



YEARS

WOMAN'S HOSPITAL FOUNDATION

2018 Annual Report





50 years.

- 50 years of babies taking their first breaths.
- 50 years of cancer survivors completing treatment.
- 50 years of being there when needed most.
- 50 years of improving health.
- 50 years of saving lives.
- 50 extraordinary years.*

Dear Friends,

Happy 50th Birthday!

Woman's Hospital is celebrating its 50th birthday this year, marking an incredible milestone for Baton Rouge and surrounding communities. Since its opening in 1968, Woman's has soared – expanding core services, adding new services and constantly striving for excellence as evidenced by its many national, state and local awards for quality and patient experience.

I am often asked about the secret to our success. The answer? Our team. Ingrained in our founding physicians' forward-thinking vision, their influence continues through the work of our compassionate and professional team who provide exceptional care every day. Volunteers' small acts of kindness are never forgotten, and donors make generous gifts that provide lifesaving care and needed programs that would not be available otherwise.

Woman's was built upon trials and tribulations, endless determination and an unwavering commitment to improving the health of women and infants – a commitment that continues to this day. Thank you for 50 extraordinary years and for your continuing support.



Teri G. Fontenot
President/Chief Executive Officer

Our history

1966



Construction contract signing

2012



Starting before dawn, 61 women and newborns and 60 NICU patients were relocated to the new campus on Move Day.



NICU patients leave the original campus and enter the new campus on Move Day. A critically ill infant successfully underwent surgery in the NICU operating room at the new campus just 10 hours into the move, highlighting Woman's successful planning and preparation.



Groundbreaking ceremony

In the post-war era of the mid-1950s, the “baby boom” was in full swing.

Though nearly 400 babies were being born each month at two area hospitals, several OB-GYNs recognized that obstetric care in Baton Rouge was not a priority. There had to be a better way.

In 1956, 21 local OB-GYNs began working to fundamentally change women's healthcare. Over the next decade, they planned, financed and built a hospital exclusively for women. And on November 18, 1968, Woman's Hospital opened as one of the first women's specialty hospitals in the nation. This new hospital was thoughtfully named “Woman's” to convey the physicians' commitment to treating each woman's individual and unique healthcare needs over the span of her lifetime.

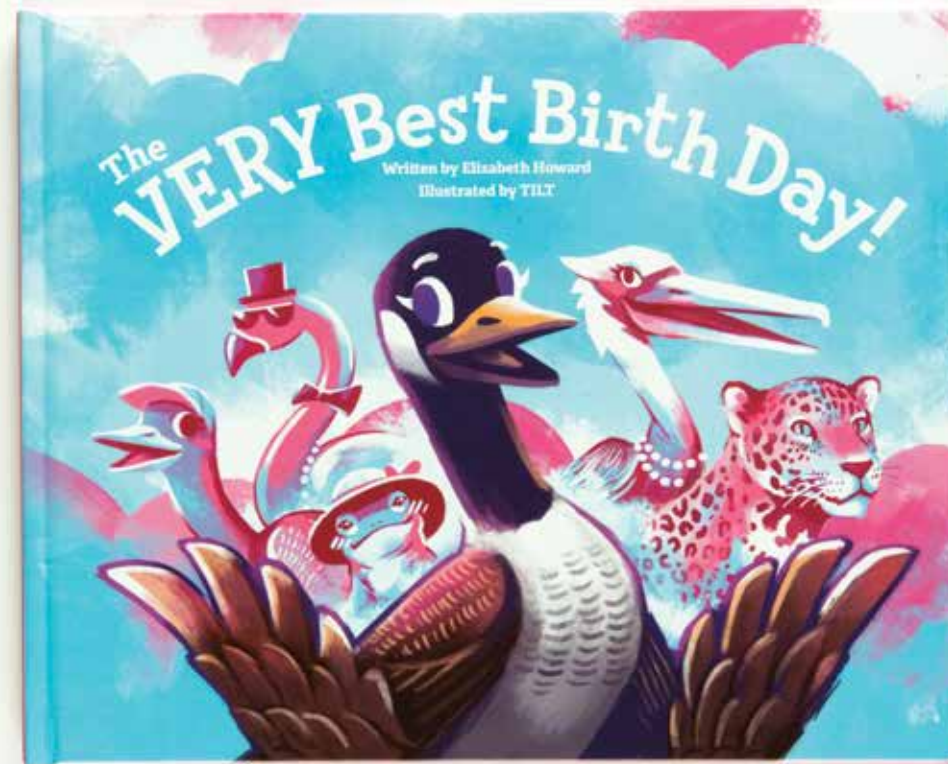
For the next four decades, Woman's Hospital grew tremendously. We no longer served only Baton Rouge, but a thriving region. By the end of 2005, every square inch had been expanded, rebuilt or remodeled at least once, and renovating the landlocked facility was no longer feasible. In 2008, Woman's broke ground on a new campus to allow for future growth, and on August 5, 2012, the new campus opened.

The Woman's Hospital you enter today was built upon trials and tribulations, endless determination and an unwavering commitment to improving the health of women and infants – a commitment that continues to this day.



WALL OF HISTORY

A permanent historical display was installed along the hospital's main corridor to mark Woman's 50 years of history. The display spans six walls, each focused on Woman's services and the role the hospital has played in the health of women and infants. Artifacts such as Pap test slides from the late 1950s and a hardhat from the groundbreaking at the original campus are encased in glass for viewing. The installation also features a real-time birth counter.



Children's book

To celebrate 50 years, Woman's released a hardcover children's book, "The Very Best Birth Day!"

With more than 350,000 babies born at Woman's since its opening in 1968, mothers know it is the best place to have a baby in Baton Rouge. But Mama Goose – a character created in homage to the feathered friends frequently found on Woman's campus – needs a bit of advice on where to make a nest. From the Old State Capitol to the LSU lakes, Mama Goose waddles her way through famous Louisiana landmarks and meets lots of colorful characters along the way, including a jiving jaguar at Southern University and a friendly frog at Bluebonnet Swamp. Every baby born at Woman's in November 2018 and every employee received a complimentary copy. Books are available for purchase in Woman's gift shop, and proceeds will be reinvested into the Foundation for Woman's. Copies were donated to libraries in East Baton Rouge, West Baton Rouge, East Feliciana, West Feliciana, Livingston and Ascension Parishes. The book was written by Foundation for Woman's employee Elizabeth Howard Kline.



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Births then

1979



Fathers accompany mothers into the delivery room

1980



Labor and Delivery room

1991



The Perinatology Center, now known as Maternal-Fetal Medicine, opened in 1991 to provide specialized care for high-risk obstetrical patients.

Childbirth today is not what it was 50 years ago.

In the 1960s, having a baby was a heavily medicated, isolated experience for mothers. Following birth, babies were whisked away to a nursery. Fathers were not allowed to be present during births, and paced the waiting room as they anticipated their baby's arrival. Mothers and newborns typically were in the hospital for up to five days.

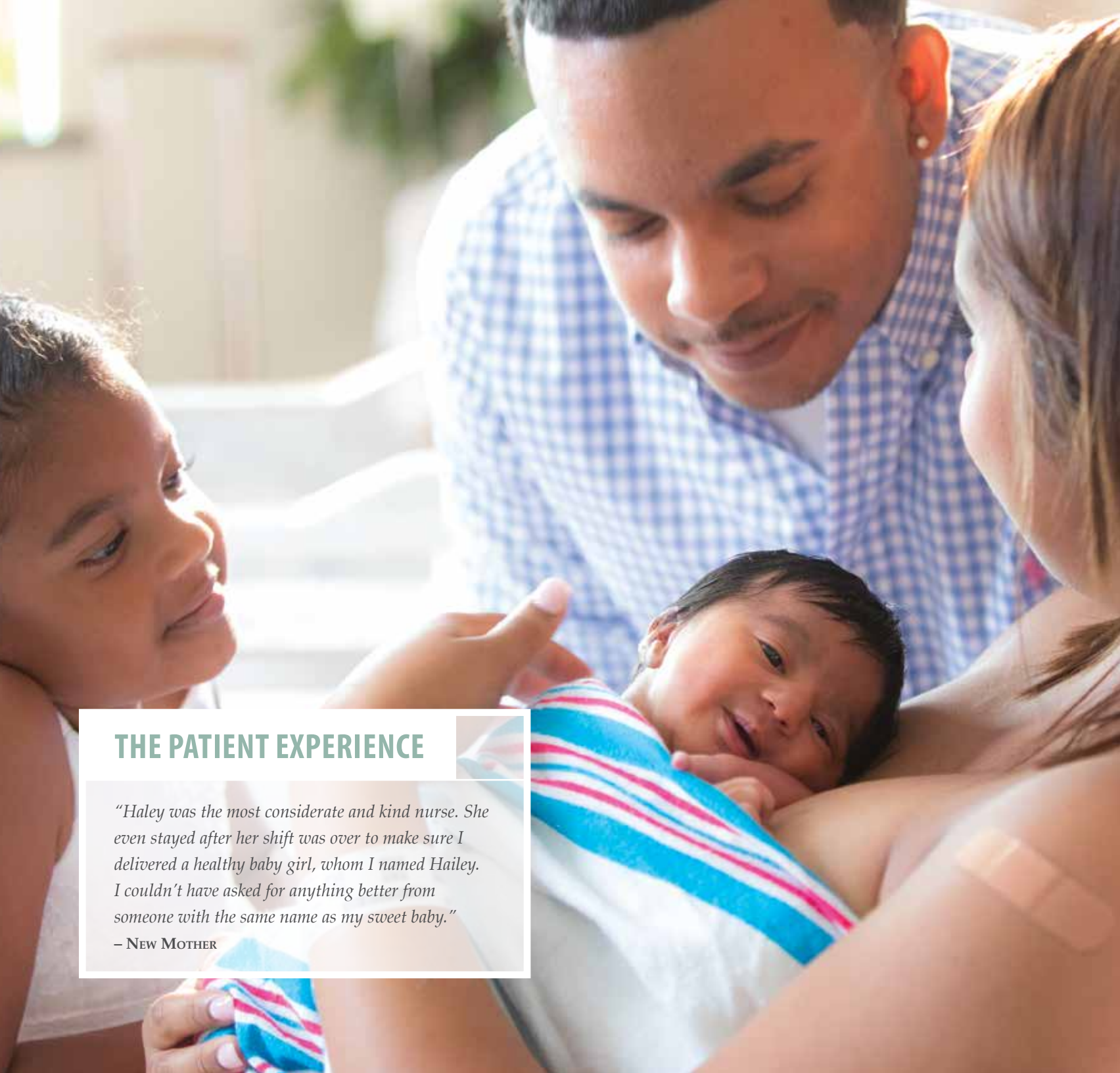
Still in its early years, Woman's quickly responded to changing times and women's evolving needs, including their desire to be more involved in their pregnancies and in caring for their newborns. The hospital began offering prenatal classes in 1974. Two years later, newborns remained in the mother's room during the day instead of going to a nursery.

The role of fathers shifted dramatically in the mid-1970s. By 1978, fathers were allowed to join mothers during vaginal deliveries. Within a month, 46 fathers had witnessed their babies' births – and none had fainted! Fathers were soon able to attend cesarean births.

In 1980, Woman's new Labor and Delivery unit opened as one of the largest and most modern in the country, followed in 1986 with the opening of the Family Birthing Center. The Family Birthing Center was an innovative concept and featured homelike suites where couples remained together during the labor, delivery, recovery and postpartal period. Babies also remained in the mother's room during the entire hospital stay.

In 1998, Woman's began featuring couplet care, a practice in which the same nurse cares for both mother and baby. In 2010, changes were made to C-section guidelines to keep mothers and infants together during and immediately after delivery to promote bonding.

Using more than 40 years of staff experience and patient feedback, Woman's designed rooms at its new campus, which opened in 2012, to keep today's patient comfortable while offering the highest quality and safest care.



THE PATIENT EXPERIENCE

"Haley was the most considerate and kind nurse. She even stayed after her shift was over to make sure I delivered a healthy baby girl, whom I named Hailey. I couldn't have asked for anything better from someone with the same name as my sweet baby."

– NEW MOTHER

Births today

Baby-Friendly Designation

More than three years ago, Woman's began its journey toward achieving Baby-Friendly designation from The Baby-Friendly Hospital Initiative, a global program of the World Health Organization (WHO) and United Nations Children's Fund (UNICEF) that recognizes and encourages hospitals that follow evidenced-based maternity care and breastfeeding practices. In 2018, Woman's became the 500th Baby-Friendly facility in the world and the largest in Louisiana.



500th

BABY-FRIENDLY FACILITY
IN THE WORLD

To achieve this designation, Woman's made significant changes to encourage breastfeeding. Free formula, bottles and other products promoting formula use are no longer accepted from companies; the hospital purchases infant formula at fair market value, and does not distribute free samples and coupons to patients. Woman's also implemented the "Wait on the Weight" initiative, which encourages a new mom to hold her baby immediately after delivery. During this continuous and uninterrupted bonding time, non-essential procedures such as weighing the baby are delayed. Skin-to-skin contact during this time is important because it facilitates the initiation of breastfeeding and promotes infant bonding.

Nursing documentation, patient care standards and physician orders were also reviewed, revised and implemented to support Baby-Friendly practices. Patient education changed as well. All materials, from booklets to brochures to advertisements to web pages, were revised to support Baby-Friendly best practices, including not giving pacifiers, food or drink other than breast milk to infants unless medically indicated. Mothers are educated on the benefits of breastfeeding and the importance of avoiding artificial bottle nipples, pacifiers and supplements unless medically indicated while breastfeeding is being established.

"I bottle fed my last three babies. I am glad I made the decision to breastfeed my fourth baby after realizing the benefits!"

– NEW MOTHER

Breastfeeding Callbacks

According to the Centers for Disease Control and Prevention, most mothers are not exclusively breastfeeding or continuing to breastfeed as long as recommended. Issues with lactation and latching are cited as major reasons why mothers stop breastfeeding early; many women face low milk supply or breast/nipple pain, and some babies have difficulty latching or maintaining latch.

The first few days after bringing a baby home from the hospital can be some of the most challenging for a breastfeeding mother. In an effort to support breastfeeding, mothers now receive follow-up phone calls between two and four days after discharge. This proactive measure helps staff determine if further evaluation is needed to help a woman continue breastfeeding, and reminds her of breastfeeding resources, such as Woman's breastfeeding support group.

"I'm so grateful that someone called to check on my baby's breastfeeding. I was about to call with questions and concerns."

– BREASTFEEDING MOTHER

On-Site WIC Support Person

The Special Supplemental Nutrition Program for Women, Infants, and Children (WIC) provides nutrition benefits and breastfeeding support for low-income mothers and infants. A peer support person is now on site at Woman's to support breastfeeding WIC participants and work in tandem with Woman's lactation staff. In her role, she provides breastfeeding assistance, encouragement and education. She is also able to certify WIC-eligible applicants at the bedside as well as refer to WIC's Breastfeeding Peer Counselor Program.

Virtual Lactation Consultations

To make breastfeeding consultations more convenient for busy mothers, Woman's introduced virtual lactation consultations. The service, called "BreastTime," allows women to video chat with certified lactation nurses through mobile devices in the convenience of their own homes. During a one-hour BreastTime consultation, a certified lactation nurse provides guidance for breastfeeding concerns and challenges. Many healthcare organizations across the country provide telehealth services, but Woman's is one of the few hospitals in the country providing telehealth specifically for at-home breastfeeding consultations.

"I am thankful for all of the lactation help. Yesterday, we could only syringe feed him. I'm glad he has not received any bottles."

– BREASTFEEDING MOTHER

Family-to-Family Network

Woman's launched the Family-to-Family initiative in 2017 to support the additional needs of adoption, surrogacy and other unique families. The program provides comprehensive training for staff to improve caregiver sensitivity, understanding and skills.

Training and education continued this year and addressed principles of neutral compassionate care, such as recognizing personal perceptions and biases, learning about modern practices, and using updated language with patients and families. A multidisciplinary task force was created to identify potential barriers for patients and families, such as engaging them in creating a birth plan.

The program also focuses on policies, paperwork and workflows to meet complex needs. For example, with the birth mother's consent, an infant can be discharged directly to the prospective adoptive parents as opposed to the attorney or adoption agency.

Family-to-Family focuses on connecting to community partners to create a network of resources for families. Plans include providing education to community partners and physicians about the program and associated processes.

"My husband and I traveled from out of state to adopt our son, who was born at Woman's. His birth mother, and our new dear friend, was treated with the utmost care and respect. Our first Labor and Delivery nurse broke the ice many times with her wonderful humor, and even visited two nights later when she was back on duty. The baby nurses were just wonderful! They took great care of our son and respected the uniqueness of our open adoption. We were given a Mother/Baby room right next to our birth mom, which was an incredible blessing. Our first night nurse helped us through the awkwardness of 'sharing' time. This is our first adoption, and the staff was such an answer to our prayers. We're so grateful for their care and for treating us so wonderfully as guests."

– NEW MOTHER ADOPTING A BABY

NICU then

1970



1989



In the early days of NICU care, the only way to determine a baby's blood oxygen level was by pricking his heel; no adjustments to the incubator could be made without performing this painful and time-consuming task, which could occur up to eight times each day. In the late 1980s, the pulse oximeter was introduced to painlessly and consistently monitor oxygen levels. Retinopathy of prematurity, an eye disease in babies caused by too much oxygen, sharply declined as a result.

2005



When the catastrophic Hurricane Katrina made landfall on the Louisiana coast in 2005, Woman's coordinated the evacuation of 122 premature and sick babies – many without their mothers because of the severity of their conditions – as well as pregnant and ill women from hospitals in New Orleans. Escorted by police, the neonatal transport team made several trips to the city by ambulance and helicopter to rescue infants, returning with stories of extreme heat, no electricity and limited supplies, medications, food and water. Families were brought together who had been separated for days. A shelter was set up so families could rest, eat and receive clean clothes. Woman's team ignored the clock and stayed as long as they were needed. In the weeks that followed, Woman's clinical care team treated more than 1,100 patients and delivered more than 150 babies from the affected areas – more than double as many critically ill babies as usual. Woman's again served as the official coordinating organization to manage emergency evacuations during Hurricane Rita one month later, and during Hurricane Gustav in 2008.

Technology has transformed care for critically ill babies.

Ask any nurse who has worked in Woman's Newborn and Infant Intensive Care Unit (NICU) for a few years, and she will tell you just how drastically things have changed. Now, imagine how things have changed in Woman's 50-year history – before the NICU was even dubbed the NICU, and even before neonatology officially became a pediatric subspecialty.

Those who cared for critically ill infants in what was then called the "Concerned Care Nursery" in the early 1970s have witnessed extraordinary advances in breathing support for premature babies. In 1972, Woman's had only three incubators to control oxygen, temperature and humidity. A new NICU was unveiled in 1992 and featured 46 beds, respiratory care, pathology lab support, and an isolation area for readmitting babies.

By 1995, a helicopter transport service for high-risk mothers and critically ill infants was established. That same year, Woman's NICU operating room opened, one of only a few in the country dedicated to infant surgery and located within a NICU. In 1998, the hospital joined the Vermont Oxford Network, the first large-scale initiative to develop a clinical database and create best practices that hospitals worldwide would use to improve the care of critically ill infants.

Perhaps the most monumental shift in NICU care came in 2012 when Woman's new campus opened. The design reflects Woman's core belief that neonatal intensive care should be centered on an infant's individual needs; all rooms are single-family, which were designed to feel like a baby's nursery so parents can bond with their baby just like they would at home. This setting allows parents to stay overnight with their baby in the days, weeks and even months ahead. It also decreases noise, reduces infection, and allows staff to tailor care to each baby's needs. Eleven new rooms, including a room for triplets, were added in 2017. The unit is the largest in the state at 84 beds.



THE PATIENT EXPERIENCE

“The staff at Woman’s is incredible. They are compassionate, patient and determined. They make me feel included in my daughter’s care; at first I thought I couldn’t be a parent, being that she is hooked up to all those machines and monitors, but I was mistaken. I can bathe her, check her temperature, change her diaper, and do Kangaroo Care. I can’t thank the staff enough for their hard work and wonderful support throughout my NICU stay.”

– MOTHER OF NICU PATIENT

NICU today

New Program for Pregnant Women with Opioid Use Disorder

The opioid epidemic has caused devastating consequences throughout our country, including a sharp increase in opioid-related overdoses as well as the rising incidence of newborns experiencing withdrawal syndrome due to opioid use and misuse during pregnancy. As both the largest birthing hospital and the largest NICU in Louisiana, Woman’s is in a position to be a part of the solution to this problem and impact Louisiana’s families in a meaningful way.



\$1.2 million

GRANT FROM THE UNITED HEALTH FOUNDATION

Through a three-year, \$1.2 million grant from The United Health Foundation, Woman’s launched a new program that will address the needs of pregnant women with opioid addiction and their affected newborns.

The GRACE (Guiding Recovery and Creating Empowerment) Program supports expectant mothers by providing comprehensive care coordination services specific to their needs during and after pregnancy. The program works with physicians, social service agencies, hospitals, mental health agencies, the legal system and other community partners to identify expectant mothers affected by opioid misuse, and connects them to the appropriate resources to aid in their care and recovery.

GRACE aims to reduce stigma and bias surrounding addiction and medication-assisted treatment, provide education and training to hospital staff, and decrease the number of Newborn and Infant Intensive Care Unit (NICU) admissions and length of stay. Once admitted into the GRACE program, patients will participate in a comprehensive assessment to evaluate their medical, mental health and psychosocial history. Participants work with a care provider to develop a care plan specific to their needs, followed by education on medication-assisted treatment, what to expect in labor, breastfeeding, Neonatal Abstinence Syndrome (NAS), safe sleep, safe medication storage and more. As participants move through the program, they receive regular phone follow-ups and may receive community resource support for housing, food, transportation, education and job training.



Baton Rouge Mayor-President Sharon Weston Broome, Woman’s Hospital President and CEO Teri Fontenot, Louisiana Gov. John Bel Edwards, UnitedHealthcare Community & State CEO and United Health Foundation board member Heather Cianfrocco and Louisiana Department of Health Secretary Dr. Rebekah Gee announced the grant at Woman’s.

Breast Cancer then

1985



Breast Center opens

1994



World renowned geneticist Mary-Claire King discovered the first gene for hereditary breast cancer, now known as BRCA1, in 1990. Her relationship with Woman's started in 1994 to study inherited breast cancer in Louisiana; this was Woman's Health Institute's first research study. Woman's also supplied tumor tissue samples for use in her research to determine the role of BRCA1 mutations in non-inherited cancer.

2017



Woman's Mammography Outreach Program began in the mid-1990s when an alarming pattern of higher breast cancer rates in rural and underserved areas emerged. Thousands of women lived in parishes with no access to mammography. Woman's outfitted two vans with mammography equipment and drove them to local businesses, churches and community centers. Woman's first mammography coach went on the road in 2005. Demand grew significantly, and in 2017, an additional coach was added to offer 3D mammograms throughout the 21-parish area that is served.

Every day, 120 women receive a mammogram at Woman's.

In the early 1970s, Woman's was performing about two mammograms per day. Mammograms were only performed for women who had a lump or other symptom of breast cancer, and not as a method of detection. That changed in 1973 when the results of a major clinical trial in New York demonstrated a statistically significant reduction in breast cancer deaths among women who received mammograms.

Mammography as a screening tool began to grow, as did awareness of breast cancer as a major public health problem. Woman's opened its Breast Center in 1985 and performed 3,000 mammograms in its first year, emerging as an advocate for early detection and breast cancer awareness. Today, Woman's performs more than 46,000 breast procedures each year.

Radioactive tracers, which are injected to identify cancerous nodes, were the first in a series of technological advances in diagnostic breast imaging to be added in the late 1990s. This approach meant that women had the potential for less invasive surgery and thus a lower risk of lymphedema, or swelling in one or both arms.

In 2003, the Breast Center began using Computer-Aided Detection, which provided an additional review for detecting breast abnormalities. In 2005, mammography services were upgraded from film technology to digital.

3D mammography was introduced in 2014. This technology detects smaller breast cancers earlier by producing more than 120 one-millimeter thin images of each breast, compared to four images with routine 2D mammography. These additional images allow for greater accuracy in pinpointing the size and location of abnormalities, reducing the need for additional testing or biopsies.

Breast Cancer today

The Breast and GYN Cancer Pavilion

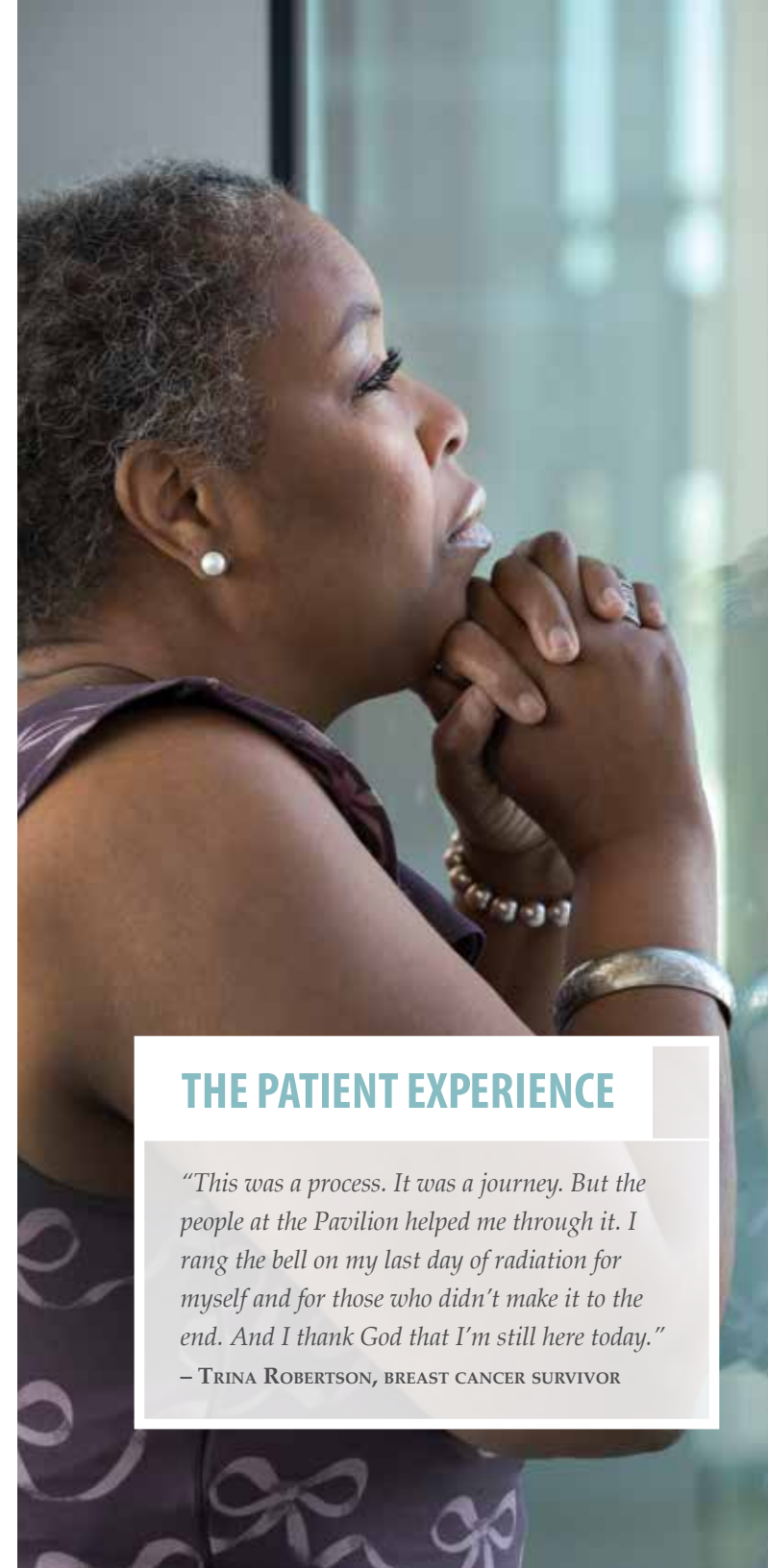
After several years of planning, the Breast and GYN Cancer Pavilion opened on Woman's campus in spring 2018. In partnership with Woman's Hospital and Mary Bird Perkins-Our Lady of the Lake Cancer Center, the Pavilion is the only one of its kind in the country and enables women to receive the highest level of breast and gynecologic cancer care. Patients are cared for by collaborative teams of medical and radiation oncologists, surgeons, radiologists, pathologists, research staff, nurse navigators, geneticists, nutritionists and social workers from three organizations.

The technology at the Pavilion is unparalleled; a highly advanced digital linear accelerator enhances precision, but with less radiation exposure and a shorter treatment time. Custom beam-shaping technology is used in conjunction with the accelerator to further enhance precision and spare normal, healthy tissue. New technology also includes real-time tumor tracking and alignment as well as technology that blends PET and CT images into one image for greater accuracy in detecting small tumors and in identifying tumor boundaries, allowing for more targeted and concentrated radiation to save healthy tissue.

Intricate detail was involved in the design of the infusion center, which features 12 bays and four private rooms. A state-of-the-art clinical pharmacy is located within the infusion center for quick, safe delivery of chemotherapy medications. By having an onsite clinical infusion pharmacy, patients' wait times for infusions have been reduced from an hour or longer to approximately 20 minutes. The dedicated medical oncology lab adjacent to the infusion center makes having blood drawn before treatment more convenient and accessible.

Cancer Answer Call Line

Patients diagnosed with cancer have questions and need answers. The CancerAnswer Call Line is a new, free service from Woman's Hospital and Mary Bird Perkins-Our Lady of the Lake Cancer Center for women who have breast or gynecologic cancer. A team of professionals, including patient navigators, oncology-certified social workers and clinicians, offer guidance to ease the fear and anxiety for anyone diagnosed with breast or gynecologic cancer and their caregivers. Questions range from "What should I do before my first appointment" to "How do I get a second opinion?" The line is open to anyone at 225-215-7600.



THE PATIENT EXPERIENCE

"This was a process. It was a journey. But the people at the Pavilion helped me through it. I rang the bell on my last day of radiation for myself and for those who didn't make it to the end. And I thank God that I'm still here today."

– TRINA ROBERTSON, BREAST CANCER SURVIVOR

Combined Breast Cancer Surgery and Plastic Surgery

Oncoplastic surgery offers breast cancer patients satisfactory oncologic outcomes as well as improved cosmetic results. During an oncoplastic surgery, a breast surgeon and reconstructive plastic surgeon work together in the operating room to perform both a lumpectomy and breast reduction. The patient can undergo removal of her cancer and complete reconstruction in just one operation using the patient's own breast tissue – and go home the same day.

After the breast surgeon completes a lumpectomy, a plastic surgeon assesses remaining tissue and reshapes a smaller, more elevated and naturally rounded breast. If only one breast is treated for cancer, the other breast may be reduced during the same procedure to improve symmetry.

3D vs. 2D Mammography Trial

Woman's Hospital and Mary Bird Perkins-Our Lady of the Lake Cancer Center began enrolling women in the Tomosynthesis Mammographic Imaging Screening Trial (TMIST), a large, randomized trial that compares two FDA-approved types of digital mammography. Woman's and Mary Bird Perkins-Our Lady of the Lake Cancer Center are the only southeast Louisiana sites to offer this trial, which could impact breast cancer screening standards for future generations.

The trial compares standard digital (2D) versus tomosynthesis (3D) to determine which method results in a long-term reduction of breast cancer mortality. This research study is being conducted at leading breast cancer screening sites across the United States and Canada and will include 165,000 participants.

While you may think of Woman's as a place to have your baby, you may not know that our roots are actually in cancer detection.

Developed in the 1940s by Dr. George Papanicolaou, the Pap smear is a simple, effective way to screen for cervical cancer. Though the medical community was skeptical of the test, Dr. Cary Dougherty traveled from Baton Rouge to Paris to train directly under Dr. Papanicolaou and began to use Pap smears to diagnose many early cancers.

Dr. Dougherty established a cancer detection laboratory and donated the proceeds to Woman's, providing one of the funding sources to build the hospital. The Cary Dougherty Cancer Detection Laboratory, still in operation today, has processed nearly two million Pap tests since its inception. It is credited with helping Baton Rouge area women have one of the lowest cervical cancer mortality rates in the country.

While it had been detecting gynecologic cancer for two decades, Woman's began treating the disease in the late 1980s when there were very few options. But even then, Woman's was ahead of its time. Treatments for some gynecologic cancers were still years away, but the program's leaders knew those treatments were indeed coming – and they wanted their patients to be able to take full advantage when the time came.

Instead of discarding biopsies from patients' tumors, as most oncology programs did, their samples were saved. This meant that if a woman had a biopsy for gynecologic cancer in 1989, that biopsy could be used in 1999, or any point in her lifetime, to determine if her cells would respond to a new treatment.

In addition to cervical cancer, Woman's is also known for its expertise in treating ovarian, uterine, vaginal, vulvar, fallopian tube and peritoneal cancer.

GYN Cancer today

High-Dose Rate Radiation

High-Dose Rate Radiation for gynecologic cancer treatment, which allows for minimal exposure to healthy tissue using a device that delivers a high dose of radiation directly to the tumor site, is available in a dedicated suite in the Breast and GYN Cancer Pavilion that keeps the patient in one area for the entirety of her procedure.

National Cancer Institute Collaborative

Woman's is a member of a statewide collaborative through the National Cancer Institute (NCI) that includes Mary Bird Perkins-Our Lady of the Lake Cancer Center, LSU Health Sciences Center – New Orleans and LSU Health Sciences Center – Shreveport, collectively known as the Gulf South Minority Underserved NCI Community Oncology Research Program (GS-MU-NCORP). GS-MU-NCORP was competitively selected by the NCI for this initiative in 2014 to improve cancer treatments in Louisiana through clinical trials, especially for underserved populations.

THE PATIENT EXPERIENCE

"When you have cancer, it's important to surround yourself with positive people. That's what I encounter every time I go to the Pavilion for treatment. The people who care for me are always smiling and helping me through the tough times. I look for them, and they look for me."

– JANE CIA GODCHAUX, GYN CANCER SURVIVOR

Surgery then

1971



A surgical suite in 1971

2008



With sophisticated cameras and robotic arms operated by physicians, the da Vinci® surgical robot provides doctors easier access to operate, but without the need for open incisions.

How have incisions changed over the years?



Size of open-surgery hysterectomy incision, 1960s



Size of robotic hysterectomy incision (one-fourth inch), 2007

Three surgeries were successfully performed at Woman's on its very first day of operation in 1968.

Since that time, technology has completely changed the way surgery is performed. As the years continued, techniques have evolved from open surgery to laparoscopic, or minimally invasive, surgery to highly advanced robotic surgery. The result is less pain, faster recoveries and better outcomes.

As our first obstetric patients matured, our services also evolved. In the late 1980s, services were added for women who wished to return to Woman's for general and cosmetic surgery. Woman's added colonoscopy services in 2008 to provide this lifesaving screening in a comfortable, private-room setting.

Breast surgery has changed dramatically over the past 50 years. Once a common treatment for breast cancer, radical mastectomies have been replaced with lumpectomies and partial mastectomies, which preserve the shape and feel of the woman's natural breast. Techniques have also changed; the Hidden Scar™ approach minimizes visible scarring by removing cancerous tissue through a single, inconspicuous incision, usually along the edge of the nipple or the underside of the breast. Reconstructive surgery after breast cancer has changed as well, with techniques such as the DIEP flap surgery, which uses the patient's own abdominal skin and fat to reconstruct a natural, soft breast after a mastectomy.

Woman's began performing fetal surgery in 2017. Fetal surgeons are skilled in highly complex pregnancy surgeries while the baby is still in the womb. The fetal surgery team performs surgeries to correct conditions such as twin-to-twin transfusion syndrome, spina bifida and congenital pulmonary airway malformation. It is the only program between Houston and Atlanta.

Surgery today

“After putting off my colonoscopy until I was 54 years old, I never expected it to be such an easy and pleasant experience. The nurses were great. I have recommended it to all my friends, male and female.”

— WOMAN’S FIRST MALE COLONOSCOPY PATIENT

Same Day Surgery Center

Women recognize Woman’s for its quality care, and often want to return for medical services after childbirth. To accommodate growing demand for same day surgeries, or short procedures, Woman’s new Same Day Surgery Center opened in December 2017 and includes four surgical suites and 12 private rooms. It features a daVinci™ robot as well as ultra high-definition 4K video technology for surgeons. The Same Day Surgery Center also features a designated patient drop-off and pick up area.

Common procedures performed at Woman’s Same Day Surgery Center include cosmetic and reconstructive surgery, gastroenterology (colonoscopy, upper and lower GI), general surgery, gynecology, minor breast procedures and more. Procedures are available to women and men.

Traceable Surgery Supplies

Standard surgical procedure nationwide involves manually counting and recording all cotton disposables going into and coming out of a patient. Though it is rare for gauze, sponges or towels to be left in the body after surgery, mistakes can occur and result in severe medical complications such as infections, adhesions and obstructions, or additional surgery. Furthermore, additional surgery is required to retrieve an RSI.

Woman’s was the first hospital in Baton Rouge to use disposable cotton sponges, gauze and towels, which are embedded with a tiny radiofrequency tag that can be detected before surgery is complete with a wand using low-frequency, non-ionizing radio waves. If a sponge is left in the body, it will transmit a signal back to the device, alerting staff of the item’s exact location. This technology decreases the risk of leaving surgical items in patients.

Enhanced Recovery After Cesarean

A cesarean section is a major surgery that involves a longer recovery than typically experienced with a vaginal delivery. This extended recovery often requires use of narcotic pain medication as well as a longer time period before ambulation. Normal gastrointestinal function is also disrupted. C-section patients at Woman’s are now benefiting from a process called ERAS, or enhanced recovery after surgery.

As part of ERAS, non-opioid medication is used to reduce risks or side effects. Maintaining normal gastrointestinal function before and after surgery is more likely with fewer opioids. The potential for breathing difficulties is reduced, and long term opioid abuse is less likely. Earlier mobilization after surgery enhances circulation, reducing the risk of clotting and promoting proper wound healing.

The enhanced recovery process begins in the obstetrician’s office with education about proper fluid intake and discussions on pain management. The mother’s nurse initiates the ERAS process when she arrives at the hospital. Patients receive long-acting pain medication during surgery, which lasts for up to 24 hours. Ibuprofen and Tylenol are given in the recovery room along with fluids and a small amount of food. The routine non-opioid medications continue in conjunction with ERAS guidelines, which also include earlier removal of the urinary catheter, ambulation as early as 12 hours after surgery, and a bowel medication regimen.

Early results show decreased narcotic use after C-section, benefiting moms and babies. The nurses and physicians in Labor and Delivery and Mother/Baby as well as lactation nurses and pharmacists worked together to develop this process, resulting in safer care.



THE PATIENT EXPERIENCE

“Surgery happens all the time, but it doesn’t happen all the time to you. Woman’s understands that surgery is not just about the procedure. It’s about the experience and feeling like you’re taken care of both physically and emotionally.”

— ASHLEY POLITZ, SURGERY PATIENT

Excellence at work

Press Ganey Guardian of Excellence

Woman's was named a 2018 Guardian of Excellence Award® winner by Press Ganey, a leading provider of patient experience measurement and performance analytics for healthcare organizations, for the fourth consecutive year. The Guardian of Excellence award recognizes healthcare organizations that have consistently performed in the top five percent among all Press Ganey clients for each reporting period during the course of one year. The 2018 award recognizes Woman's patient satisfaction scores in both inpatient care and ambulatory surgery.

American College of Radiology Breast Imaging Center of Excellence

Advanced Imaging was designated a Breast Imaging Center of Excellence by the American College of Radiology's (ACR) Commission on Quality and Safety and Commission on Breast Imaging. In advance of the Breast and GYN Cancer Pavilion opening on Woman's campus in spring 2018, services that relate most closely to diagnosing and treating breast and gynecologic cancer were moved from the main hospital to a dedicated, newly built Advanced Imaging area.

The ACR recognizes breast imaging centers that have earned accreditation in mammography, stereotactic breast biopsy, breast MRI, breast ultrasound and ultrasound-guided breast biopsy. Peer-review evaluations, conducted in each breast imaging modality by board-certified physicians and medical physicists who are experts in the field, have determined that Woman's has achieved high practice standards in image quality, personnel qualifications, facility equipment, quality control procedures and quality assurance programs.

The Gift Redesignation

Woman's received The Gift (Guided Infant Feeding Techniques) redesignation to improve the health of women and infants by protecting, promoting and supporting breastfeeding. The Gift is designed to increase breastfeeding rates and hospital success by improving the quality of maternity services and enhancing patient-centered care.

The Louisiana Department of Health – Office of Public Health – Bureau of Family Health and the Louisiana Commission on Perinatal Care and the Prevention of Infant Mortality awards

The Gift designation to Louisiana birthing facilities that improve hospital practices and policies that are aligned with the Ten Steps to Successful Breastfeeding, which are internationally recognized, evidence-based maternity care practices from the World Health Organization and UNICEF's Baby-Friendly Hospital Initiative that have been proven to increase breastfeeding initiation and duration. Policy development, staff education, patient education and provision of discharge resources for breastfeeding mothers are key components of the program.

Performance Challenge Award

Woman's earned the Performance Challenge Award (Louisiana Performance Excellence Award – Level 1) from the Louisiana Quality Foundation. The awards program recognizes performance excellence leadership in both profit and nonprofit Louisiana organizations in the areas of manufacturing, service, healthcare, education and the public sector.

The Louisiana Performance Excellence Award (LPEA) criteria align with the Malcolm Baldrige National Quality Award Criteria, an internationally recognized standard for performance excellence initiated in 1987. There are three levels of participation, which are designed to support continuous improvement of applicant performance management systems, approaches and results. Level 1 is the beginning stage of Baldrige implementation and is structured to provide education and feedback to organizations committed to the principles of managing for performance excellence.

Best Places to Work

Woman's was recognized as one of the "2018 Best Places to Work in Healthcare" by *Modern Healthcare* magazine, ranking 6th. The award program includes an extensive employee survey to identify and recognize outstanding employers in the healthcare industry. Woman's was once again the only hospital in the Baton Rouge area to receive this recognition, and the only healthcare organization to be named to the national list every year since its inception in 2007.

Woman's was named one of the "150 Top Places to Work in Healthcare" by *Becker's Hospital Review* for the fifth consecutive year. This annual ranking recognizes hospitals, health systems and other healthcare organizations that are committed to fulfilling missions, creating outstanding cultures and offering competitive benefits to employees.

The Greater Baton Rouge Business Report named Woman's as one of the "Best Places to Work in Baton Rouge" in 2018. Woman's ranked 8th in the large employer category.



Fiscal year 2018

Fiscal year 2018 income from operations exceeded the financial plan by \$8.9 million, despite a slight decline in total patient days. Net patient revenue was .5% lower than budget, while expenses were 3.7% lower than expected.

Net patient service revenues were \$272.4 million, compared to \$217.4 million in fiscal year 2017. Woman's operating margin of 6.4% compares quite favorably to Moody's most recently published median for A2-rated hospitals of 3.0%.

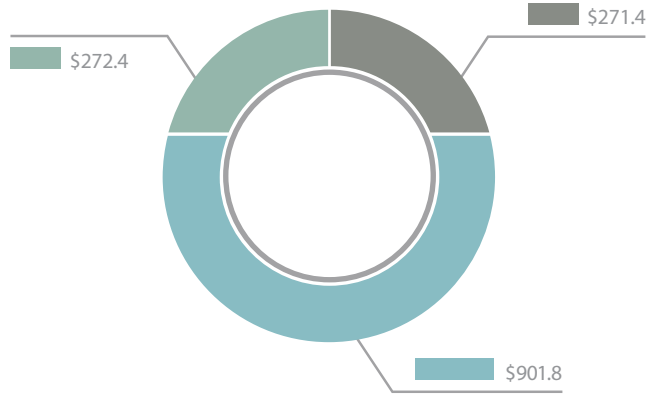
Woman's continues to experience a favorable payor mix, with commercial insurance representing 49.9% of gross patient revenue, a decrease of 3.5% over fiscal year 2017. Self pay patients represented 1.3% of gross patient revenue in 2018. The hospital received \$2.0 million in supplemental payments from its Low Income Needy Care Collaborative (LINCC) agreement with the state. The program is designed to provide access to health care services for the poor and underserved.

Operating Margin* as a Percent of Revenues



*excludes unrealized investment income and loss on extinguishment of debt

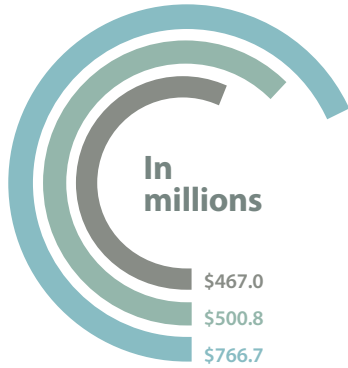
Net Patient Services Revenues (in millions)



Total Assets



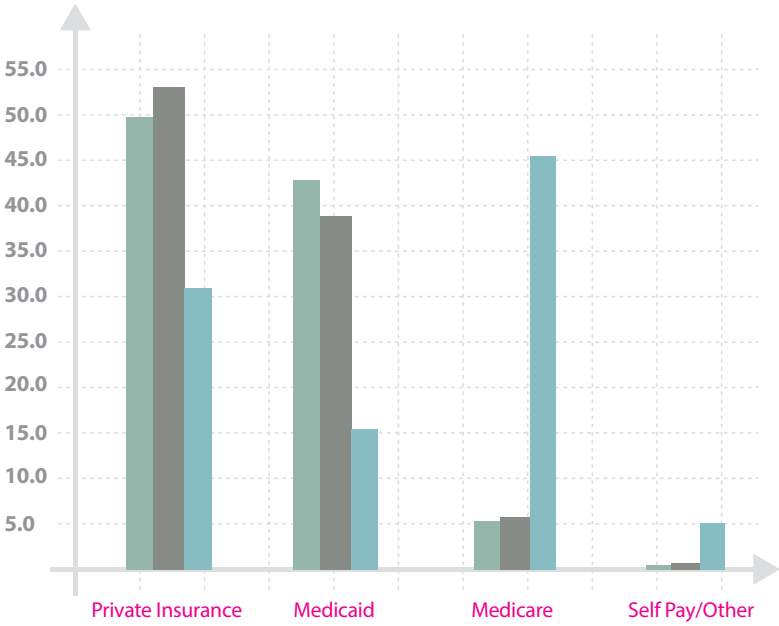
Net Unrestricted Assets



Salaries and Benefits



Gross Patient Revenue by Payor



FY 2018
FY 2017
Moody's median for A2-rated hospitals
(source: Moody's Investors Services, 2017)

The median operating margin is 3.0% for A2-rated hospitals. The median net patient service revenues of A2-rated hospitals is \$752.7 million. The median value of net assets of A2-rated hospitals is \$553.3 million. The A2-rated hospital medians are shown for comparison to the payor mix for Woman's Hospital. Source: Moody's Investors Services, 2017 Medians

FY 2018 FY 2017

Adult Admissions	9,778	10,099
Adult Average Length of Stay	2.81 days	2.82 days
Adult Patient Days	27,483	28,455
Births	8,097	8,295
NICU Admissions	1,179	1,172
NICU Average Length of Stay	19.52 days	19.45 days
NICU Patient Days	23,010	22,799
Neonatal Transports	68	78
Maternal-Fetal Medicine Visits	10,705	12,528
Surgeries	7,607	7,147
Pap Smears	55,494	59,397
Breast Procedures	45,402	42,076
Other Outpatient Services	613,340	622,834

2018 Community Benefit Programs

Providing Benefits for Persons Living in the Community and State and Living in Poverty

Unreimbursed Cost of Medicaid Program	\$29,932,000
Charity Care	\$3,031,000
Subsidized Health Services	
Unreimbursed Cost of Hospitalists	\$4,492,000
Emergency Services and Clinical Consultation	\$2,120,000
Subspecialty Clinics	\$789,000
Lactation Services	\$664,000
HIV Case Management	\$29,000
Community Education	\$332,000
Support of Other Community Service Organizations	\$102,000
Care for Victims of Sexual Assault	\$48,000
Un-sponsored Research	\$296,000
Total Financial Support	\$41,835,000

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Woman's Hospital Foundation

Woman's is a nonprofit organization that opened in 1968 and was founded by obstetricians and gynecologists who envisioned a hospital that specialized in medical care for women and infants. **The members of Woman's Hospital Foundation include physicians and community leaders who are dedicated to preserving the hospital's mission.**

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Foundation for Woman's

"To walk these halls today (1986) and see the happiness the hospital has brought to our patients is reward enough for those of us who had a hand in its creation."

- An excerpt from *The Building of the Woman's Hospital* by Julius Mullins, MD, founder



Foundation for *Woman's*

The mission of the Foundation for Woman's is to raise philanthropic support to improve the health of women and infants at Woman's. The foundation has made it a priority to address profound problems in the community that affect women and babies, including infant prematurity, sexual assault care, HIV/AIDS transmission prevention, access to breast cancer screenings and more.

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The Woman's Impact Luncheon is an annual fundraising event hosted by Woman's Hospital. This year's luncheon raised nearly \$140,000 to eliminate barriers to care for prenatal health. Pictured at the Woman's Impact Luncheon are the Foundation for Woman's Board of Trustees Secretary Rose Marie Fife and Chief Philanthropy Officer Shon Baker.



For the past 17 years, Woman's volunteer Juanita Bozeman has been rocking, cuddling and singing to Woman's tiniest patients in the NICU. Juanita recognized the need for additional rocking chairs in the NICU and she and her son, Doug, provided Woman's NICU with a generous donation to purchase new rocking chairs.



Woman's Hospital has been offering total body cooling to infants for several years, but will now have updated equipment to continue performing the technique thanks to a generous donation by the John and Jan Valluzzo family. Pictured are Ransom Pipes, Nicholas Valluzzo, John Valluzzo, Jan Valluzzo, Celeste Valluzzo and Michael Valluzzo.



The BUST Breast Cancer bra art fashion show raised a record \$260,000 for Woman's mammography coaches. All of the models for this year's event were breast cancer survivors.

In recognition of the significant investment made by our partners in the health of our community.

Individuals, corporations and foundations whose contributions to Foundation for Woman's total \$1,000 or more (October 1, 2017 – September 30, 2018).

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Foundation for Woman’s is pleased to recognize donors for fiscal year October 1, 2017 – September 30, 2018. Despite our best efforts, errors and omissions may have occurred. If so, please accept our apology and notify Foundation for Woman’s, PO Box 95009, Baton Rouge, LA 70895-9009, 225-924-8720, giving@womans.org.

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Members of the Woman’s Impact Society have committed to donating at least \$1,000 per year for three or more years.

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 Teri G. Fontenot

Robert S. Greer
 Renée S. Harris

Frank D. McArthur
 Robert M. Stuart

Mission

To improve the health of women and infants.

Vision

By 2020, Woman's will be the national leader in women's and family-centered care, achieved through innovation, evidence-based practices, and strategic partnerships.

Values

***Respect** – Accepting and appreciating differences*

***Innovation** – Creating and embracing change to improve outcomes*

***Compassion** – Showing kindness to and caring for one another*

***Excellence** – Being the best at what we do*

Woman's 

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