Revolutionary advances in medical imaging technologies are initiating a new era in medical care. Today’s imaging instruments possess capabilities that were almost unimaginable just a few years ago. Highly sophisticated CT, MRI and PET/CT systems are making the human body virtually transparent, while new, image-guided techniques are transforming medical therapy. And patients reap the benefits. With these new and rapidly evolving capabilities, physicians can see inside the body to diagnose disease in earlier, more curable states; more effectively monitor the course of treatment; tailor therapies to the individual patient; and even perform life-saving interventions that in the past could be accomplished only with surgery.

Hartford Hospital is committed to being at the forefront of the development, utilization and advancement of these leading-edge technologies and procedures.

“Very few places in the country have the spectrum of imaging technologies we have here at Hartford Hospital,” says Stuart Markowitz, MD, chairman of the Department of Radiology. “But, just as important, we have an extraordinary team of specialists and subspecialists—people with the expertise to use this technology to its full potential and combine it with vast medical experience and knowledge to provide outstanding patient care.”

The power of science. The art of healing.
The vision of Hartford Hospital.
The intensity of this nodule in the left upper lung on this combined PET/CT image indicates it is malignant.
Imagine being able to look inside the human body and immediately see a vivid glow exactly where cancer cells are silently threatening the body’s health. That’s precisely what physicians at Hartford Hospital can do with a sophisticated new instrument that is the only one of its kind in New England.

Ronald Rosenberg, MD, medical director of Clinical Nuclear Medicine, says that the GE Discovery LS is “a next-generation imaging system that combines PET and CT scanning to produce vivid, three-dimensional images that reveal, with great accuracy, exactly where cancer is present and the extent to which surrounding tissues are involved.”

The instrument’s PET component shows where an injected radioactive material called $^{18}\text{F}$-FDG, which mimics glucose, accumulates in the body. Because cancer cells readily take up $^{18}\text{F}$-FDG, a tumor creates a bright glow on the image. The Discovery’s CT component provides a clear picture of all of the body’s structures.

“This new instrument superimposes the PET and CT scans to give us an image that is perfectly co-registered,” says Dr. Rosenberg. In doing so, it localizes and defines the tumor with precision never before possible.

“We’re able to see tumor size and location we could not see by any other means,” Dr. Rosenberg notes.

Doctors can use this information to precisely target radiation therapy, accurately guide biopsies, make informed decisions on the advisability of surgery and monitor the tumor to be sure that treatments are eradicating the cancer cells. It’s also effective at detecting cancer recurrences early.

The combined technology makes the scanning process faster for the patient, because the CT component can rapidly perform critical calculations PET scanners take longer to do.

“A scan that would take 50 minutes on an ordinary PET scanner takes only 30 minutes with the combined PET/CT scanner,” explains Dr. Rosenberg. “And the calculations, which correct for individual variables, are done more accurately too, so the images are much better.”

Dr. Rosenberg says Hartford Hospital is proud to be the only facility in the region with this sophisticated capability. But the hospital has considered the human element, too.

“We were careful to place the scanner next to a large, sunny window,” he says. “We think all the light and sense of openness will make patients exceptionally comfortable.”
Three-dimensional CT scan of abdominal aorta and branch vessels. The spinal column is at back.

Narrowing of a blood vessel supplying the left kidney.
For victims of traumatic injuries, every second counts. The sooner emergency room staff can diagnose and treat severe injuries, the greater the patient’s chances of survival. But often, severe or life-threatening injuries aren’t readily apparent. That’s why Hartford Hospital’s Emergency Department routinely evaluates trauma patients using a dedicated CT scanner featuring the most sophisticated CT technology available in the world today.

CT’s capabilities have expanded dramatically in recent years. The newest instruments, known as multi-detector CT systems, can acquire a large number of images simultaneously and at very high speed. Doctors can look at large sections of the body quickly and in fine detail. And the images are made so rapidly that their quality is not diminished by motion, such as breathing, heartbeat or peristalsis.

“Technological advances in CT have revolutionized the way we evaluate the trauma patient,” says John Opalacz, MD, section chief of Body CT at Hartford Hospital. “We can now pick up things we never would have been able to image in the past.”

Using the CT scanner in the ER, doctors can now quickly check for damage to the aorta. In the past, the patient would have had to be moved to another department to have an angiogram.

“All of that typically took at least an hour,” says Dr. Opalacz. “The CT scan takes 20 seconds.”

Because bodily traumatized patients often can’t be moved, getting good X-rays of the spine is difficult. With the sophisticated CT scanner, doctors can easily reconfigure the scan’s thousands of images to construct a high-quality image of the entire spine.

“By manipulating the data from a single scan of the body, we can look at the aorta, spine, liver, spleen and other internal organs, without multiple procedures,” Dr. Opalacz notes.

CT benefits patients in countless other ways. It often eliminates the need for exploratory surgery by providing information necessary for definitive diagnoses. When surgery is required, CT helps doctors and patients know, in advance, exactly what to expect. CT is used to detect arterial calcification that can lead to heart attack, and it’s emerging as a noninvasive alternative to examining the colon. When combined with PET technology, CT is unmatched in pinpointing the location and stage of cancerous tumors.
MRA (Magnetic Resonance Angiogram) image shows large ballooning (aneurysm) in the abdominal aorta.
MRI has long been used to look at the anatomical structures within the body and examine the brain, the spine, the joints, and the heart and blood vessels, without radiation or invasive procedures. Recent advances in the speed and sophistication of MR technology now allow physicians to obtain extremely clear images of parts of the body they never could image before: the heart and the vascular (circulatory) system. Hartford Hospital spearheaded efforts to modify MRI technology to enable imaging of things in motion in the body.

Barry Stein, MD, chief of Cardiac and Vascular MRI and a member of the Vascular and Interventional Radiology Division at Hartford Hospital, notes, “Hartford Hospital is a research and development site for GE, the world’s leading producer of MRI equipment. So we have technology that’s not available anywhere else. People come from all over the world to see what we do here.”

Next-generation MR is replacing the invasive angiogram as the primary diagnostic tool in cardiac and vascular imaging. MRA is noninvasive and involves no radiation. It’s safe, fast, less costly and very easy on the patient. And it provides vivid images that show exactly what the problem is and where it is. With this knowledge, a physician can explain matters to the patient more clearly, develop a more effective treatment plan and obtain better health results.

Doctors can use MRA to pinpoint the location of blockages that may cause high blood pressure or pain in the lower extremities when walking. The resulting images give physicians a “roadmap” they can use to correct the problem with balloon angioplasty to open the blood vessels and stents to keep them open.

In the heart, MRI can detect coronary heart disease, tumors, anatomical defects and congenital abnormalities. It can even show the degree of blood flow to different areas of the heart.

“With today’s technology, we can get images that surpass any other imaging technique on the planet,” says Dr. Stein.

Dr. Stein says the close relationship between Radiology and Cardiology—and especially with interventional cardiologist Charles Primiano, MD—is unique to Hartford Hospital and further enhances diagnosis and treatment of cardiac patients.

Says Dr. Stein, “Medical professionals around the world admire this unique collaborative relationship.”

WHO BENEFITS
MRI is a valuable tool in diagnosing stroke, cancer, heart disease, arterial obstructions and more. When used to image the cardiovascular system, the technology is often called Magnetic Resonance Angiography (MRA).

WHAT IT DOES
MRI (Magnetic Resonance Imaging) uses a complex system of magnets and magnetic fields to enable physicians to see numerous parts of the body, including joints, the spine, the brain and—most recently—the heart and blood vessels, without radiation or invasive procedures.
Mid-procedural angiogram of the brain shows coils inserted into a large aneurysm, restoring normal circulation.
When a feeding artery to the brain is blocked by a blood clot, an individual suffers a stroke, which can lead to death or permanent disability. But, for some stroke victims, there is a small window of opportunity—about six hours—during which physicians may be able to remove the blockage and restore normal brain function.

New, image-guided, minimally invasive procedures being performed at Hartford Hospital’s Stroke Center represent the first time there’s been acute treatment available for patients in whom a blocked brain blood vessel is causing stroke.

“By inserting a small catheter into an artery in the groin and threading it up into the blocked blood vessel in the brain, I can dissolve or mechanically disrupt the clot, or even snare it and remove it,” says Gary Spiegel, MD, director of Endovascular Neurointervention and co-medical director of the Stroke Center.

The procedure is performed using a sophisticated angiographic X-ray unit, an imaging instrument that lets physicians see the blood vessels as they work. An even more advanced unit, which will give physicians a three-dimensional view of blood vessels, will be operational at Hartford Hospital in mid-2003 and will be the only one of its kind in the state.

These image-guided techniques are also used to reduce blockages in the carotid artery, which can lead to stroke.

“For some of these patients, surgery isn’t the best solution,” says interventional neuroradiologist Howard Young, MD, a member of Connecticut Surgical Group. “Using imaging and catheters, I can place a stent in the carotid artery to keep it open or perform an angioplasty.”

Dr. Young points out that Hartford Hospital is the only hospital in Connecticut using basket-like neuroprotective devices to prevent clots from causing strokes during carotid angioplasty.

Aneurysms, weakened outpouchings of the walls of arteries, can rupture and cause fatal bleeding. But with today’s endovascular neurosurgical techniques, Dr. Spiegel can repair those areas to prevent rupture or even stop bleeding after rupture has occurred.

“I use imaging to guide a microcatheter into the aneurysmal sac and deposit fine platinum coils to fill it and prevent its rupture,” says Dr. Spiegel. “This is called ‘embolization’ or ‘endosaccular occlusion,’ and Hartford Hospital is one of only four centers in the state that can do it.”

**ENDOVASCULAR NEUROSURGERY**

**WHAT IT DOES**

Sophisticated angiographic X-ray technology allows highly skilled radiologists to see and access diseased areas in blood vessels of the head and neck to remove blockages, repair aneurysms and perform other therapeutic procedures in minimally invasive ways.

**WHO BENEFITS**

Certain victims of stroke, as well as patients with aneurysms, blood clots, arterial malformations or other vascular abnormalities, can benefit from these procedures.

**Gary Spiegel, MD**

Director of Endovascular Neurointervention, Co-Medical Director of the Stroke Center, and member, Jefferson X-Ray Group
Preparing this annual message provides an opportunity to reflect upon the milestones Hartford Hospital has reached in the course of the year.

For example, if you’ve come through the main hospital entrance recently you’ve seen the new lobby, which opened in June 2002. Spacious and filled with natural light, the lobby is lovely and welcoming. It’s also a milestone, because its opening marked the completion of the CORE project, a multifaceted renovation and expansion program that was several years in the making.

This year saw the achievement of another milestone: the launch of the Olin Center for Neuropsychiatry Research at The Institute of Living. The Olin Center will be a world leader in the research and treatment of schizophrenia and other severe psychiatric disorders. Godfrey Pearlson, MD, formerly of the Johns Hopkins University School of Medicine, has been appointed as director. The center was made possible by more than $20 million in gifts from the estates of Ruth C. and Philip F. Holton and from the Spencer T. and Ann W. Olin Foundation.

Generosity is also evident in the success of our 150th Anniversary Campaign. As the year drew to a close, our $70 million goal was clearly within reach. Donations earmarked for the endowment, The Institute of Living and community outreach are expected to exceed goals. However, donations for medical technology are somewhat behind. This is a matter of concern because advanced medical technology is vital to continued excellence. It ensures that patients benefit from the newest techniques, it increases efficiency and cost-effectiveness, and it helps us retain and attract the finest medical minds. Bridging the gap in funds required for medical technology will be a primary focus of the Anniversary Campaign as it nears its scheduled completion in 2004.

Hartford Hospital, like most institutions, has felt the effects of the national economic downturn and the struggling stock market. This year, operating gains were better than budgeted, but poor stock market performance reduced investment income—income that historically has been used to fund capital needs such as medical technology.

The fiscal situation of the health care sector is also being adversely affected by the skyrocketing costs of medical malpractice and employee health insurance. Levels of state Medicaid reimbursement, already inadequate, may actually be cut further next year.

One of the most troubling results of the public sector’s inadequate funding of health care programs is the crisis in residential mental health care for children and adolescents. More private residential programs are closing every year because they simply cannot afford to operate. Yet the number of young people desperately in need of such facilities increases every year. We continue to advocate for more public funding to mitigate this growing crisis.

Providing patients with only the highest quality of care continues to be our overarching goal. This year, we instituted several innovative measures to support that goal.
Advanced medical technology is vital to continued excellence. It ensures that patients benefit from the newest techniques, it increases efficiency and cost-effectiveness, and it helps us retain and attract the finest medical minds.

This year, Hartford Hospital took constructive steps to address another capacity issue, this one in the area of intensive care. To care for the increasing number of critical-care patients, we opened a step-down unit on C9EI. The unit treats respiratory patients who have improved enough to be discharged from ICU but still need a higher level of care than a regular floor can provide. The new unit has eased the capacity strain in the ICU.

Providing patients with only the highest quality of care continues to be our overarching goal. We have set in motion several innovative measures to support that goal and to reduce the risk of medical errors. One is a physician order-entry system that eliminates handwritten prescriptions. This and other measures will serve us well as we operate in an atmosphere of increased public scrutiny of the health care system.

On a celebratory note, Cedar Mountain Commons, our independent- and assisted-living community on the Newington campus of Jefferson House, has received accreditation from the Joint Commission on the Accreditation of Healthcare Organizations. We are delighted with this independent affirmation of quality.

We also celebrated the pioneering work and notable achievements of our own Henry B.C. Low, MD, by officially inaugurating the Henry Low Heart Center, encompassing all of Hartford Hospital’s cardiology services. A special fund-raising campaign has been launched within the 150th Anniversary Campaign to raise money specifically for the center.

Sadly, this year saw the passing of T. Stewart Hamilton, MD, who served as chief executive of Hartford Hospital from 1954 to 1976. Dr. Hamilton was a wonderful man, an exemplary physician and a visionary leader. He charted a wise course for the hospital and left an indelible mark on health care, both statewide and nationally.

People in many capacities have contributed to Hartford Hospital’s success this year, as they have each year since our founding, and we wish we could mention them all. However, we would like to give special thanks to the Auxiliary, whose members’ tireless dedication makes such a positive difference in the lives of everyone in the Hartford Hospital community. Thanks, too, to the members of the board of directors, who play a vital role in guiding the hospital on its journey. The relationship among the board, management and the medical staff is a major factor in the success of this dynamic organization. We salute our past and current board members and the many fine people who devote their time and talent to hospital service.

Marcia Hincks
Chairwoman of the Board

John Meehan
President and Chief Executive Officer

Editor’s note: Marcia Hincks’ term as chair ended in December 2002. We thank her for her 20 years of invaluable service and leadership, both as member and chair of Hartford Hospital’s board of directors. She continues to serve on the boards of Hartford Health Care Corp., Hartford Hospital and the hospital’s Executive Committee.
### Statement of Revenues & Expenses

**Year Ended September 30**

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net revenues from services to patients</td>
<td>$480,042,471</td>
<td>$429,209,341</td>
</tr>
<tr>
<td>Other revenues</td>
<td>86,372,153</td>
<td>81,588,332</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>566,414,624</strong></td>
<td><strong>510,797,673</strong></td>
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</tbody>
</table>

**Operating expenses**

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>Salaries</td>
<td>248,284,700</td>
<td>229,853,081</td>
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<tr>
<td>Employee benefits</td>
<td>52,187,217</td>
<td>43,065,804</td>
</tr>
<tr>
<td>Supplies</td>
<td>96,091,736</td>
<td>87,506,587</td>
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<tr>
<td>Purchased services</td>
<td>90,142,462</td>
<td>84,185,250</td>
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<tr>
<td>Capital costs</td>
<td>44,363,760</td>
<td>39,110,062</td>
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<tr>
<td>Research expense</td>
<td>6,432,494</td>
<td>6,051,897</td>
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<tr>
<td>Bad debts</td>
<td>25,450,832</td>
<td>19,919,076</td>
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<tr>
<td><strong>Total</strong></td>
<td><strong>562,953,201</strong></td>
<td><strong>509,691,757</strong></td>
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</table>

**Income from operations**

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$3,461,423</td>
<td>$1,105,916</td>
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</tbody>
</table>

### Gross Patient Revenues (percentage)

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>A Medicare &amp; Champus</td>
<td>45.69</td>
<td>46.73</td>
</tr>
<tr>
<td>B HMOs</td>
<td>31.89</td>
<td>30.87</td>
</tr>
<tr>
<td>C Medicaid</td>
<td>10.16</td>
<td>10.01</td>
</tr>
<tr>
<td>D Insurance &amp; other</td>
<td>8.33</td>
<td>9.02</td>
</tr>
<tr>
<td>E Medicaid managed care</td>
<td>3.93</td>
<td>3.37</td>
</tr>
</tbody>
</table>

### Total Expenses (percentage)

<table>
<thead>
<tr>
<th></th>
<th>2002</th>
<th>2001</th>
</tr>
</thead>
<tbody>
<tr>
<td>H Salaries</td>
<td>44.10</td>
<td>45.10</td>
</tr>
<tr>
<td>I Supplies</td>
<td>17.07</td>
<td>17.17</td>
</tr>
<tr>
<td>J Purchased services</td>
<td>16.01</td>
<td>16.52</td>
</tr>
<tr>
<td>K Employee benefits</td>
<td>9.27</td>
<td>8.45</td>
</tr>
<tr>
<td>L Capital costs</td>
<td>7.88</td>
<td>7.67</td>
</tr>
<tr>
<td>M Research expense</td>
<td>1.15</td>
<td>1.19</td>
</tr>
<tr>
<td>N Bad debts</td>
<td>4.52</td>
<td>3.91</td>
</tr>
</tbody>
</table>
STATISTICAL HIGHLIGHTS

**DISCHARGES**

- 2002: 37,561
- 2001: 36,632

**PATIENT DAYS**

- 2002: 210,432
- 2001: 204,985

**AVERAGE LENGTH OF STAY**

- (in days)
- 2002: 5.60
- 2001: 5.60

**EMERGENCY ROOM VISITS**

- 2002: 73,047
- 2001: 71,482

**TOTAL SURGERIES**

- 2002: 27,907
- 2001: 27,149

**BIRTHS**

- 2002: 3,752
- 2001: 3,985
### Mission

The mission of Hartford Hospital is to promote, restore and maintain the health of all the people we serve.

### Values

<table>
<thead>
<tr>
<th>Patient-Centered Care</th>
<th>In all our endeavors, we are guided by the needs of the patient, creating a partnership that is effective and personal across the continuum of care.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continuous Learning</td>
<td>We actively support outstanding programs of education and research designed to encourage the acquisition of knowledge and skills that are of value to the organization and the community.</td>
</tr>
<tr>
<td>Community</td>
<td>We actively develop partnerships that will improve our community and, as stewards of a public trust, we ensure informed and dignified care for all patients regardless of their ability to pay.</td>
</tr>
<tr>
<td>Communication</td>
<td>We strive to acquire and understand information, and share it clearly and effectively.</td>
</tr>
<tr>
<td>Relationships</td>
<td>We develop and strengthen collaborative relationships with all of our customers, including our patients, their families, our employees, volunteers, medical staff and our business partners.</td>
</tr>
<tr>
<td>Diversity</td>
<td>We recognize, respect and actively support differences among individuals and demonstrate this philosophy through our words and actions.</td>
</tr>
<tr>
<td>Human Resources</td>
<td>We support the professional and personal growth of employees in their pursuit of the hospital’s mission.</td>
</tr>
<tr>
<td>Organizational Efforts</td>
<td>We are guided by ethical values that emphasize honesty, fairness, dignity and respect for the individual.</td>
</tr>
<tr>
<td>Superior Performance</td>
<td>We strive for superior performance in all that we do, to preserve the hospital’s clinical, organizational and financial strength.</td>
</tr>
</tbody>
</table>
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Margaret J. Hall Free Bed Fund*
Edith May Hart Free Bed Fund*
Emma May Hart Fund*
Ferdinand Austin Hart Free Bed Fund*
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H. Whitney Tyler Fund
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u/w/o Jane Tuttle*
AFFILIATIONS

HOSPITAL AFFILIATIONS
Primary affiliate of the University of Connecticut School of Medicine for both undergraduate and graduate medical education. Hartford Hospital has three residencies plus thirteen integrated residencies in conjunction with the Capital Area Health Consortium. The hospital also sponsors fifteen Hartford Hospital fellowships and sixteen from the integrated program.

Affiliate of:
The University of Connecticut for graduate education in oral surgery.

Affiliate and partner with:
Dartmouth Medical School for undergraduate medical education.

Allied health affiliations with:
A. I. Prince Technical School
Boston University
Briarwood College
Connecticut Children’s Medical Center
Connecticut School of Massage Therapy
Ithaca College
Manchester Community Technical College
Naugatuck Valley Community Technical College
New England University
Northeastern University
Quinnipiac College
University of Rhode Island
Sacred Heart University
Saint Joseph College
Simmons College
Springfield Community Technical College
Springfield College
Tufts University
Tunxis Community Technical College
University of Connecticut
University of Hartford
University of Vermont
Yale University

NURSING AFFILIATIONS
LPN Program
Cheney Technical College

Associate Degree
Capital Community College

Baccalaureate
Saint Joseph College
University of Connecticut

Upper Division Baccalaureate
Central Connecticut State University
University of Hartford

Master’s Program
Amherst
Boston College
Northeastern University
University of Connecticut
University of Hartford
University of Massachusetts
Sacred Heart University
Seton Hall
UMASS — Dartmouth
UMASS — Worcester
Western Connecticut State University
Yale University
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<tr>
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<tr>
<td>Arthur Tarantino, MD</td>
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Bell, David P., DMD; Dentistry; Courtesy
Bell, Peter J., MD; Ob–Gyn; Active
Bellina, Lisa, MD; Emergency Medicine; Courtesy
Bellucci, Aldo L., MD; Internal Medicine; Active
Beit, Gary M., MD; Neurology; Courtesy
Bender, Jean M., APRN; Pediatrics; Adjunct
Bentman, Adrienne L., MD; Psychiatry; Active
Berke, Adrienne, MD; Dermatopathology; Consulting
Berke, Randy D., MD; Ob–Gyn; Courtesy
Berkeley, Richard, MD; Psychiatry; Consulting
Berland, Robert H., MD; Neurology; Courtesy
Berlin, Bert B., MD; Urology; Active
Berman, Elliot S., DDS; General Dentistry; Active
Berman, Martin M., MD; Pathology/Lab Medicine; Active
Bernier, James A.; Medicine; Adjunct
Berns, Ellison, MD; Cardiology; Courtesy
Bernstein, Scott P., MD; Nephrology; Active
Berry, Cecile D., PA–C; Emergency Medicine; Adjunct
Bertsch, Helaine F., MD; Radiation Oncology; Active
Besman, Anatole J., MD; Surgical Critical Care; Active
Bevilacqua, Richard G., DMD; Dentistry/OMF Surgery; Active
Bezahler, Ronald C., MD; Ophthalmology; Courtesy
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Bier, Robin S., Ph.D.; Psychiatry; Clinical Affiliate
Bilchik, Tanya R., MD; Neurology; Active
Binder, Thomas B., MD; Pediatrics; Active
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Bisbee, Susan W., LA–C; Medicine; Adjunct
Biskup, Jean M., PA–C; Internal Medicine; Adjunct
Black, James C., MD; Psychiatry; Active
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Blair, C. Lee, MD; Psychiatry; Active
Blanchard, Bradford M., MD; Internal Medicine; Active
Blank, Karen, MD; Psychiatry; Active
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Bloom, G Peter, MD; Surgery; Active
Bloom, Ronald J., MD; Cardiology; Courtesy
Blume, Ginger E., Ph.D.; Psychiatry; Clinical Affiliate
Bluth, Lawrence S., MD; Neurology; Active
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Bourque, Michel D., MD; Pediatric Surgery; Active
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Bow, Laurine M., Ph.D.; Medicine; Consulting
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Britten, Andrew J. PA–C; Neurosurgery; Adjunct
Britting, John, MD; Pediatrics; Courtesy
Broady, James F., MD; Psychiatry; Active
Broady, Z. Riki, CISW; Psychiatry; Clinical Affiliate
Braisman, Larry B., MD; Internal Medicine; Courtesy
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Bronzino, Joseph D., Ph.D.; Medical Education; Consulting
Brown, Colleen M., APRN; Transplantation Surgery; Adjunct
Brown, David L., MD; Pediatrics; Active
Brown, Debra A., MD; Ambulatory Pediatrics; Consulting
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Brown, Matthew G., MD; Transplantation Surgery; Active
Brown, R Timothy, MD; Radiology; Active
Brown, Steven J.; Surgery; Courtesy
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Browner, Bruce D., MD; Orthopedics; Active
Brunquell, Philip J., MD; Pediatric Neurology; Courtesy
Brutus, Jessie, MD; Pediatrics; Active
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Donahue, Ann S., APRN; Emergency Medicine; Adjunct
Donahue, George M., MD; Internal Medicine; Courtesy
Donaldson, James O., MD; Neurology; UConn Courtesy
Donnelly, Susan L., PA-C; Surgery; Adjunct
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Erol, Ali O., MD; Internal Medicine; Active
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Kureshi, Imam U., MD; Neurosurgery; Active
Kvam, David A., MD; Neurosurgery; Active
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Lamarr, Deborah G., APRN; Surgery; Adjunct
Lamonte, P. Henri, MD; Internal Medicine; Active
Lamoureux, Christine T., MD; Pediatrics; Active
Lancaster, Gilead I., MD; Cardiology; Active
Landry, Arthur B., MD; Cardiology; Consulting
Landrith, Howard, MD; Neurosurgery; Courtesy
Lapidus, Garry D., PA-C; Pediatrics; Adjunct
Lapin, Craig D., MD; Pediatric Pulmonology; UConn Courtesy
Lapuk, Seth L., MD; Pediatric Cardiology; Active
LaRocca, Charlotte A., MD; Psychiatry; Active
LaSala, Anthony F., MD; Cardiology; Active
LaSala, Christine A., MD; Ob–gyn; Active
LaSala, Francis B., MD; Emergency Med; UConn Courtesy
Lashgari, Manocher, MD; Ob-Gyn; Courtesy
Lassman, Marshall N., MD; Internal Medicine; Courtesy
Laudone, Vincent P., MD; Urology; Active
Laut, Jeffrey M., MD; Nephrology; Active
Lautenbach, Richard, Ph.D.; Psychiatry; Consulting
Lavalette, John H., MD; Pediatrics; Active
Levin, Jean A., APRN; Internal Medicine; Adjunct
Levine, William S., DMD; Dentistry; Courtesy
Law, Nancy, MD; Pediatrics; Active
Lawlor, Michael T., MD; Infectious Disease; Active
Lawrence, David S., MD; Cardiology; Active
Lawrence, Denise M., APRN; Surgery; Adjunct
Lawson, John A., MD; Internal Medicine; Courtesy
Lazor, Lawrence Z., MD; Ob–Gyn; Active
Lazor, Michael Z., MD; Medicine; Honorary
Leasure, Donald A., PA–C; Surgery; Adjunct
Leach, C. Edward, MD; Internal Medicine; Active
Lebowitz, Steven, PA–C; Pediatrics; Adjunct
Lederman, Marc A., DPM; Orthopedics/Podiatry; Courtesy
Lee, Hyun S., MD; Anesthesiology; Active
Lee, Janice L., MD; Ob–Gyn; Active
Lee, Jason G., MD; Internal Medicine; Active
Lee, Nora S., MD; Neurology; Active
Leeds, William C., MD; Medicine; Honorary
Leggett, Beverly A., APRN; Medicine; Adjunct
Lehmann, William B., MD; Otorhinolaryngology; Active
Leib, Warren, Ph.D.; Psychiatry; Clinical Affiliate
Leicher, Carol R., MD; Pediatric Neurology; Active
Lena, Christopher J., M.D.; Orthopedics; Active
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Leopold, Jodi M., MD; Ob–Gyn; Active
Leopold, Kenneth A., MD; Radiation Oncology; Active
Lesser, Robert L., MD; Ophthalmology; Consulting
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Levitz, Robert E., MD; Infectious Disease; Active
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Namerow, Lisa B., MD; Psychiatry; Active
Naqvi, Johar A., MD; Internal Medicine; Active
Nash, John D., MD; Ob–Gyn; Active
Natale, Frances O., DO; Internal Medicine; Active
Nathanson, Robert B., MD; Dermatology; Active
Naum, Janice B., APRN; Medicine; Adjunct
Naylor, James E., DDS; Dentistry; Courtesy
Nemarich, Alfred N., DDS; Dentistry / OMF Surgery; Active
Nerenstone, Stacy R., MD; Hematology; Active
Nesta, Joseph M., MD; Internal Medicine; Active
Nestler, Jeffy L., MD; Gastroenterology; Active
Newirth, Jerry, MD; Ophthalmology; Active
Newell, Richard C., MD; Medicine; Honorary
Newman, Richard A., MD; Otorhinolaryngology; Active
Newport, Mary Lynn, MD; Orthopedics; UConn Courtesy
Nguyen, Manh D., MD; Internal Medicine; Active
Nieves, Christina I., APRN; Emergency Medicine; Adjunct
Nightingale, Charles H., Ph.D.; Medicine; Consulting
Nilsson, Erica L., PA–C; Surgery; Adjunct
Nino, Alfredo F., MD; Cardiology; Active
Nissen, Carl W., MD; Orthopedics; UConn Consulting
Nivison, Robert J., CRNA; Anesthesiology; Adjunct
Robert, Gary F., MD; Ob–Gyn; Active
Nochisaki, Lynn, APRN; Pediatrics; Adjunct
Nolan, Gerard M., MD; Ophthalmology; Active
Norberg, Doreen M., APRN; Surgery; Adjunct
Normandin, Michele, MD; Anatomic Pathology; Active
Norris, Mary E., MD; Gastroenterology; Courtesy
Nova, Sheldon, MD; Otorhinolaryngology; Courtesy
Nowak, Nathan A., MD; Anesthesiology; Active
Nowicki, Theresa, APRN; Psychiatry; Adjunct
Nowicki, Thomas A., MD; Emergency Medicine; Active
Nyanin, Adwoa P., MD; Internal Medicine; Courtesy

O
O’Brien, James W., MD; Gastroenterology; Courtesy
O’Brien, John J., MD; Orthopedics; Courtesy
O’Brien, Karen T., APRN; Pediatrics; Adjunct
O’Connell, Genevieve C., MD; Emergency Medicine; Active
O’Connor, Charles T., MD; Psychiatry; Active
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O’Laughlin, Michael T., MD; Radiology; Active
O’Neill, Dennis G., MD; Pathology/Lab Medicine; Consulting
O’Neill, Margaret M., MD; Pediatrics; Active
Oakes, Howard J., Psy. D.; Psychiatry; Consulting
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Olszewski, Vivian L., MD; Emergency Medicine; Active
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Oliver, Janice A., MD; Internal Medicine; Active
Olson, Edmund H., MD; Ob-Gyn; Active
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Owlia, Dariush, MD; Cardiology; Active
Ozonoff, Maer B., MD; Radiology; Honorary
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Pacela, Kara M., PA-C; Surgery; Adjunct
Pachucki, Debra A., MD; Emergency Medicine; Active
Packer, Andrew J., MD; Ophthalmology; Active
Padilla, Barbara B., MD; Internal Medicine; Active
Palermo, Donato A., MD; Ob-Gyn; Active
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Papadakis, Kathryn M., MD; Medicine; Courtesy
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Wheeler, Maynard B., MD; Ophthalmology; Active
White, Benjamin V., MD; Medicine; Honorary
Whitehead, David E., DDS; General Dentistry; Active
Whitehead, David E., MD; Anesthesiology; Honorary
Wickersham, C. Wendell, MD; Internal Medicine; Courtesy
Wickwire, James C., MD; Anesthesiology; Active
Wiese, Chester A., MD; Surgery; Honorary
Wilcox, David S., MD; Medicine; Honorary
Wilcox, Heather, APRN; Cardiology; Adjunct
Wilcox, William G., DMD; Dentistry; Courtesy
Wiley, Catherine C., MD; Pediatrics; Active
Wiley, James F., MD; Pediatrics; Courtesy
Wilhelms, Kathryn L., DMD; Dentistry / Endodontics; Active
Wilion, Felicia M., MD; Pediatrics; Active
Williams, Rebecca N., MD; Pathology/Lab Medicine; Active
Willig, Robert S., MD; Medicine; Consulting
Wilmer, Edward P., MD; Pediatrics; Honorary
Wilson, Heather H.; Emergency Medicine; Adjunct
Wilson, Mark E., MD; Anesthesiology; Active
Winchester, Eugene A., MD; Internal Medicine; Active
Windels, Mary H., MD; Surgery; Active
Winnick, Frieda, APRN; Emergency Medicine; Adjunct
Winters, Kristen E., DPM; Orthopedics / Podiatry; Active
Wiseman, Dana, MD; Medicine; Active
Wolf, Arthur D., MD; Medicine; Honorary
Wolf, Linda, MD; Psychiatry; Consulting
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Wolf, Scott A., DO; Internal Medicine; Active
Wolfberg, Carrie A., MD; Cardiology; Consulting
Wolfson, Leslie I., MD; Neurology; Active
Woodley, Anthea F., MD; Cardiology; Courtesy
Woodruff, John H., MD; Radiology; Honorary
Worgaftka, Brigitte P., MD; Ob–Gyn; Active
Worthley, Catherine A., APRN; Pediatrics; Adjunct
Wozniak, Margaret E., MD; Pulmonology; Active
Wozniak, Zbigniew A., MD; Internal Medicine; Active
Wright, Stephanie A., MD; Infectious Disease; Active
Wu, Alan B., Ph.D.; Pathology/Lab Medicine; Consulting

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Yannopoulos, Aris D., MD; Orthopedics; Courtesy
Yasuda, Thomas J., MD; Anesthesiology; Active
Yeston, Neil S., MD; Surgery; Active
Yetil, Turgut, MD; Internal Medicine; Courtesy
York, Eilhu, MD; Medicine; Honorary
Young, Howard Y., MD; Radiology; Active
Yu, Lori, APRN; Pediatrics; Adjunct
Yu, Song Y., MD; Anesthesiology; Active
Yuan, Stephen B., MD; Internal Medicine; Courtesy
COMMUNITY INVOLVEMENT

COMMUNITY HEALTH IMPROVEMENT OUTREACH PROGRAMS AND EVENTS

Health Fairs:
- A Balanced Life—Gold Building
- American Heart Association Stroke Prevention Day
- Annual Youth Gathering
- Asthma Tri-State Conference
- Big E Camp Courant
- Camp Treasure Chest
- Capital Community Technical College Health Fair
- Catholic Charities Migration & Refugee Fund
- Catholic Family Services Hartford Street Youth Project
- Christmas in April—Work Party
- Crusade of Faith & Hope
- Department of Corrections Health & Safety
- East Windsor Community Day
- Family Day—Keeney Park
- Glastonbury Relay for Life Gospel Festival
- Greater Hartford Arts Council—Walk for the Arts
- Hispanic Health Council Fair
- Mt. Moriah Heath Fair
- National Senior Health & Fitness Day
- Park Street Festival
- Poison Prevention Week
- Trinity College Career & Health Day
- United Way—Mega Fest
- Wethersfield Girl Scouts
- Health & Fitness Fair
- Windsor Senior Health Fair
- Windsor Shad Derby

Screenings:
- Breast Cancer
- Dental
- Depression
- Diabetes
- HIV
- Hypertension
- Prostate
- Sickle Cell

Clinics:
- City of Hartford Influenza Immunization Campaign
- South Marshall Street Clinic
- South Park Inn Shelter
- Medical Student Clinic
- Southwest Community Senior Center Clinic

AIDS Programs:
- AIDS Treatment
- Greater Hartford Case Management
- Program for AIDS Patients
- HIV Counseling and Testing Service
- Peter’s Place Clinic
- Tabor House

EDUCATION/INFORMATION

Allied Health Collaborative
- Cancer in Women
- Celebrate Life—Survivorship Day
- City of Hartford—Workfare Programs
- CPTV Science Fair
- Diabetes Awareness Day
- Diabetes Life Care Program
- Evening of Lite Laughter
- Heart Health
- Hormone Therapy
- LIFE STAR Safety Program
- Parenting
- Postponing Sexual Involvement
- Pre-natal Classes
- Prostate Cancer Public Education Program

SUPPORT GROUPS

Addiction Self-Help Groups
- Advanced Prostate Cancer Support Group
- Alzheimer’s Support Group for Caregivers
- Annual Memorial Service for Hemodialysis and CAPD Patients
- Brain Tumor Support Group
- Breathe Easy Support Group
- Cancer Resource Team
- CBSR Patient/Family Members
- Cervical Cancer Support Group
- CHESS Program
- Family Education on Eating Disorders
- Fresh Start
- Going Forward
- Healing Hearts
- Heart Transplant Support Group
- HIV Support Group
- LifeSaver Domestic Violence Prevention Program
- Lupectomy Support Group
- Mastectomy Support Group
- New Beginnings
- Organ Donor Support Group
- Ovarian Cancer Support Group
- Prostate Cancer Support Group

Volunteer Efforts/Community & Charitable Events

American Cancer Society
- American Heart Association Walk-a-Thon
- Boy Scouts of America Christmas in April
- Community Clean-Up Day Foodshare
- Greater Hartford Open
- Girl Scouts of America
- Habitat for Humanity
- Juvenile Diabetes Foundation Walk
- March of Dimes—Walk America
- Northern Connecticut Black Nurses Association
- Golf Tournament Sponsorships including:
  - Governor’s Golf Classic
  - Cystic Fibrosis
  - Wadsworth Atheneum
  - 2nd Wheeling & Able Prevent Blindness
  - ...and many others
  - Nutmeg Games
  - Red Cross Disaster Relief Training
  - Riverfront Recapure
  - SINA Festival
  - Spanish American Merchants Association
  - Special Olympics
  - Taste of Hartford
  - United Way/Combined Health Appeal
  - West Indian Celebration
  - Greater Hartford Arts Council Walk
  - Park Street Festival
  - South Green Initiative
Prostate Cancer Support Group
for Women
Transplant Support Group
Trauma Support After Care Program
Why Weight?

HARTFORD HOSPITAL’S PARTNERS IN THE COMMUNITY

AARP
Betances School Health Partnership
Bulkeley High School Health Program
Catholic Family Services
Charter Oak Terrace/Rice Heights Health Center
Child Council
Claude Pepper Center
Community Health Partnership
Community Renewal Team—Fresh Start Program
Connecticut Department of Children and Families
Connecticut Department of Mental Health and Addiction Services
Connecticut Department of Public Health
Connecticut Forum
Connecticut Transit
Connecticut Valley Girl Scouts
CPTV/Radio
Frog Hollow Revitalization Committee
Gain Responsibility Opportunity and Work (GROW)
Hartford Action Plan on Infant Health and the Preterm Birth Prevention Project
Hartford Adolescent Violence Intervention/Prevention Project
Hartford Childhood Immunization Project
Hartford Downtown Council
Hartford Health Department
Hartford Primary Care Consortium’s Medical Home Project
Hartford Public Schools—Early Registration
Hispanic Health Council
Inner City Education
Low Income Housing Development (Broad Park)
Maria Sanchez Elementary School English as a Second Language Health Education Classes
Mayor’s Blue Ribbon Task Force on Public Health
Mayor Mike’s Kids
MD Fox Middle School Health Program
Neighborhood Improvement
New Britain Avenue Merchants Association
Parents Anonymous
Project Recovery
South Green RNZ
Southside Institutions
Neighborhood Alliance (SINA)
Spanish American Merchants Association
Urban League
VNA Health Care
LOCATIONS

Hartford
Hartford Hospital
80 Seymour Street
Hartford, CT 06102

Avon
Hartford Hospital Avon Wellness Center
100 Simsbury Road
Avon, CT 06001

Glastonbury
Hartford Hospital Health Care Center – Glastonbury
704 Hebron Avenue
Glastonbury, CT 06033

Wethersfield
Hartford Hospital Health Care Center – Wethersfield
1260 Silas Deane Highway
Wethersfield, CT 06109

Windsor
Hartford Hospital Health Care Center – Windsor
1060 Day Hill Road
Windsor, CT 06095
80 Seymour Street
Hartford, CT 06102-5037
860 545-1888
www.harthosp.org

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