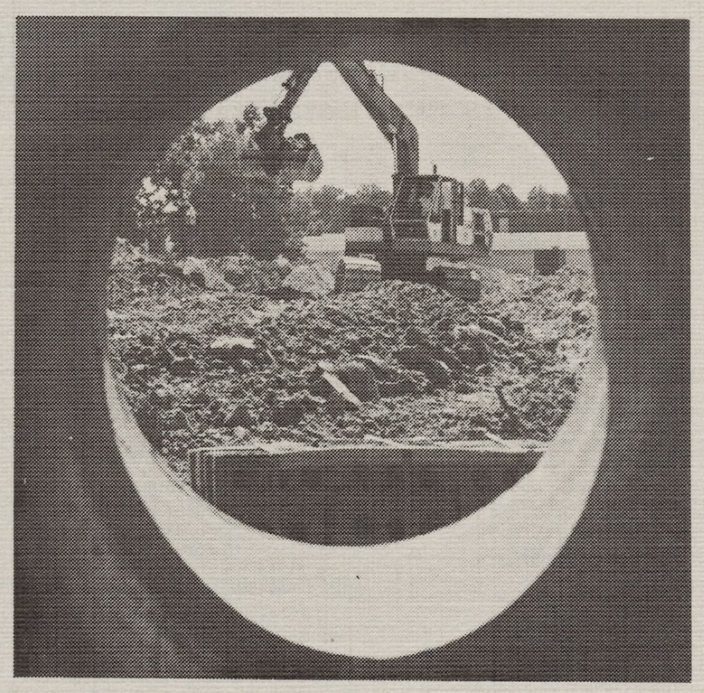
Twenty-four residents join the Hospital's house staff.
Neonatal Intensive Care Unit opens.
Eastern Carolina Family Practice Center opens.

1979

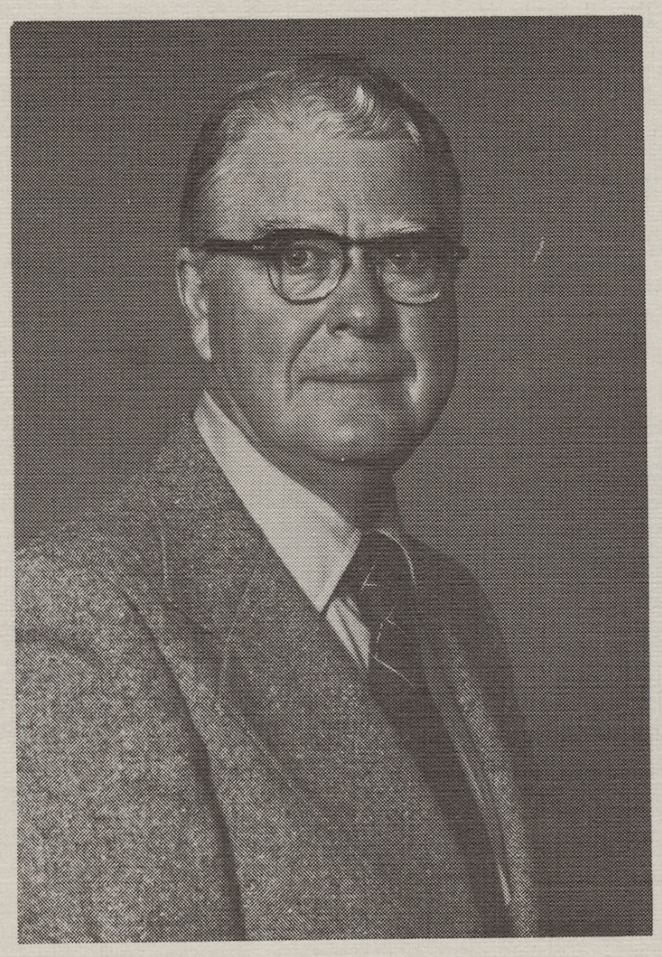
Groundbreaking ceremony held for West Bed Tower addition.
Cardiac Catheterization Lab, CT Scanner and Eastern Regional Newborn Transport Ambulance expand patient care services.
Regional Rehabilitation Center opens all 55 beds.







Message from the Chairman of the Board



G. Henry Leslie

On February 6, 1953, by virtue of the laws of the State of North Carolina, Pitt County Memorial Hospital was incorporated as a non-stock, non-profit corporation over the signatures of 15 compassionate, dedicated, progressive Pitt County resident incorporators. Some of the main objectives of this corporation included the operation of a hospital and clinics for persons requiring patient care, supplying modern equipment and facilities, appointing a qualified medical staff of physicians and surgeons, the use of revenues to provide hospital care for those unable to pay and many additional worthy causes.

The certificate of incorporation was amended on February 17, 1976, authorizing a 35-member Board of Trustees, 40 percent of the Board (14) to be nominated by the Board of Governors of the University of North Carolina for appointment by the Pitt County Board of Commissioners. The remaining 60 percent of the Trustees (21) would be appointed from all sections of Pitt County by the Pitt County Board of Commissioners. In the interim, agreement was reached to reduce the number from 35 to 20. On March 1, 1980, this goal will have been achieved with eight of the trustees being appointed by the Board of Governors and 12 nominated by the Pitt County Board of Commissioners.

The above amendment was a sequel to the agreement of affiliation with the East Carolina University School of Medicine, which became effective December 17, 1975. This agreement provided for the utilization of Pitt County Memorial Hospital as the primary teaching hospital of the School of Medicine and rendered unnecessary the construction of a separate, state-owned teaching hospital, thereby saving the taxpayers of North Carolina several million dollars. The affiliation agreement has been hailed nationwide as a practical and model document. Currently, it is serving both parties well.

The bylaws of the Pitt County Memorial Hospital Board of Trustees require the election of a chairman, a vice-chairman, a secretary, a treasurer, an assistant treasurer and an Executive Committee at the annual meeting in March. The Executive Committee (seven members) requires at least three trustees from the University of North Carolina Board of Governors' nominees. The following standing committees also serve the Board of Trustees: Finance, Auditing, Retirement, Ambulance and Joint Policy Committees.

The 1970s have been a period of growth and progressive change for Pitt County Memorial Hospital. A new hospital has been constructed and occupied. The bed capacity has increased from 205 to 403. The current budget exceeds $30 million, and the annual payroll is approximately $15 million. The organizational structure has been changed to provide the qualified administrative staff to cope with the orderly growth of a Medical Center complex.

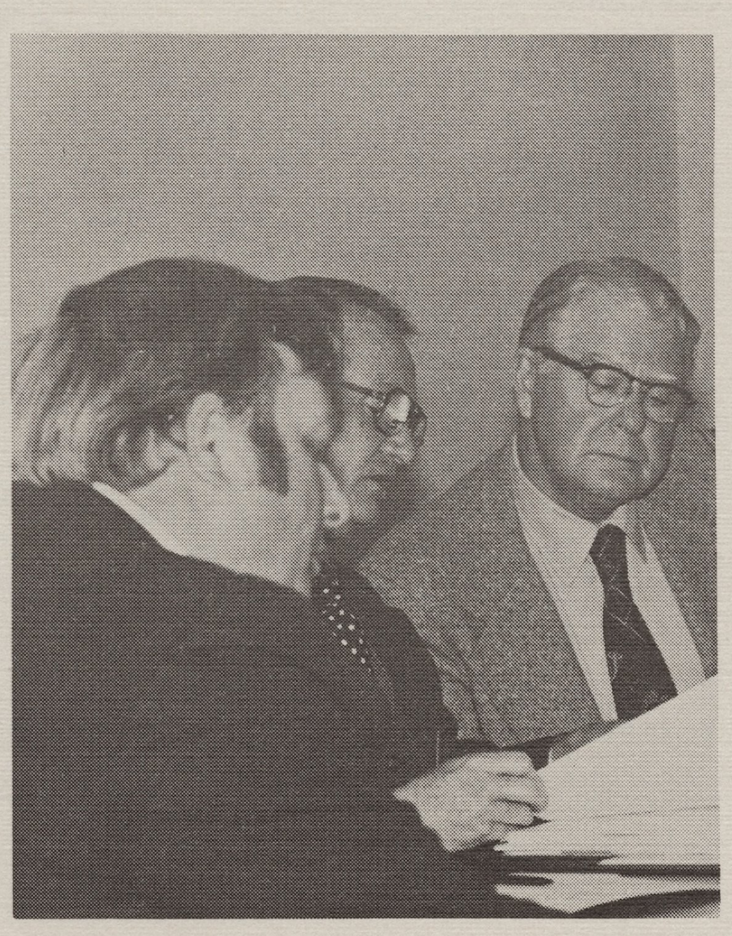
Much of this growth is due to the development of the School of Medicine and our joint efforts in health care. And the Board, Staff and Medical School have put forth every effort to control costs in a highly inflationary economy. Pitt County Memorial Hospital, along with many other hospitals, has pledged full support to the North Carolina Cost Containment Program. And we recently received accreditation as a Cost Containment Hospital from the N.C. Voluntary Effort Steering Committee.

In the 1980s, the Hospital in its affiliation with the Medical School should experience phenomenal growth, acquisition of more expertise in the field of medicine and surgery, and rapid advancement in diagnostic and remedial technology. Perhaps more than 600 beds will be available by the end of this decade. The Board and Staff must be on the alert to oppose state and federal legislative action that would create regulatory bureaucracies requiring additional personnel and needless records. Should regulations of this nature be promulgated in the 1980s, the Hospital could be faced with the possibility of curtailment of needed health care services.

The Board of Trustees of Pitt County Memorial Hospital is a conscientious, hard-working body dedicated to providing the best patient care possible for the community it serves. It is comprised of 20 qualified members ready to meet the exciting challenges of this decade.

G. Henry Leslie

Signing the contract for the West Bed Tower: Front row, W.W. Speight, Bob Martin, Margaret Roberts; back row, Reginald Gray, Burney Tucker, Bruce Strickland, Alton Gardner, Charles Gaskins, Cliff Moore and Dr. Dean Hayek.



Message from the Director

Jack W. Richardson

A review of 1979 may be placed in better perspective if we survey a few activities of the 1970s that were significant in the development of today's Medical Center that combines the resources of Pitt County Memorial Hospital and the East Carolina University School of Medicine.

We remember that 1969 was the year several private firms visited Greenville to explore the possibility of developing a new hospital. Plans were being made locally to expand the old hospital or build a new facility. The Board of Trustees asked the County Commissioners in May of 1970 to call for a $9 million bond issue to finance construction of a new 300-bed hospital, and six months later, Pitt County citizens voiced their approval at the polls.

Other developments in 1970 included the opening of the Pitt Community College LPN program and the employment of Jean Owens as director of nurses at PCMH. Dr. Earl Trevathan was elected Chief of Staff, and two future Chiefs of Staff, Drs. Jack Welch and William Bost, joined the Medical Staff. Also in 1970, the American Hospital Association awarded Pitt County Memorial Hospital a certificate for 25 years of membership and service. Indeed, 1970 was a year of decisions that kicked off the growth of the Medical Center as we know it today. And in the seventies, the leadership of our County, the Board of Trustees, the Medical Staff and the ECU Medical School put into motion the development of this unique Medical Center which is providing health care services to a region of the state that has had many unmet needs.

This year, the "new" PCMH, which was occupied in April 1977, became fully utilized with all beds open. It was the year that nurse recruiting efforts posted significant results locally, as well as in far away Canada. The employment rolls topped 1,400, and the Medical Staff grew to 193. All previous statistical measurements for services provided at the Hospital were surpassed, and the new CT scanner and cardiac catheterization lab, funded by the Medical School, provided us with the most sophisticated diagnostic capabilities.

The presence of two new programs also could be seen outside of Pitt County. Residency programs at the Medical Center began to reach into surrounding communities, and the Eastern Regional Newborn Transport Ambulance began to travel out from the Neonatal Intensive Care Unit here.

Hospital employees were trained and their skills updated in 1979 as numerous staff development programs were implemented to match the growth of the Medical Center. The Board of Trustees also authorized the Hospital to offer a tuition aid reimbursement program to enable employees to continue or supplement their education and skills. Special emphasis was placed on "people to people" services to assure that, even though the Hospital was growing, we would not forget *the personal touch that is the hallmark of the development of this unique Medical Center.* Our Hospital Volunteers helped us by giving 5,370 hours of service.

And 1979 was the year of the groundbreaking for a third bed tower, funded by the Medical School through state appropriations, that will increase the size of the Hospital to a 569-bed facility by 1982. It was the year that the "Plan for Future Development of Pitt County Memorial Hospital" was presented to the Board of Trustees and Medical Staff. The consultants, Howell and Larson, commented at their presentation of the plan that "the viable growth and development of the Hospital created an exciting atmosphere of challenge as well as a commitment to orderly growth." Their recommendations included development of mechanisms for communication between the Board of Trustees, the Medical Staff and representatives of the Medical School. These have been translated into planning retreats to provide forums to develop on-going planning strategies. And in 1979 the partnership between the county and state — the Hospital and Medical School — was being touted as a viable way to bring medical education into a community hospital setting.

Also during the last year, we have seen the Voluntary Effort to help contain health care costs mature and become a viable mechanism. Hospitals in our state and nation joined with medical staffs and industry leaders to improve dialogue and address mechanisms to be sure that medical care is cost effective. PCMH employees participated in CARE (Contain and Reduce Expenses) and demonstrated their dedication to

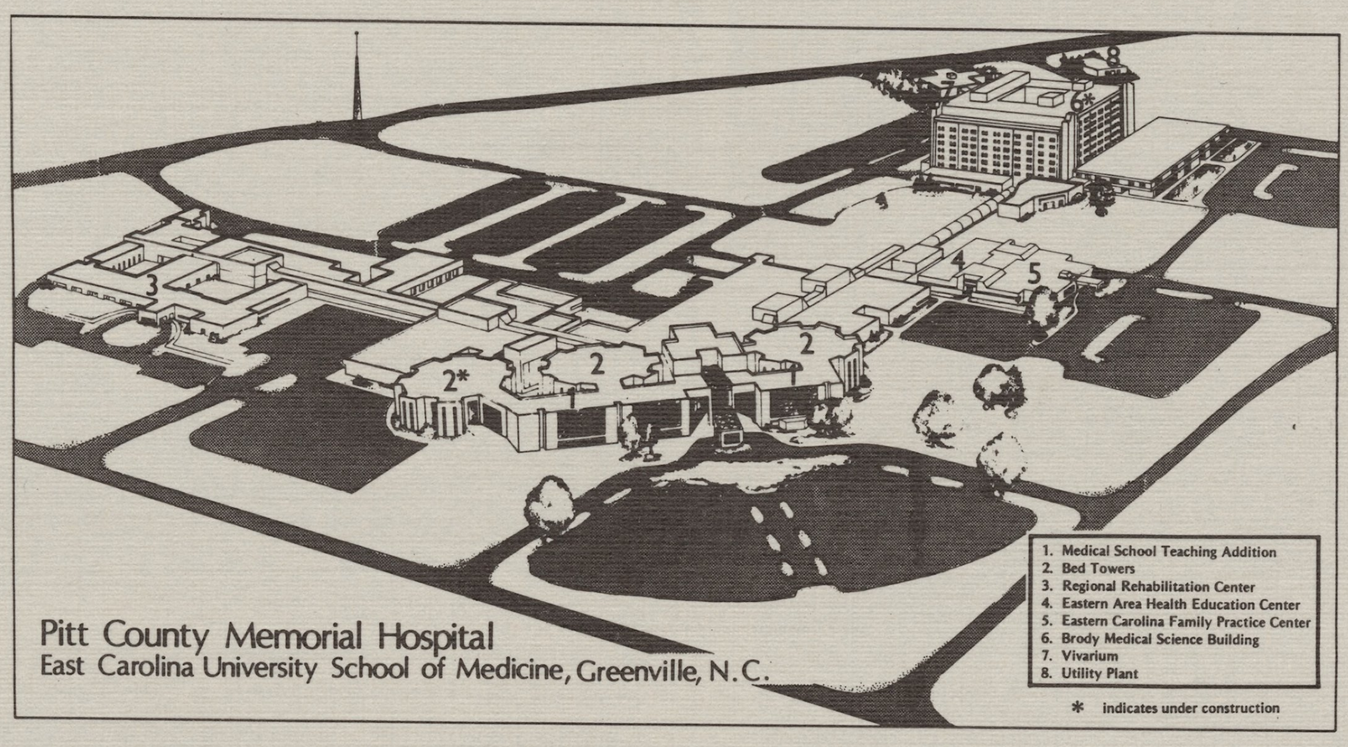
cost containment by identifying more than $100,000 in cost-saving suggestions during the year.

The Hospital family paused during the year to mourn the loss of a beloved physician. Dr. Howard Gradis, who served as Chief of Staff in 1970, was honored by the Board of Trustees with these words: "He was deeply concerned and interested in the care and attention rendered to the people, and he will be sorely missed."

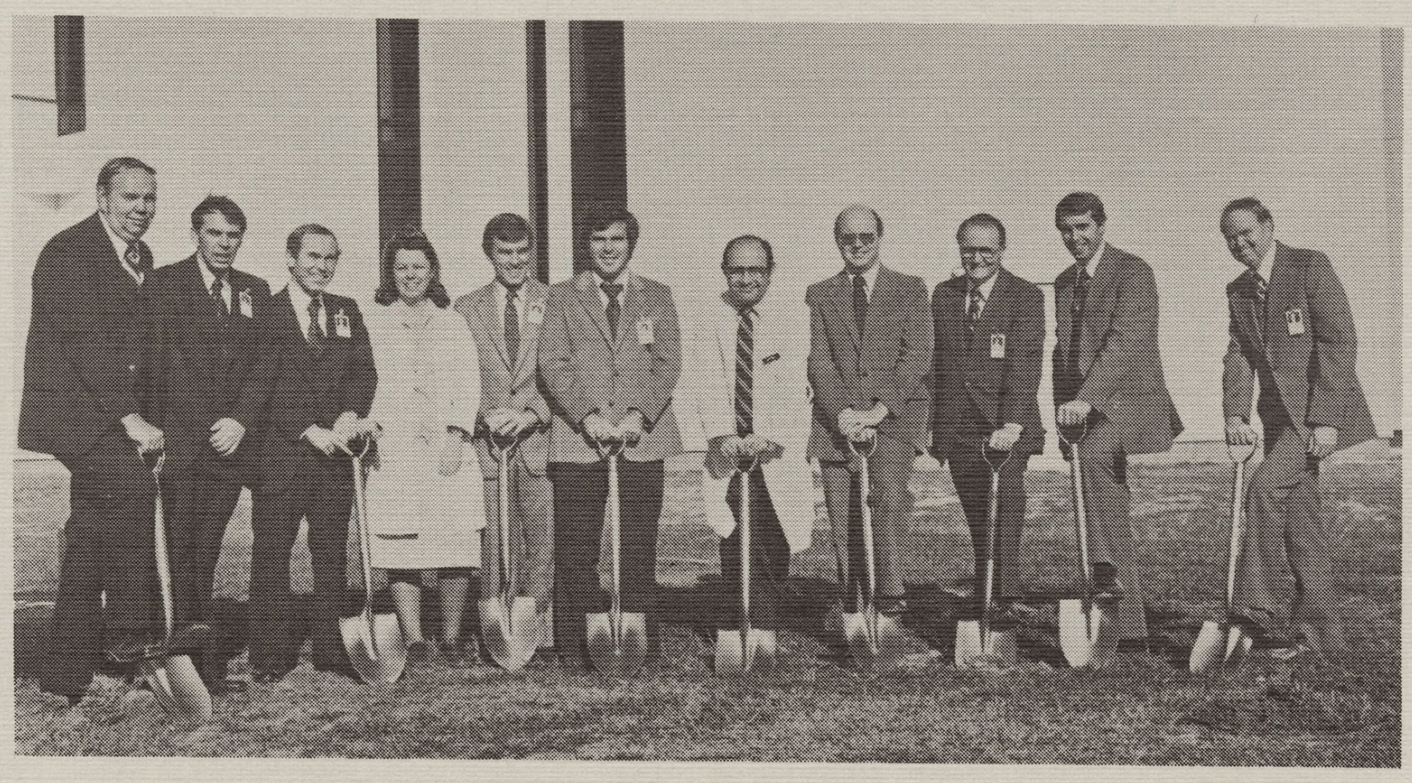
The diligence and dedication of the leaders of the seventies who planted the seeds and nurtured the growth of the Medical Center provide splendid examples for those who follow in the eighties. The Annual Audit Report for the year ending September 1979 spoke about rapid growth and the challenge to develop cash flow strategies to meet the continuing expansion of Hospital services. The report revealed a strong financial position at the Hospital, with operating margins that provide for additional capital equipment and growth of inventories. This strength must continue if solid growth is to be achieved in the 1980s.

Yes, 1979 was the year of proper utilization of the facilities at the Medical Center, and our achievements illustrate the continuing commitment to growth and development consistent with our goals of the early 1970s.

Jack W Richardson

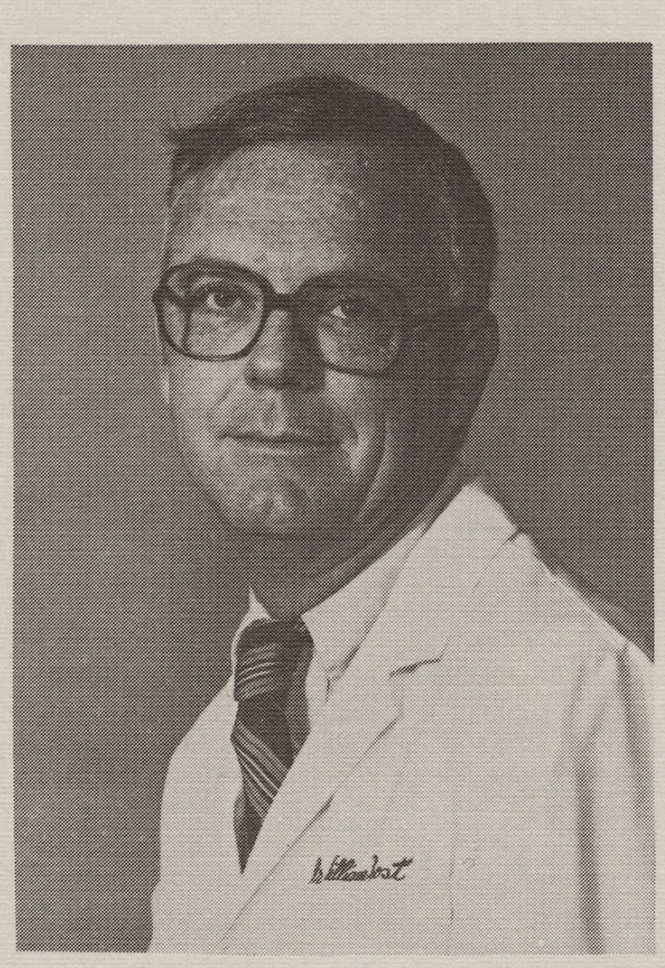


Pitt County Memorial Hospital
East Carolina University School of Medicine, Greenville, N.C.



Breaking ground for the West Bed Tower: from left, Ralph Hall, T.B. Sitterson, Craig Quick, Betty Trought, Dave McRae, John Stallings, Dr. Walter Pories, Robert I. Barnes, Jack W. Richardson, M.E. Gilstrap and Warren McRoy.

Message from the Chief of Staff



Dr. William S. Bost, Jr.

This year, Pitt County Memorial Hospital began operating three important new ancillary services developed and funded by the ECU School of Medicine. The services have changed the course of medicine and medical care in our area and represent our transition from community hospital to Medical Center as the Medical School expands its service and educational components.

The cardiac catheterization lab encompasses all of the latest techniques in cardiovascular diagnoses and offers a service which was previously many miles away. This lab encompasses many ''one of a kind'' techniques, and with this equipment the Medical School and Hospital are able to perform important new diagnostic procedures. Computerized scanning of the data compiled in the cath lab is done in such a manner that we all feel this will be the way of the future.

The CT scanner also has given us much in the way of diagnostic capabilities which at the present time are unique in Eastern North Carolina. This computerized tomographic scanner allows low, safe levels of radiation and eliminates, in some cases, long expensive hospital stays for diagnostic testing. This scanner is particularly useful in diagnosing brain abnormalities and is extremely valuable in emergencies when a quick and accurate diagnosis must be made.

Another welcome addition this year to the Neonatal Intensive Care Unit is the Eastern Regional Newborn Transport Ambulance. This special van is designed particularly for the transport of infants and will greatly enhance their chances of survival in our area. The vehicle is a modified ambulance supplied with the necessary emergency equipment for evaluating and treating the unique and often life-threatening problems of the newborn. With this extended facility, the Medical School and Hospital are able to serve the 29-county area with the latest in newborn transportation care.

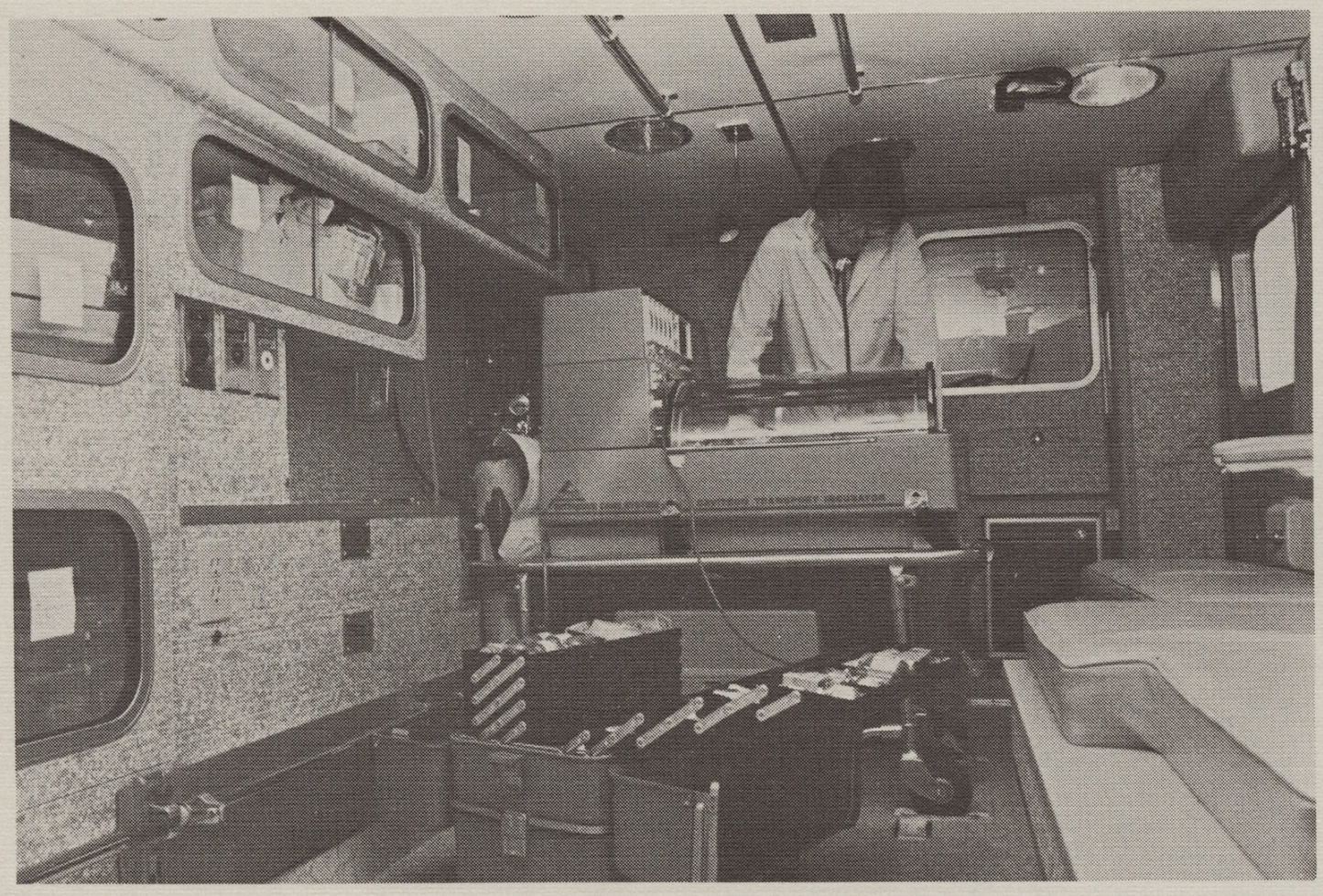
In addition, we have several other specialty services added to our Hospital in conjunction with the School of Medicine. To the forefront comes the oncology service for adults and pediatric patients. Recently, our plans for transplantation services were approved by the Board of Trustees. Both of these programs will offer added and expanded services which are exclusive in Eastern North Carolina. In addition, our expanded rehabilitation program has given many people the opportunity to return to a useful existence after strokes, injuries and surgical procedures.

As we look forward to the 1980s, we see continued growth of our facilities. The services we are able to offer with the School of Medicine and the development of the staff to take care of multifaceted problems will continue to attract patients. We see a name change from ''Pitt County Memorial Hospital'' to ''Pitt Memorial Hospital'' encompassing the regional connotation that we now offer and will continue to offer through an orderly growth pattern. As we become more involved in secondary and tertiary care, we will find also that we must depend on many of our neighbors to offer the primary care where it is available. We also see the advent of many satellite programs which will allow us to complement the care which we offer to our citizens.

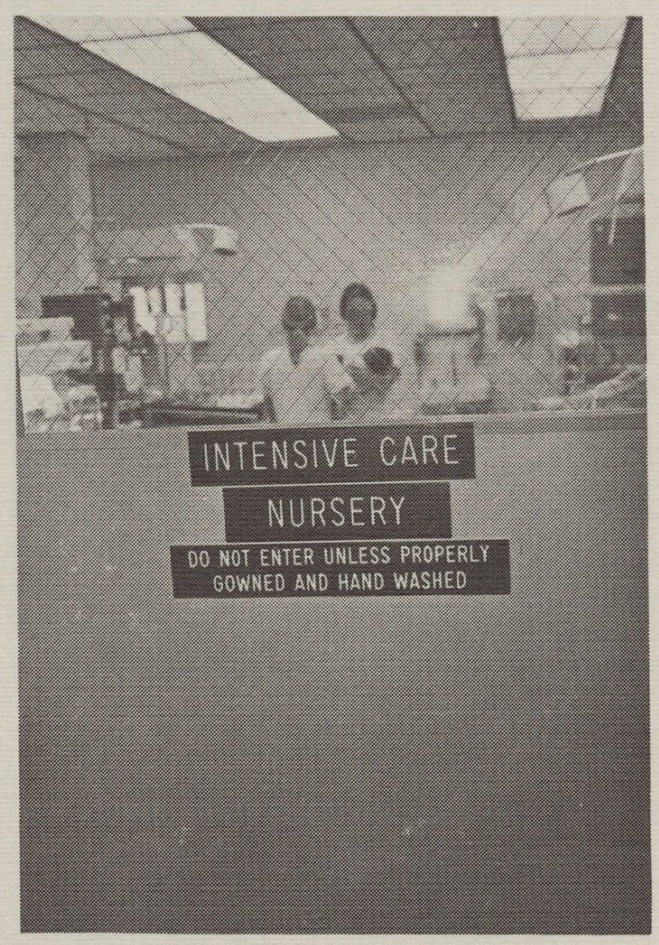
Furthermore, we see the advent of the modality for radiation therapy, another project cooperatively developed with the School of Medicine that is top priority for the 1980s. We hope this can be implemented very close to the time the new bed tower is completed, and we welcome the opportunity to be able to treat many of our local people with irradiation therapy rather than have them travel long distances for this care. We also see a continued cooperation with our neighboring hospitals in helping them meet the diagnostic and therapeutic needs of their patients. We look forward to this joint venture and offer this only as a means to better meet the needs of Eastern North Carolina and to take care of its citizens.

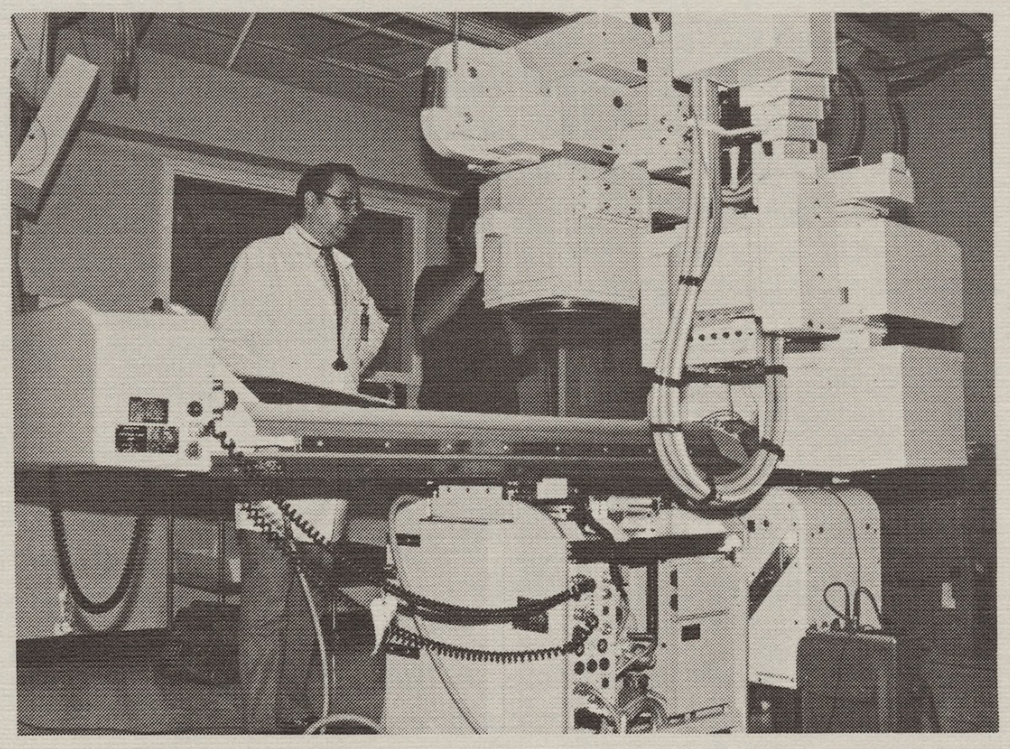
I see our mission as one of continuing to offer the people — not only in Pitt County but the surrounding areas as well — the finest in diagnostic and therapeutic medicine that can be offered in the United States.

William S Bost Jr



New transportation for babies: The Eastern Regional Newborn Transport Ambulance provides safe travel to the regional Neonatal Intensive Care Unit.





New diagnostic procedures: the CT scanner (left) and the cardiac catheterization lab.

Message from Nursing Services

Jean Owens

In 1969, the Department of Nursing was a typical small community hospital department. The Nursing Staff at that time consisted of 60 Registered Nurses, 35 Licensed Practical Nurses, and 180 Aides, Orderlies and Clerks. During 1969, there was a total of 70,491 adult days of care rendered. We had 16,962 emergency visits and 4,705 newborn days of care. The only special services that were provided at that time were critical care services, and we had a total of 16 critical care beds, eight of which were monitored. Our daily average patient load was 180. We were small in 1969, and the Nursing Department was dedicated to a friendly and individualized type of care for our patients.

The Department of Nursing's dedication to the patient as an individual has continued through the years and remains the greatest strength of the Department.

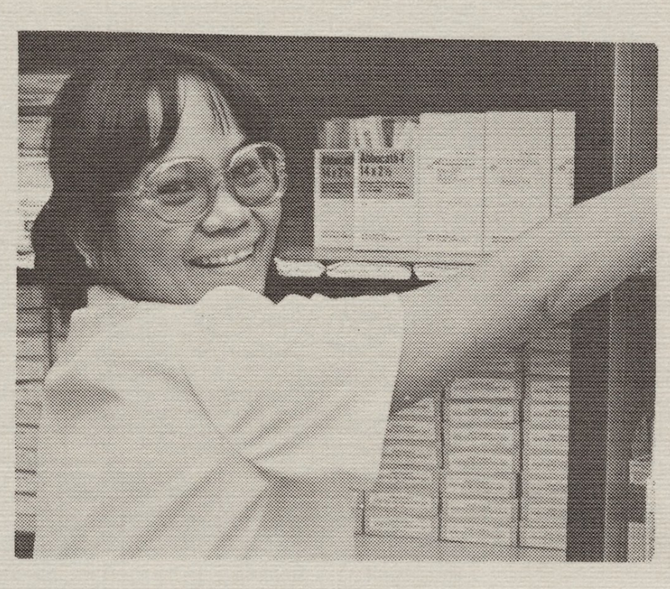
Through the years, we have added sophisticated services, expanded existing services, and grown from a small community hospital that has joined with the East Carolina University School of Medicine to become a regional Medical Center. We moved into a new facility in April 1977, and our first resident physicians joined us. We opened a 55-bed Regional Rehabilitation Center and 14-bed Psychiatric Unit. We also opened a 33-bed regional Neonatal Intensive Care Unit, and critical care beds expanded to 24. Another addition was a 24-bed step-down unit for our critical care patients.

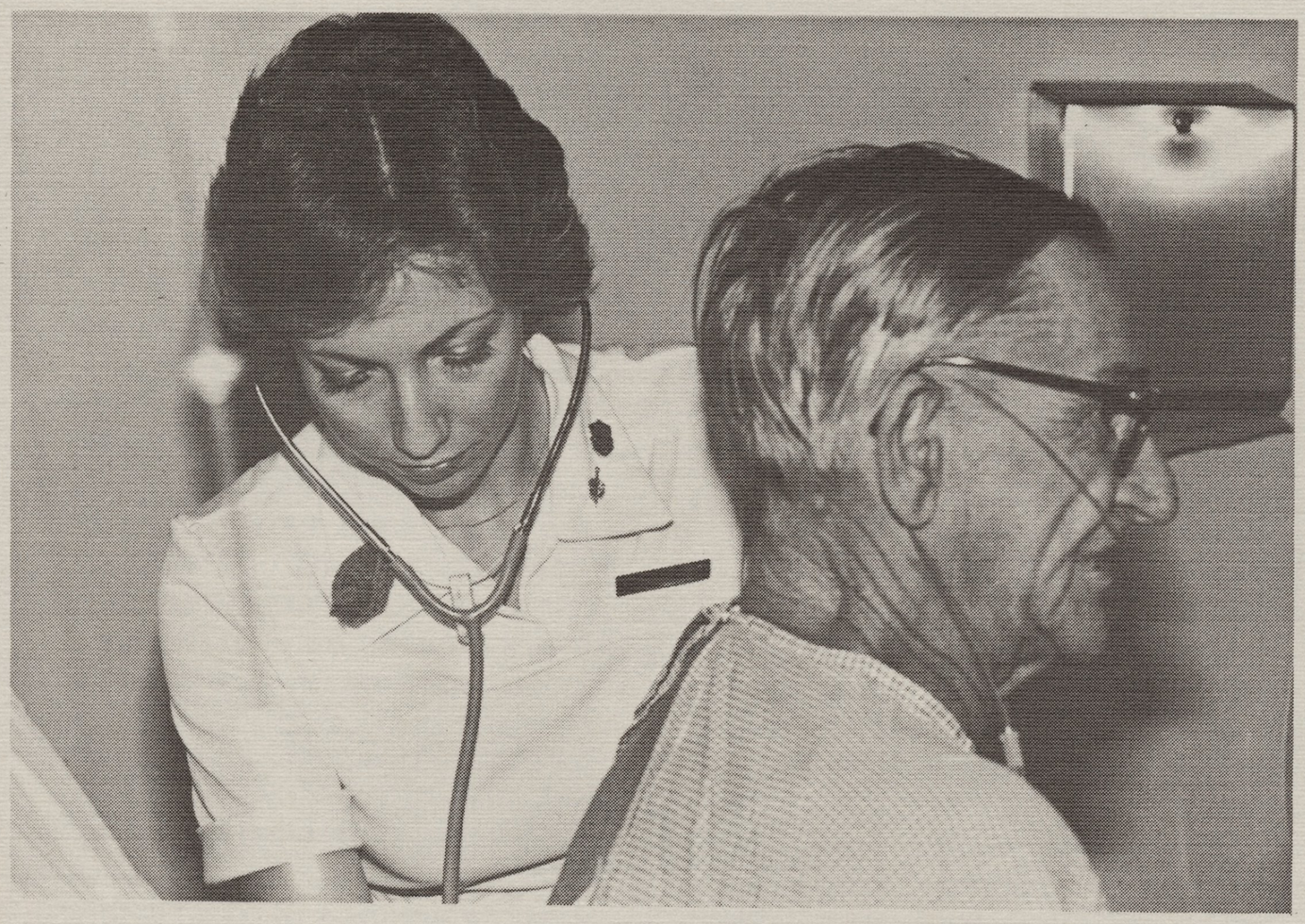
And in 1979, we provided 119,790 adult days of care. Emergency visits had increased to 26,530 and newborn days to 8,411.

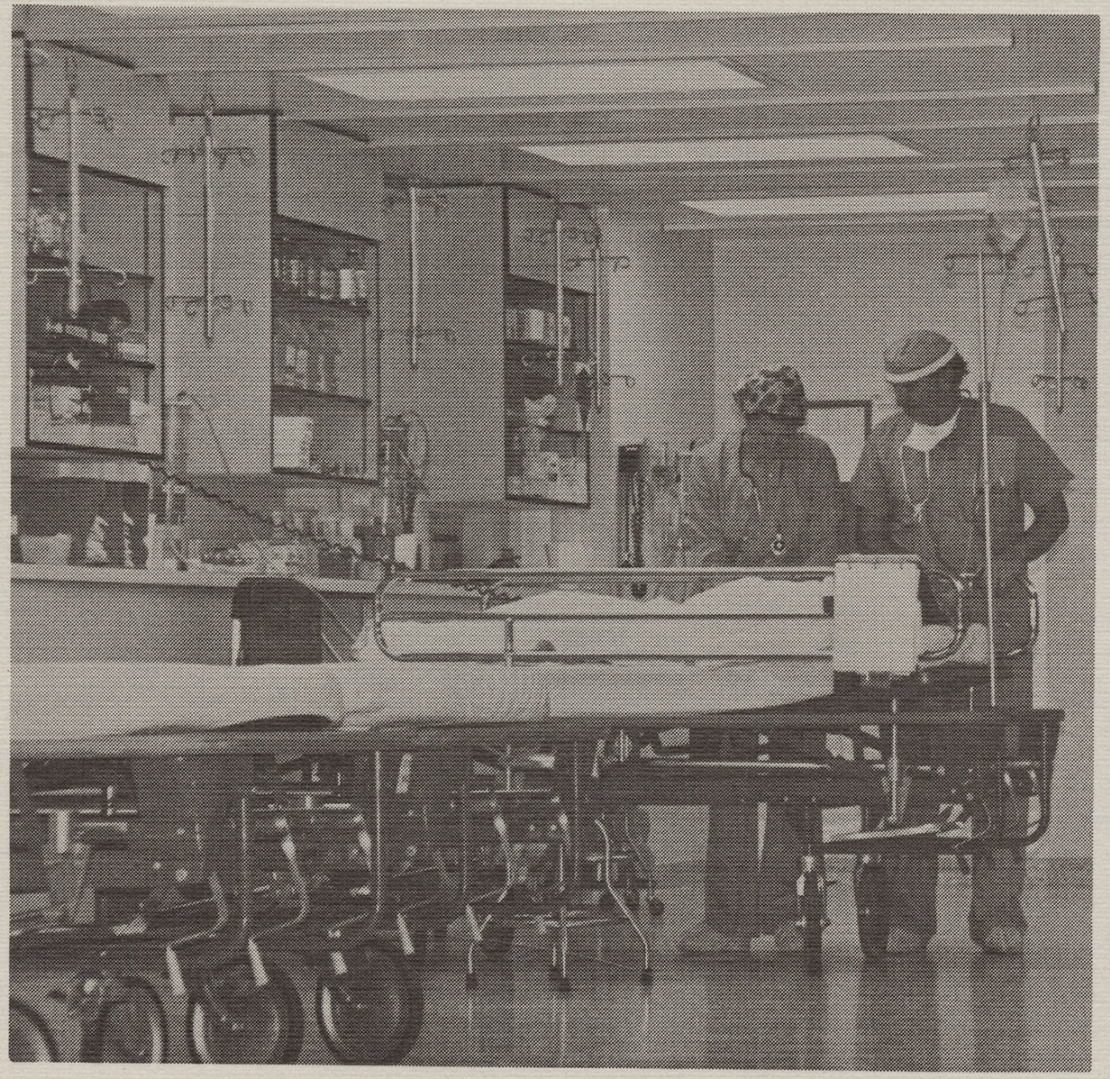
The phenomenal growth that Pitt County Memorial Hospital has experienced over the years makes the Department of Nursing more determined to meet the challenges of the next decade. Additional beds, additional services and more sophisticated technology will certainly be a part of us forever. Today, the Department of Nursing has 266 Registered Nurses, compared to 60 in 1969. We have 40 Licensed Practical Nurses and 240 Aides, Orderlies and clerical personnel for a total of 546 employees. It is projected that within the next two to three years we will need to increase our Department to 486 Registered Nurses and 318 support personnel.

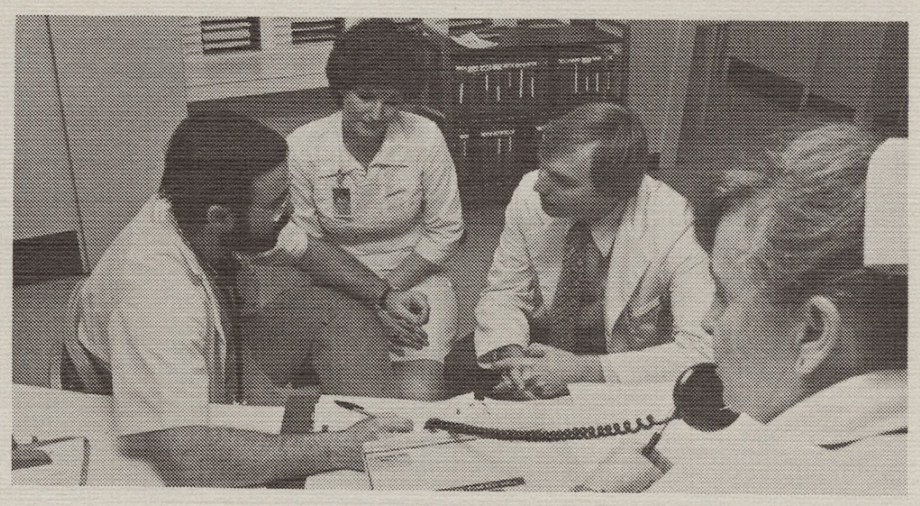
We may not know exactly what faces us in the future, but the Department of Nursing will meet the challenges as we have done in the past. And the patient will remain the focus of this Department.

Jean M Owens

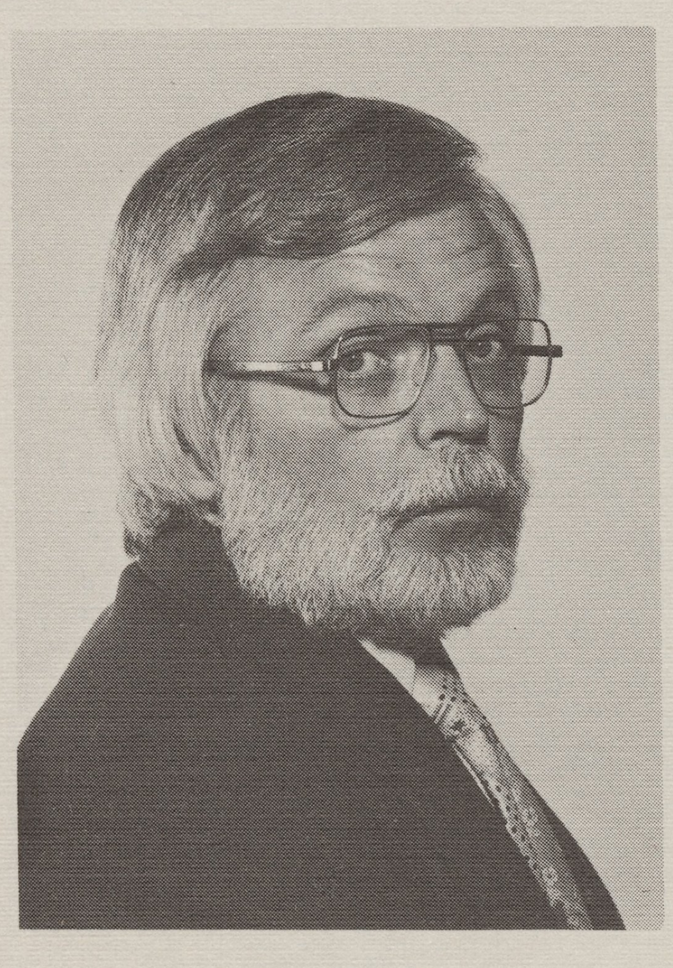




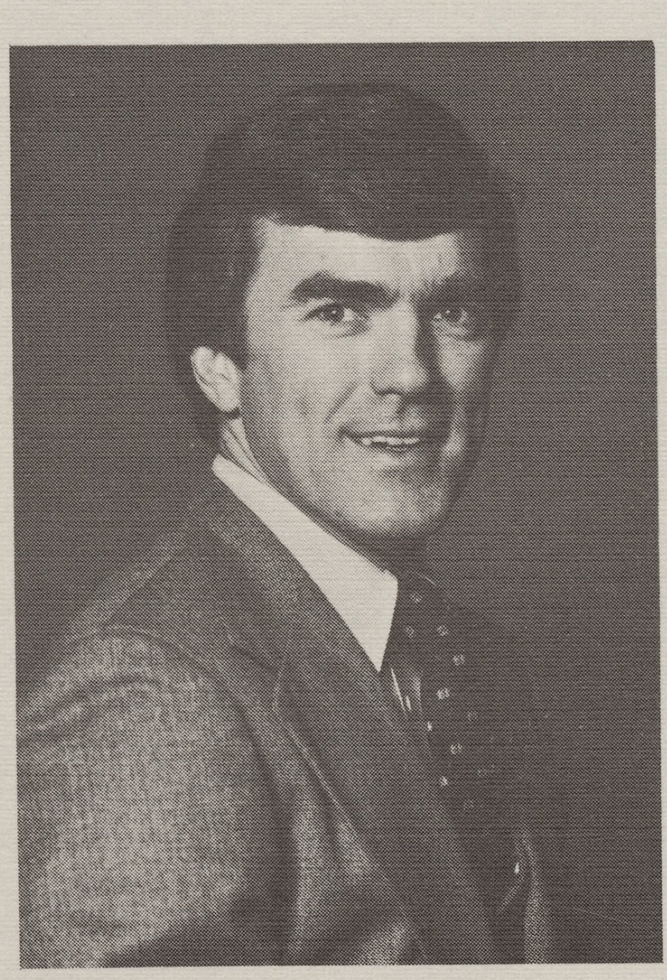




Message from the Rehabilitation Center



Dr. Donald D. Weir
Medical Director



Dave McRae
Associate Director

The idea for a rehabilitation center for Eastern North Carolina was born in the late 1960s. Dr. Donald D. Weir, who now serves as medical director of the Center, was then a member of the N.C. Advisory Committee on Rehabilitation Facilities. Organized to develop a plan for regional rehabilitation centers in the state, the committee recognized that such a facility was desperately needed for the eastern region. And at that time, matching federal funds were available for construction of comprehensive centers.

The expansion of medical care services in Greenville made the city a choice location for such a facility. And when the Center's first beds opened in 1977, it became an "instant" regional center. During the first year of operation, 70 percent of the referrals were from outside Pitt County. Today, 85 percent of the patients come from outside the home county.

The number of initial requests for patient services surprised the Center's professional staff. Although the need for a comprehensive center had been documented during the planning process, the Center was flooded with calls from people seeking help. The requests came from patients with recently diagnosed chronic illness, but many of them were from people with long-term disabilities who had never received rehabilitation services and eagerly wanted to take advantage of the new opportunities available at Pitt County Memorial Hospital.

So it was then that the Center's administrative staff began the personnel and program development that today truly makes it a comprehensive regional rehabilitation center. Professional staff development has given an added dimension of maturity and experience to members of the rehabilitation health care team. And a systematic medical team approach has strengthened the quality of care for patients by providing a better communication mechanism for clinical specialists.

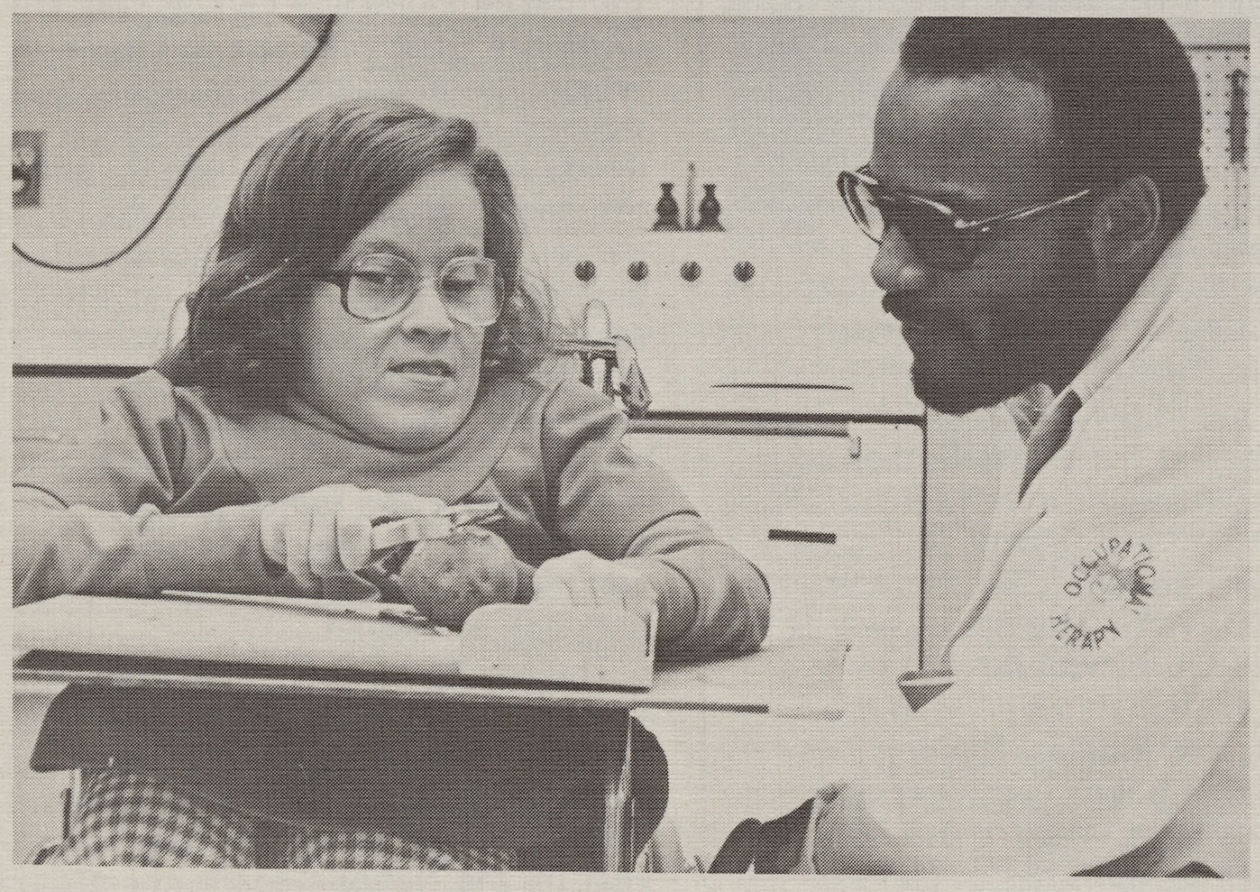
The increase in sophistication of the staff and the maturing of the team approach were joined in 1979 by other factors that significantly affect the Center's delivery of medical care. Dr. Maurice Schnell joined Dr. Weir as a second physician specialist, and two physician assistants were added to the staff. To assure patients of continued progress when they returned to their homes, a more extensive follow-up program was implemented to monitor each patient for one full year through clinic and home visits.

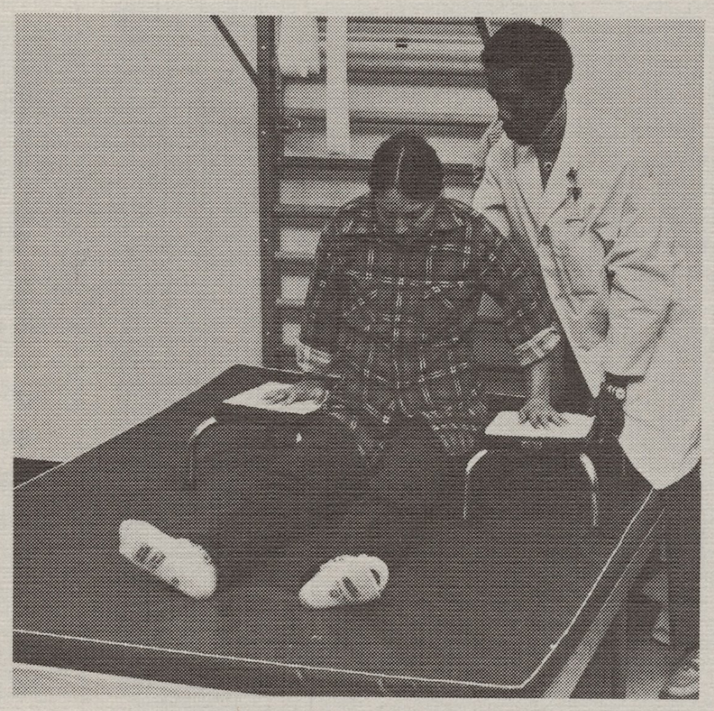
The Center also expanded from 44 beds to its full 55-bed capacity. And the addition of two Handi Voice units donated by the Hospital Gifts Foundation gave many non-oral patients their first opportunity for verbal communication.

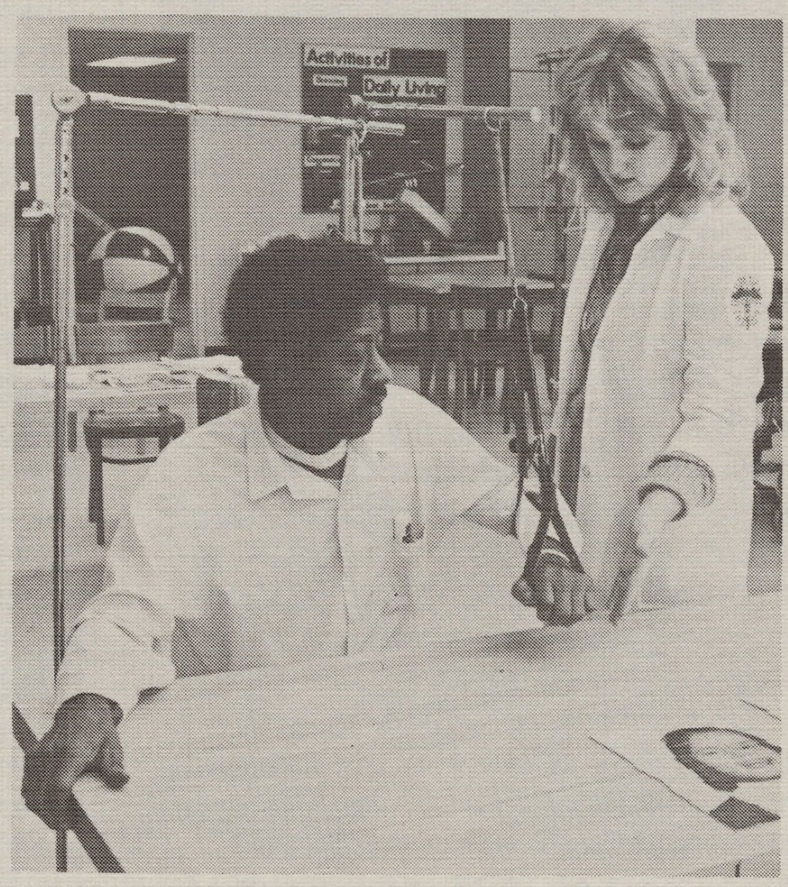
Patience, understanding and dedication. These are the traits that help make the Regional Rehabilitation Center such a special place for its patients — those who are referred from throughout the region, and those who arrive here down the long, connecting corridor from the Hospital's bed towers.

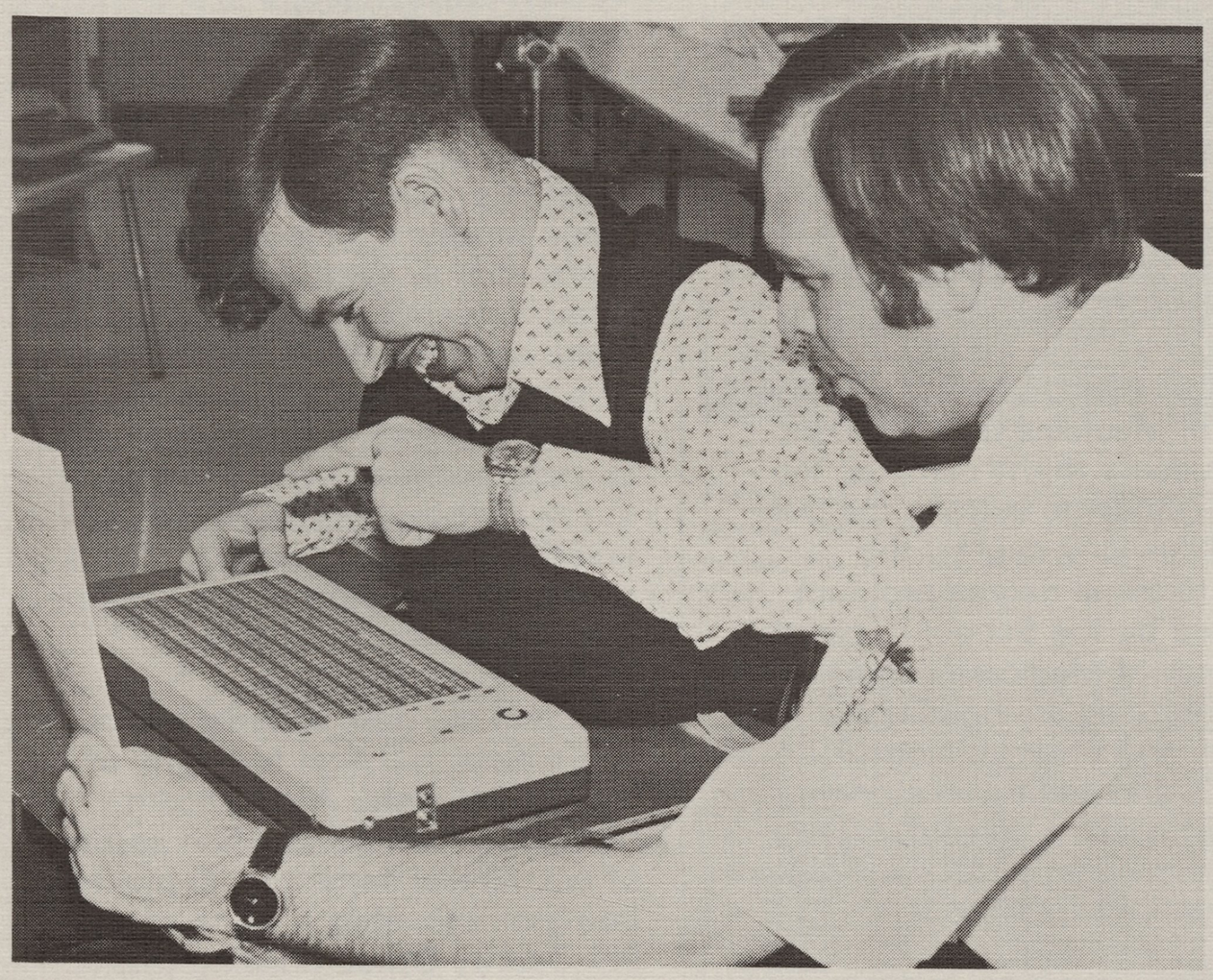
Statistical Summary

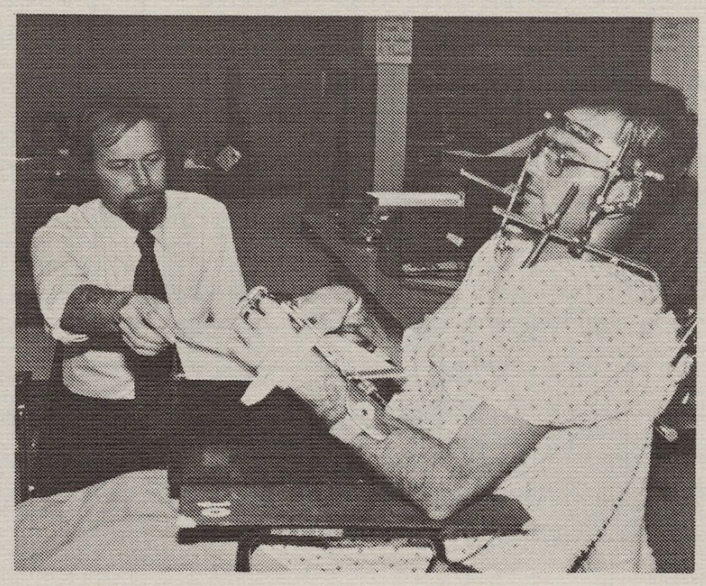
	1979	1978
Patient Admissions	430	339
Days of Care	13,327	9,111
Daily Average	37	25
Average Length of Stay (Days)	33	27
Average Age of Patient	51	50
Therapy Sessions	73,624	51,733


OCCUPATIONAL THERAPY

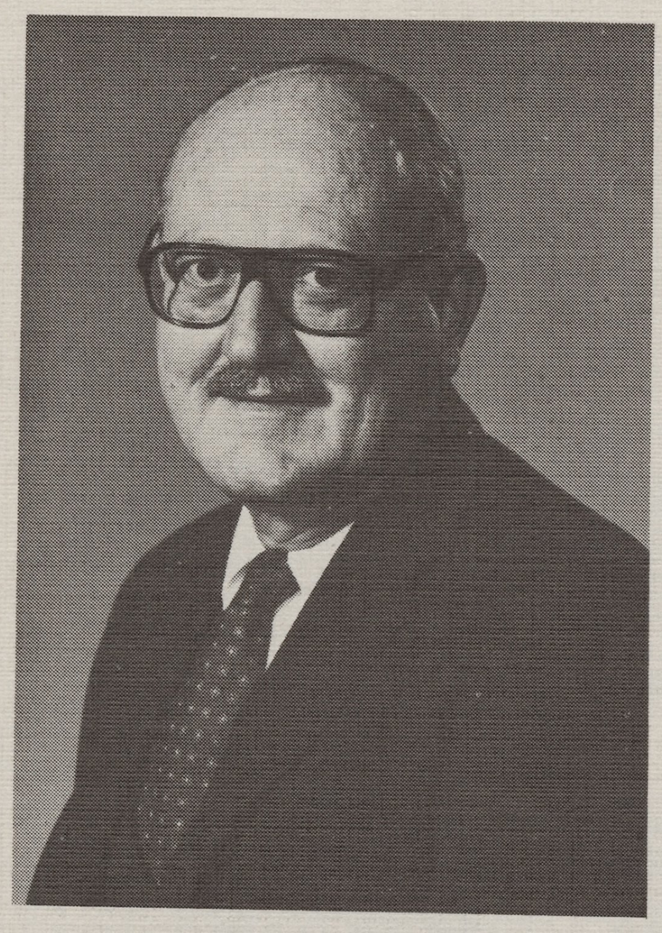



Activities of
Daily Living





Message from the ECU School of Medicine



Dr. William E. Laupus

The School of Medicine salutes Pitt County Memorial Hospital on its growth and expansion over the last 10 years. During this decade extraordinary developments have occurred, developments which literally have combined the separate assets of Hospital and School into the sophisticated regional medical complex now being referred to as the Medical Center.

One of the signal events which contributed to unity in the evolution of the Medical Center was the completion of the historic Affiliation Agreement of 1975. As a result of that agreement, chairmen of the School's clinical departments also became chairmen of their respective Hospital departments, establishing the mechanisms for the School's first input into the emerging Medical Center. Since then, the leadership of both the Hospital and the School have been seeking the most effective means of joining the dynamic forces of both institutions into appropriate educational and service programs for our community, region and state.

A look at the highlights of the past year illustrate the success of the union in many areas. The computerized tomographic (CT) scanner, the cardiac catheterization laboratory, the neonatal intensive care unit and the Regional Newborn Transport Ambulance service provide good examples of the School of Medicine's role in expanding available diagnostic and tertiary patient care services at PCMH. Last December, ground was broken to commence construction of the $5.3 million Bed Tower project which will add 166 beds to the Medical Center. The new tower is another step forward in the very unique relationship between the Hospital and Medical School.

1979 has been a very exciting and productive year for the School of Medicine. Our charter class of 28 students, now third-year clinical clerks, began their first rotations at the Hospital in July. In August, our third class, now numbering 40 students, all from North Carolina, began study here, raising our total enrollment to 105 students. Community rotations away from the academic Medical Center were initiated to provide broader clinical experiences for our students and residents.

East Carolina University and the School of Medicine have brought other students to the campus, too — graduate students seeking the Doctor of Philosophy degree, the second terminal degree program developed by the School to parallel the Doctor of Medicine degree. The Ph.D. programs are operational in Anatomy and Pharmacology in 1979-80, and additional students will be enrolled in these disciplines and in Biochemistry, Microbiology and Physiology in 1980-81. Total number of students in these graduate programs is expected to increase from 3 to 13 in September 1980.

Our service programs also have expanded. The new dental unit at the Eastern Carolina Family Practice Center in Greenville is a model in which dental residents receive training while attending to the needs of the center's patients, and the model pharmacy within the center dispenses medications and demonstrates appropriate patient education by example to medical students and family medicine residents. The availability of primary care in the region has been enhanced by the family practice satellite unit in nearby Bethel, a community previously served by only one physician.

The Medical School also continues its commitment to expanding medical knowledge through research, and our faculty has been supported in their endeavors this year by the National Institutes of Health, the N.C. United Way, the Public Health Service and other sources. Investigators in the Department of Pharmacology received a renewable $57,000 grant from a private pharmaceutical company to assist in the development of a new drug to reduce high blood pressure. This project represents a "first" inasmuch as no other academic institution has been involved in the direct development of a commercial product. In other projects, one of our microbiologists is using scorpion venom in the study of the pathogenesis of pancreatitis, and a pediatric investigator is exploring alternatives for a new vaccine against Hemophilus influenzae.

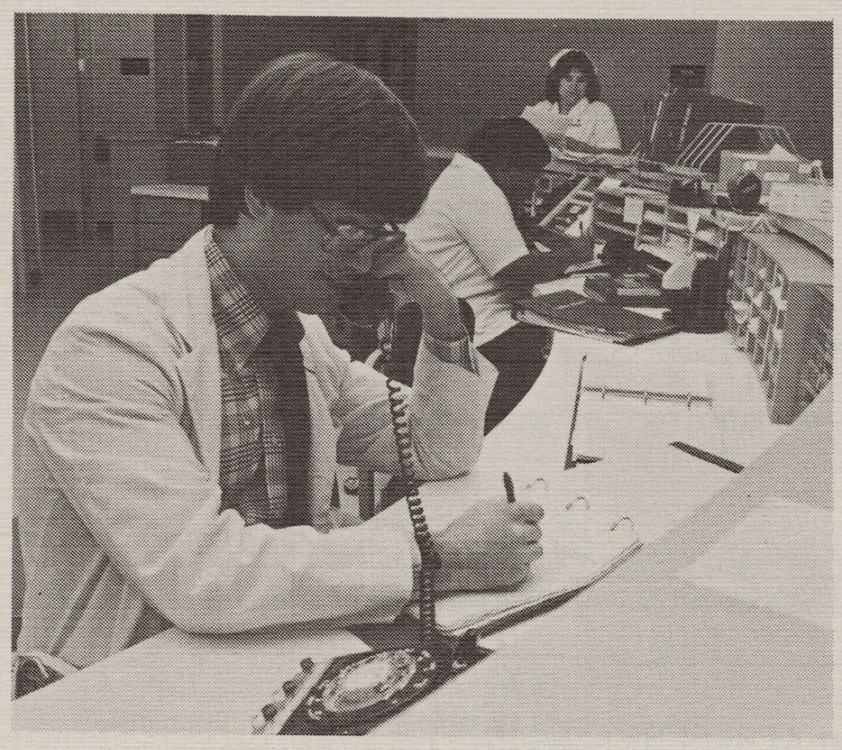
During the past summer major office moves occurred for many of our departments. A significant relocation took place when portions of our clinical departments moved into the renovated A-Wing of the Pitt County Office Building (old PCMH). It is here that patients referred to the School of Medicine are seen by faculty physicians and house staff in sub-specialty clinics.

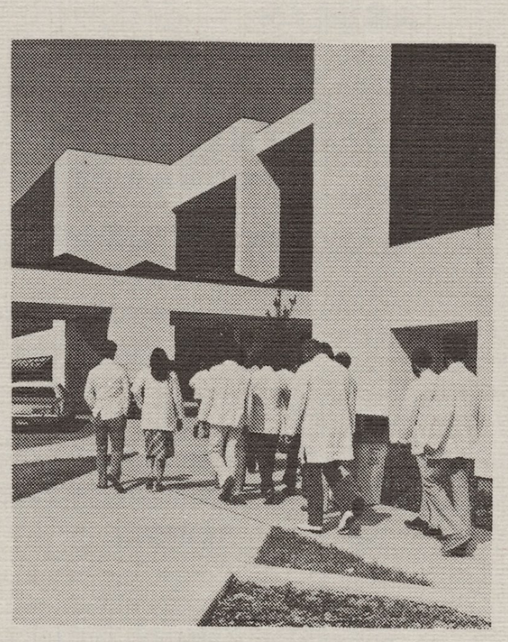
The Vivarium and Utility Plant, a $2.5 million construction project on the health science campus adjacent to the Hospital, opened at the end of the year. Business offices for the School moved into new quarters in the Hardy Building, and the Dean's Office moved into a new suite in the Hospital. We also fondly recall the groundbreaking ceremony for the Brody Medical Science Building, which the Medical School will occupy in 1981-82.

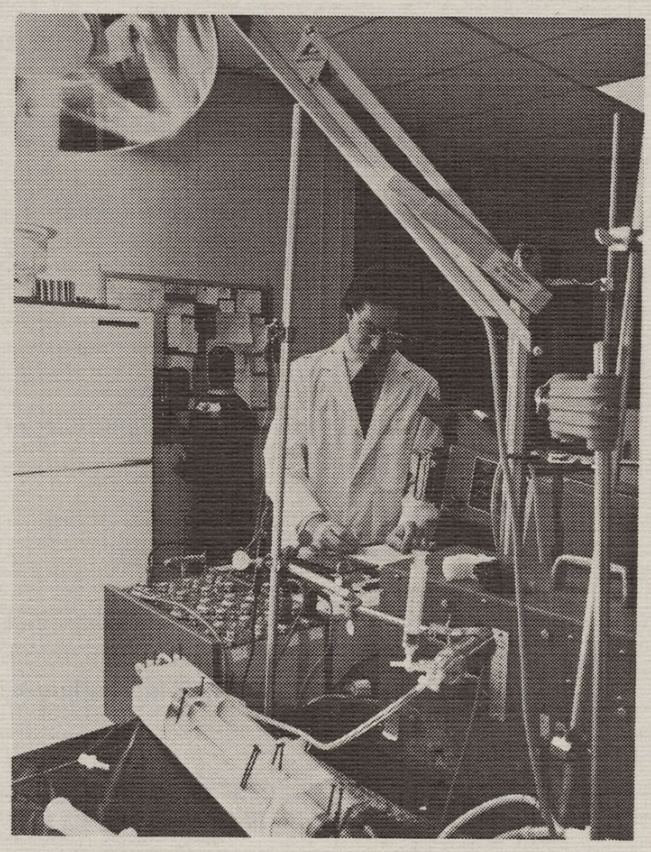
In other areas the Office of Health Services Research and Development was established to conduct on-going research and data collection activities on health care delivery in the region. This office assisted the local broadcast media in developing weekly health education programs for both radio and television. The Department of Surgery developed a unique training program for emergency medical personnel that takes the first step in establishing uniform EMS procedures for our 29-county area.

During the coming years, we will be establishing reciprocating linkages with hospitals and physicians throughout Eastern North Carolina, relationships which will expand the network of health care for the region by joining health services in the local communities and hospitals with the "back-up" resources of the Medical Center and its staff. The future for this Medical Center and its network looks very bright!

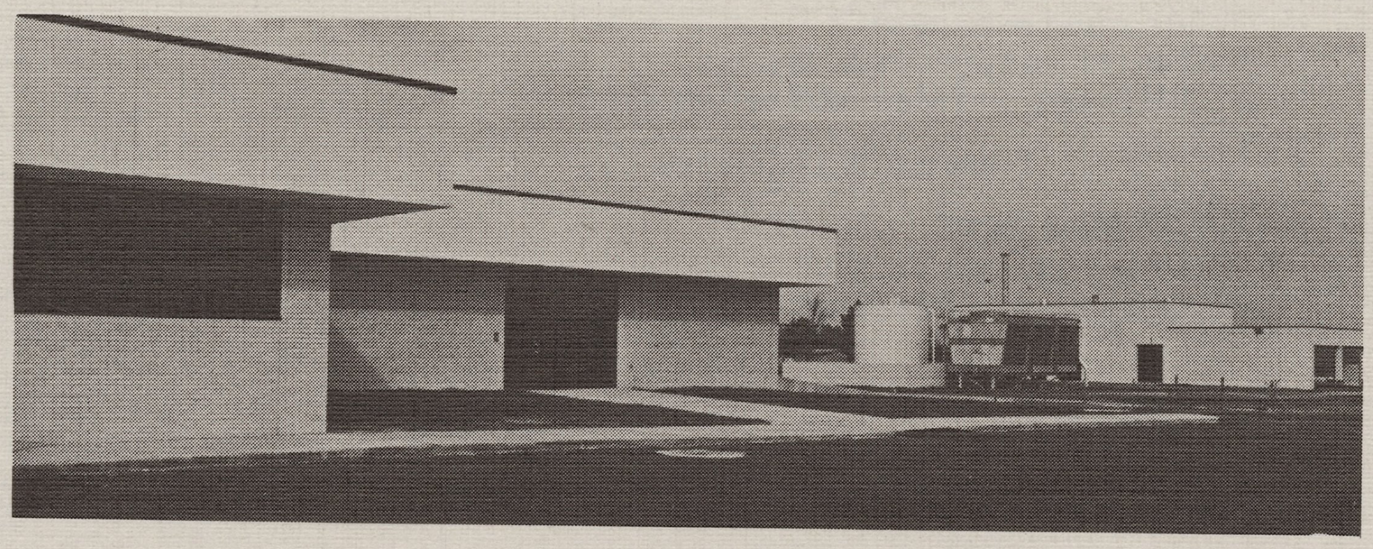
W Thompson







Progress at the new health science campus: Above, the Brody Medical Science Building; below, the Vivarium (foreground) and the Utility Plant.



Balance Sheet

ASSETS

	UNRESTRICTED FUNDS Year Ended September 30 1979	1978
CURRENT ASSETS		
Cash, including certificates of deposit	$ 921,369	$ 660,034
Accounts Receivable		
Patient	7,902,632	5,394,812
Less allowance for contractual adjustments and uncollectible accounts	2,585,254	2,213,634
	5,317,378	3,181,178
Medicare and Medicaid settlements	125,069	
Due from Plant Replacement and Expansion Funds	10,063	
Others	490,201	222,087
	5,942,711	3,403,265
Inventories, at lower of cost (first-in, first-out method) or market	606,185	416,496
Prepaid expenses	8,841	43,538
Total current assets	$ 7,479,106	$4,523,333
PROPERTY AND EQUIPMENT, at cost		
Land	$ 915,000	$ 194,010
Buildings	17,838,352	18,512,038
Equipment	3,475,112	2,507,544
	22,228,464	21,213,592
Less accumulated depreciation	2,133,891	1,036,809
	20,094,573	20,176,783
OTHER ASSETS		
Cash	1,058,868	350,291
Sinking Fund, held by Pitt County	169,212	143,400
TOTAL ASSETS	**$28,801,759**	**$25,193,807**

LIABILITIES AND FUND BALANCES

	UNRESTRICTED FUNDS 1979	1978
CURRENT LIABILITIES		
Current maturities of long-term debt	$ 125,500	$ 101,728
Accounts payable	1,472,679	693,774
Accrued expenses	1,810,730	989,607
Payroll withholdings payable	217,557	290,758
Medicare and Medicaid settlements	—	429,721
Total current liabilities	3,626,466	2,495,588
LONG-TERM DEBT		
Notes payable	169,122	150,807
Obligation to Pitt County under lease	1,769,583	1,829,583
	1,938,705	1,980,390
FUND BALANCE	23,236,588	20,717,829
TOTAL LIABILITIES AND FUND BALANCES	**$28,801,759**	**$25,193,807**

Income and Expenses

INCOME	1979		1978	
Inpatient Routine Services	$10,626,895	37.3%	$ 8,651,475	39.8%
Inpatient Ancillary Services	13,383,586	46.9%	9,850,752	45.3%
Outpatient Services	2,336,372	8.2%	1,834,153	8.4%
Nonpatient Income	2,168,683	7.6%	1,407,734	6.5%
TOTAL INCOME	**$28,515,536**	**100.0%**	**$21,744,114**	**100.0%**

EXPENSES				
Wages, Salaries, and Benefits	$12,891,623	45.3%	$ 9,580,332	44.2%
Materials and Supplies	5,582,702	19.6%	3,965,548	18.2%
Free Service, Bad Debts and Adjustments	2,976,886	10.4%	2,629,614	12.1%
Outside Services	1,611,026	5.6%	1,814,433	8.3%
Depreciation	1,115,947	3.9%	626,747	2.9%
Other	2,205,820	7.7%	1,791,632	8.2%
Funding for New Programs and Equipment	2,131,532	7.5%	1,335,808	6.1%
TOTAL EXPENSES	**$28,515,536**	**100.0%**	**$21,744,114**	**100.0%**

Statistical Highlights

	1979	1978
Number of Adult Beds	374	307
Number of Bassinets	42	42
Percent Occupancy	86.4%	81.6%
Patients Admitted	16,879	14,414
Average Length of Stay (days)	6.5	6.4
Deliveries	1,718	1,545
Total Operating Expenses	$25,364,839	$17,778,692
Total Patient Days	119,790	98,861
Expense Per Patient Day	$195.68	$179.84
Total Charity Days	14,451	11,400
Percent Charity Days of Care	12.08%	11.531%
Meals Served Patients	302,532	239,927
Cafeteria	295,590	222,853
Emergency Room Visits	26,530	25,809
Operating Room Visits	9,155	8,105
Recovery Room and AMSU Visits	9,055	8,088
Inhalation Treatments	40,582	34,570
Physical Therapy Treatments	28,892	24,282
X-Rays	48,571	45,975
Lab Testing	708,400	630,495
Hemodialysis Treatments	1,533	1,107
Volunteers Provided (Hours of Service)	7,954	10,795
Employees (Full and Part-time)	1,422	1,184

Message from the Gifts Foundation

The name may have changed through the years, but the mission of the Gifts Foundation has remained the same: to supplement the quality and delivery of health care services at Pitt County Memorial Hospital through the use of outside contributions.

It all started in 1972 when the Board of Trustees gratefully accepted a $30,000 donation from Burroughs Wellcome that eventually was used to equip the hemodialysis unit at the new PCMH facility. The Memorial Gifts Committee was organized that year, too, but the really big kick-off for outside support came in 1974 when the Gifts Committee sponsored a banquet to publicize their efforts and the Hospital's needs.

During 1979, the Gifts Foundation received $33,926 in pledges and disbursed $33,453 for new or continuing projects, which included the purchase of two bronchofiberscopes for surgical services, two Handi Voice units for speech therapy, and support equipment for recreation therapy and the hemodialysis and neonatal units. Landscaping in the courtyards was completed, and recently, new furniture was purchased for 50 patient rooms.

The donations received by the Gifts Foundation are priceless, and many of the rewards are intangible. They touch the lives of our patients in special and personal ways. And they help make the delivery of care at Pitt County Memorial Hospital more comfortable, expedient and complete.

Inspecting new furniture: From left, Joe Clark, William C. Glidewell, Jr., John S. Whichard, Leroy James, Kenneth Dews, G. Henry Leslie, and L. James Graham. Below, landscaping completed in courtyard.

Attending Staff

Anesthesiology
Dr. Clark Bright
Dr. Juliet Kim Song
Dr. Albert Warshauer
Dr. Jack H. Welch

Dentistry
Dr. M.W. Aldridge
Dr. Stephen Bartlett, III
Dr. Robert L. Capps
Dr. B.G. Clark, Jr.
Dr. J.M. Collie
Dr. Richard Evans
Dr. Jasper Lewis
Dr. D.R. Patrick
Dr. O.R. Pearce, Jr.
Dr. L.E. Ross
Dr. D.H. Taylor
Dr. William E. Tripp, Jr.
Dr. Alfred D. Warren
Dr. B.B. Warren
Dr. J.M. Williamson
Dr. Pinkney Young, III

Dermatology
Dr. John Hendrix
Dr. B.E. Jones
Dr. Cameron L. Smith

Diagnostic Radiology
Dr. William S. Trought

Emergency Medicine
Dr. Fred S. Girton
Dr. Roy W. Granes
Dr. Loftus Hengeveld, Jr.
Dr. Paul E. Horton
Dr. Dennis P. Kimbleton
Dr. Charles Larkin
Dr. John P. Michel
Dr. Harold D. Ocamb
Dr. Robert B. Sanchez

ENT
Dr. William S. Bost, Jr.
Dr. R.H. Knott
Dr. A.M. Mumford

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Dr. E.B. Aycock
Dr. A.A. Best
Dr. David L. Buch
Dr. Jack Carson
Dr. J.E. Dixon
Dr. James M. Galloway, Jr.
Dr. John H. Gambill
Dr. C.G. Garrenton
Dr. H.W. Hadley
Dr. M.D. Heizer
Dr. C.F. Irons
Dr. Lane E. Jennings
Dr. James G. Jones
Dr. Dan Jordan
Dr. Jack A. Koontz
Dr. Leonard E. Masters
Dr. Harry McLean
Dr. Q.A. Mewborn, Jr.
Dr. Julie A. Nickelsen
Dr. T.H. Patterson, Jr.
Dr. W.H. Pott
Dr. J.J. Smith
Dr. Richard Vaughn
Dr. John Voss
Dr. Joseph Ward
Dr. Jack Wilkerson
Dr. Alfred A. Woodworth
Dr. Harriet Wooten

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Dr. Allen F. Bowyer
Dr. Thomas Burkart
Dr. Peter Campbell
Dr. Jack K. Chamberlain
Dr. E.L. Fearrington
Dr. A.L. Ferguson
Dr. W.W. Fore
Dr. Eugene Furth
Dr. Alan K. Halperin
Dr. Yash P. Kataria
Dr. Paul W. Kendrick
Dr. Cyril S. Khanyile
Dr. Eurgia C. Land
Dr. Richard Marx
Dr. E.W. Monroe
Dr. Douglas F. Newton
Dr. Thomas F. O'Brien, Jr.
Dr. Lynn Orr
Dr. Patricia Penovich
Dr. Mary Raab
Dr. Spencer Raab
Dr. C.M. Ramsdell
Dr. C.H. Rand
Dr. John D. Rose
Dr. Sumiko Ts'Kamura
Dr. D.H. Tucker
Dr. W.H. Waugh

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Dr. J. Gregg Hardy

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Dr. Lynn G. Borchert
Dr. Robert G. Brame
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Dr. R.G. Deyton, Jr.
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Dr. Richard C. Taft

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Dr. D.W. White
Dr. S.M. White
Dr. Carl Wille

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Dr. G.E. Trevathan

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Dr. R.W. McConnell
Dr. Allen Taylor
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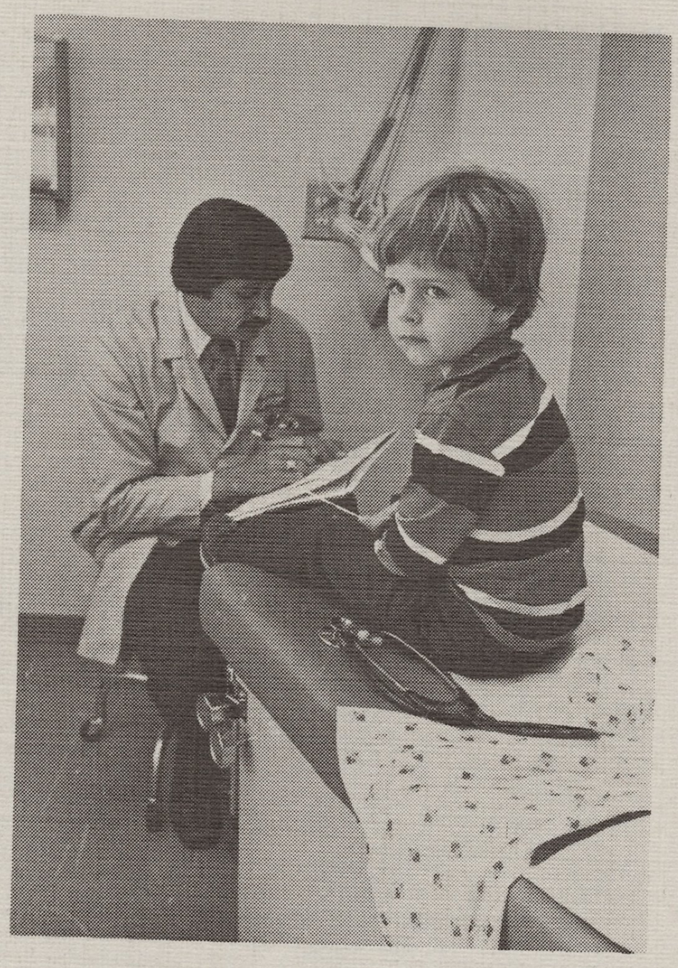
Dr. J. Bernard Vick
Dr. Kelley Wallace, Jr.
Dr. J.L. Winstead, Jr.
Dr. J.L. Wooten

Urology
Dr. Richard Gavigan
Dr. Edward O. Janosko
Dr. G.F. Salle
Dr. E.J. Walsh



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General Director

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Executive Director

Dave McRae
Associate Director
Rehabilitation and
Staff Services

Robert I. Barnes
Associate Director
General Services

Ralph Hall
Associate Director
Physical Plant

Jean Owens
Associate Director
Nursing Services

Betty Trought
Administrator
Nursing Services

Warren J. McRoy
Associate Director
Finance

T.B. Sitterson
Assistant Director
Finance and Safety

John Stallings
Assistant Director
Material Services

Craig Quick
Director
Personnel

Georgette F. Hedrick
Coordinator
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