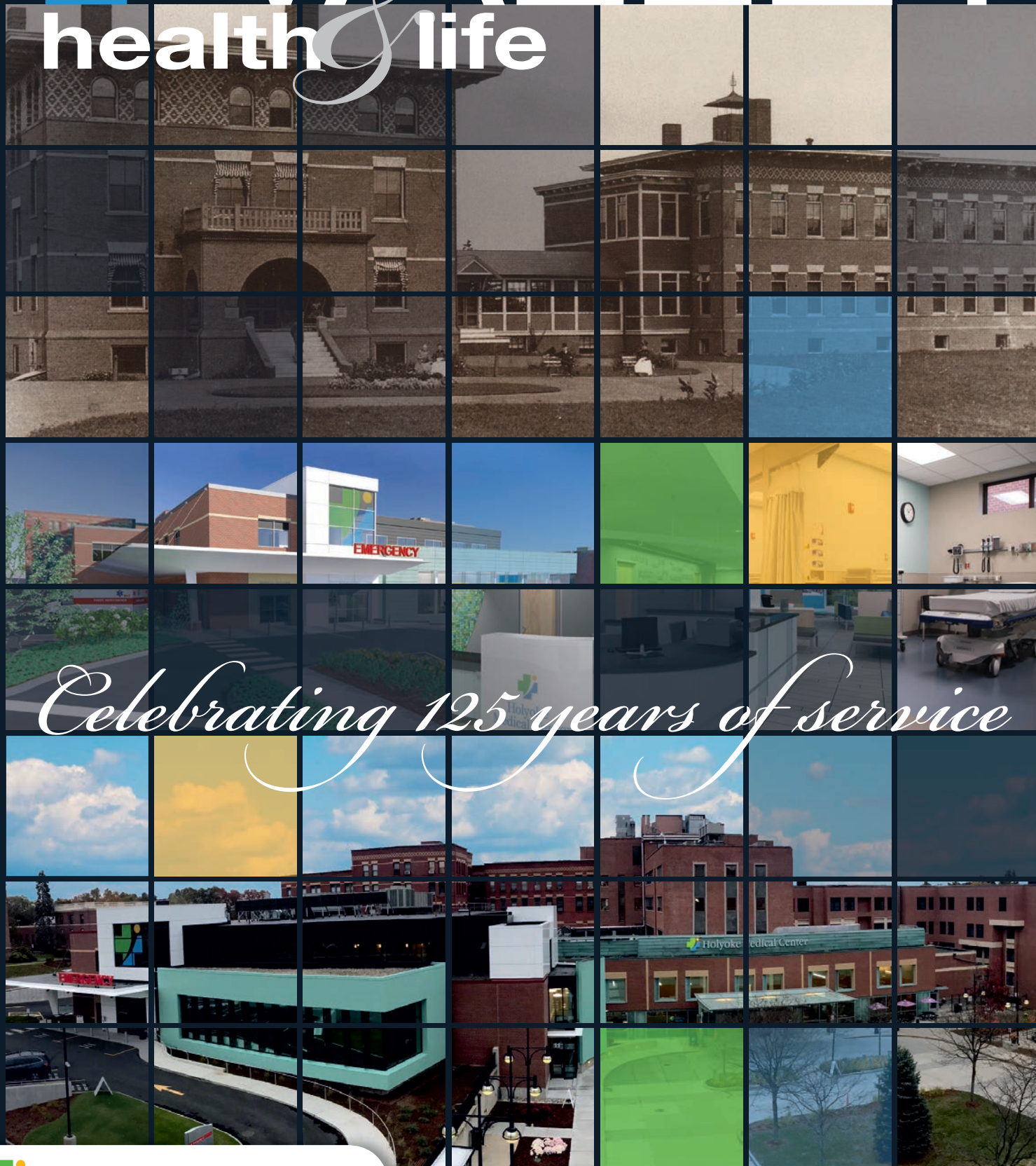


VALLEY

health & life



125 YEARS STRONG

DEAR FRIENDS,

I am absolutely thrilled to be writing this introductory letter for our 125th Anniversary edition of *Valley Health & Life*. What an honor to be part of this milestone celebration of an institution with such a long and rich history.

We have put together an informative and entertaining issue for you with historical accounts, pictures and timelines and we hope that you will enjoy it. Later in the year it will be followed by the publication of a commemorative 125th Anniversary book which is being produced in partnership with *The Republican*. Our celebrations will top off with a signature event on September 16th, our Anniversary Gala, at the Log Cabin. We hope to see many of you there to join the festivities, to share the memories and to reaffirm our commitment to Holyoke Medical Center's future growth.

A century and a quarter ago, visionary leaders of the Holyoke community recognized the need for a hospital for the city and the surrounding communities. Through their generous commitment of time and philanthropy, the hospital became a reality. From those early beginnings and with the ongoing support of the founding members, their families and descendants, and the countless other supporters throughout the 125 years, the hospital has flourished to be the premier institution it is today. Time never stops and neither has Holyoke Medical Center. We continue to grow and improve and remain dedicated to our mission to serve the Pioneer Valley by providing the best possible care with compassion and love for what we do.

In closing, I want to reiterate how incredibly fortunate I feel to be part of this institution and its history, and to reaffirm on behalf of our 1,500 employees, physicians and volunteers that we will continue to be good stewards of this incredible resource which has been entrusted to us, and to

pass it on to future generations as a thriving hospital.

Best Regards,

SPIROS HATIRAS
President and
Chief Executive Officer,
Holyoke Medical Center &
Valley Health Systems, Inc.



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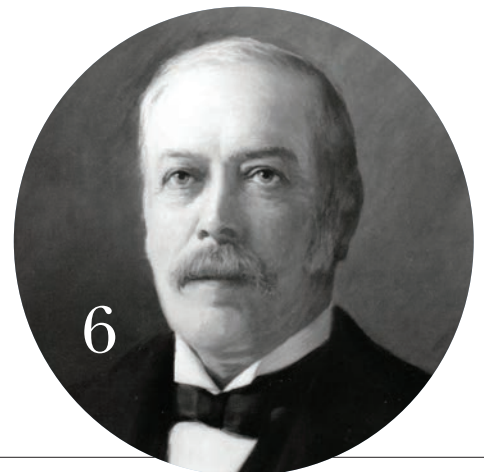
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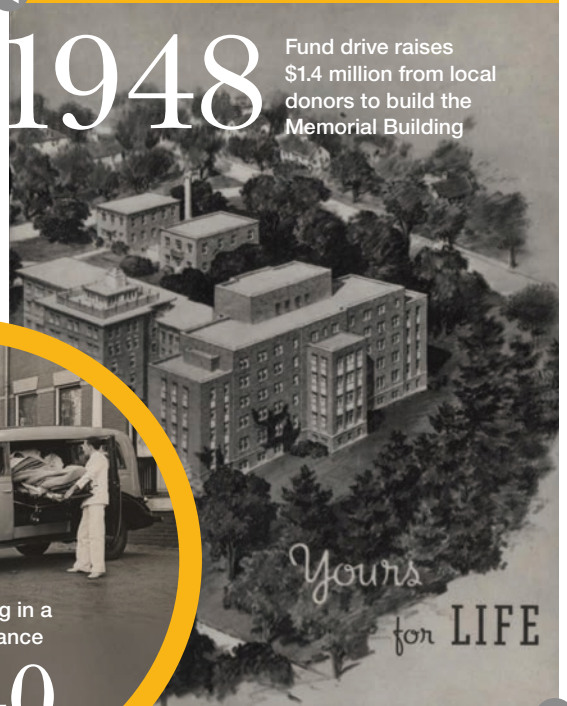
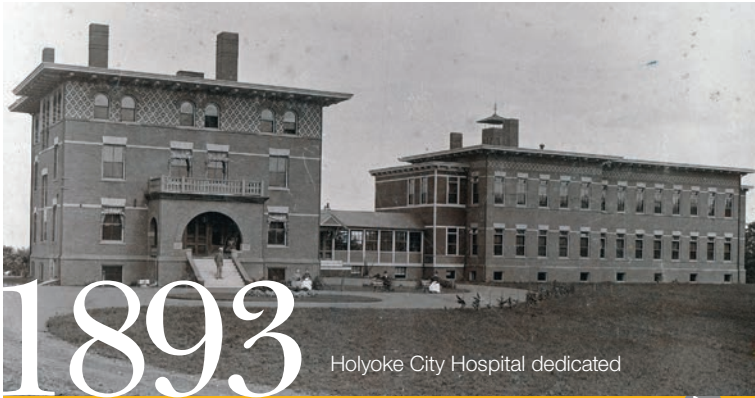


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125 years OF CARE & HEALING

WITNESS THE EVOLUTION OF HOLYOKE MEDICAL CENTER AS WE CELEBRATE A LONG LEGACY OF CARING THAT CONTINUES TODAY.



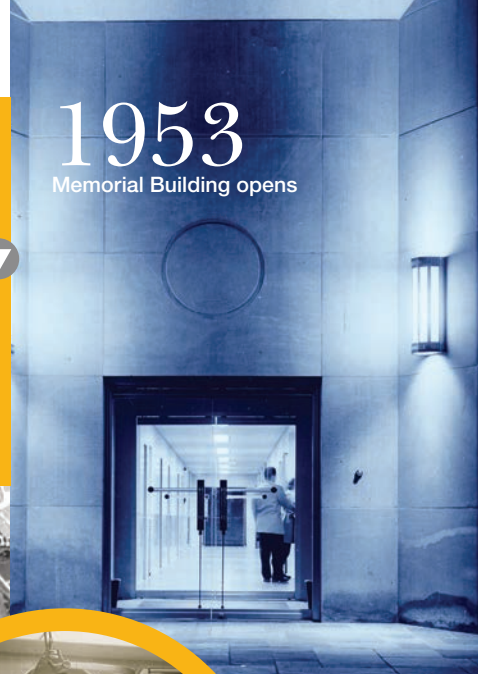


1950

The 1950s saw the addition of warning lights and a siren to improve ambulance safety

1953

Memorial Building opens



Aerial photo of the hospital in the 1960s

1960



1963

Dedication of the Frank B. Towne Memorial Emergency Department

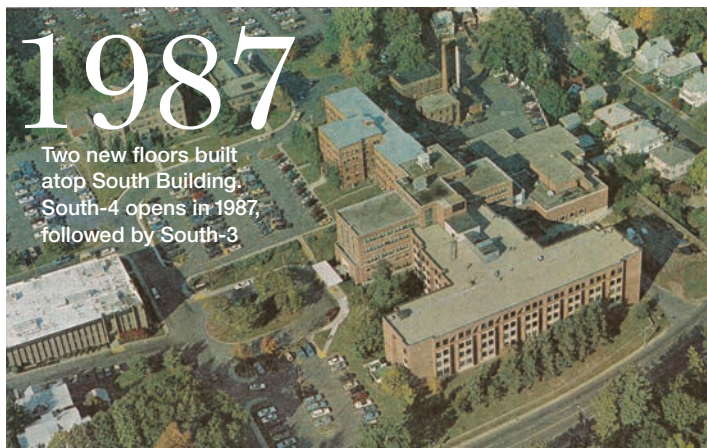
First two floors of the South Building completed

1967



1987

Two new floors built atop South Building. South-4 opens in 1987, followed by South-3

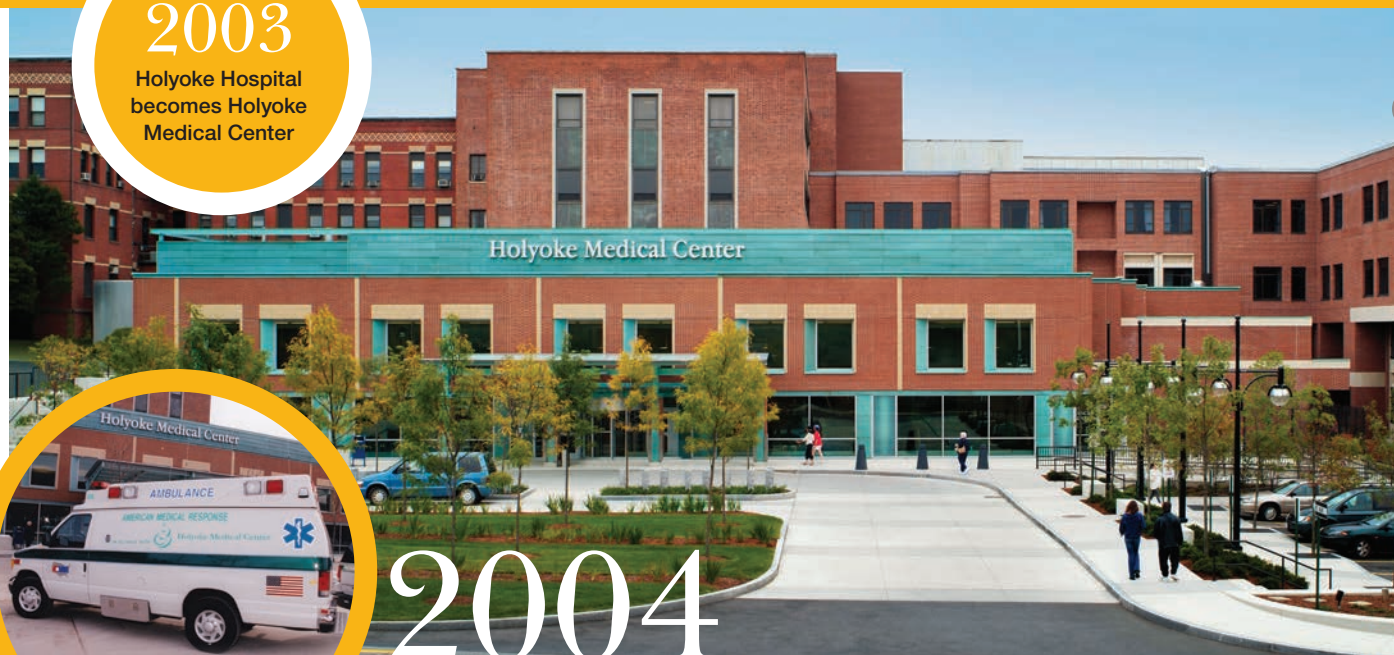


1997

Holyoke Hospital paramedics Bob Sills, Steve Makos and Kate Sullivan with the new hospital EMS vehicle in 1997

2003

Holyoke Hospital becomes Holyoke Medical Center



2004

New front lobby and new operating rooms are added, and the first floor is renovated

Inset: 2004 ambulance



2017

New Emergency Department (ED) and Medical Office Building opens



Dr. Paul Russo, ED Medical Director, Mary Richter, ED Technician, Emily Nolton, EMT, and Alexander Londraville, EMT, stand with a present day ambulance outside the new ED

2018

Holyoke Medical Center today serves over 350,000 patients annually through inpatient, outpatient and emergency services



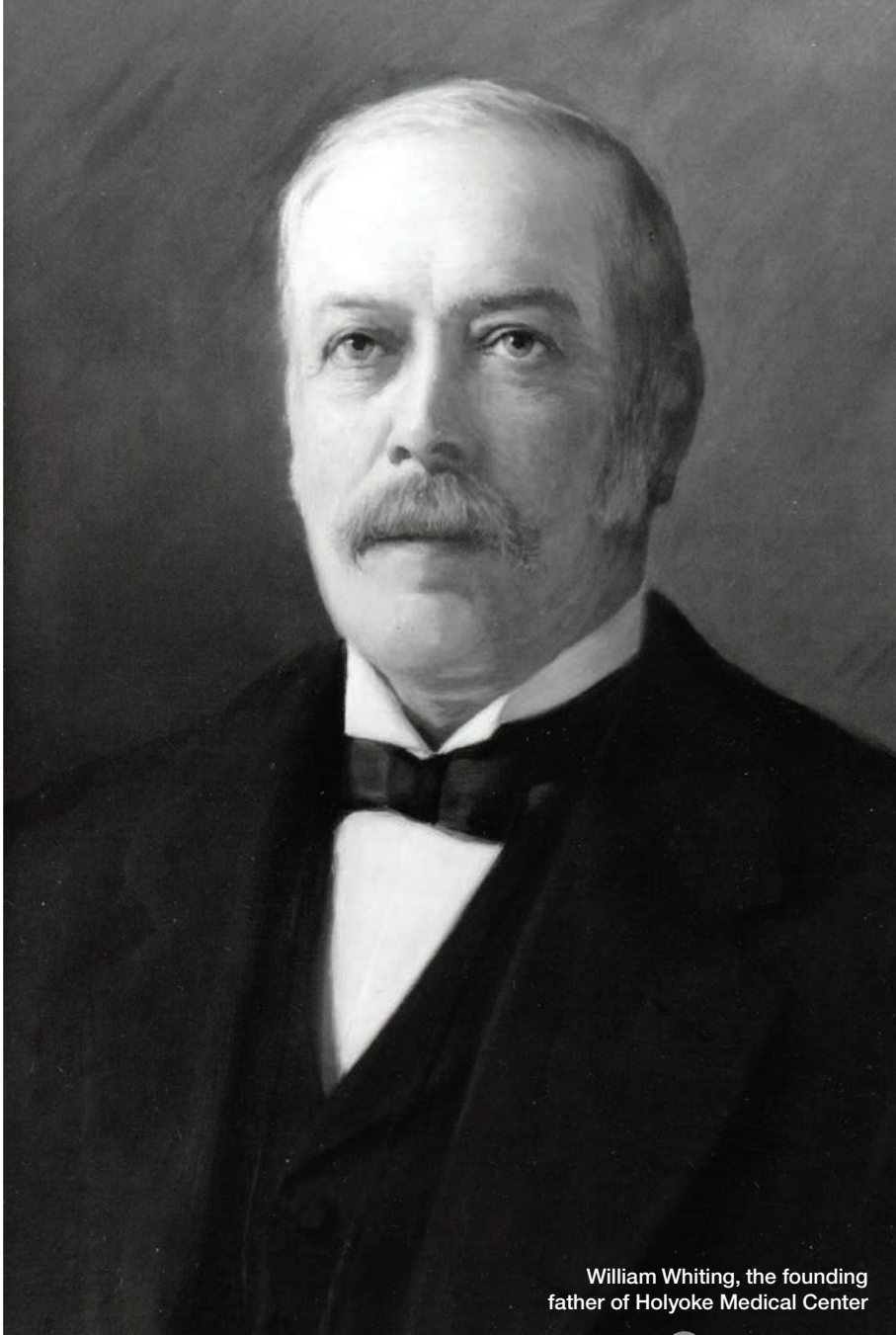
WHY DO HOSPITALS ask for donations when they get revenue from inpatient care? Phillip J. Candito hears that question often, and his answers may surprise you.

"The average person will find this hard to believe, but hospitals make very little money for the services they provide," says Candito, Holyoke Medical Center's vice president of business development. He estimates that for every \$100 of revenue, only between \$1 and \$3 remains to be reinvested back into the organization after clinical staff, support staff, utility and equipment costs are calculated. As a non-profit organization, HMC reinvests those dollars back into hospital facilities and patient-care programs. "Once you factor in the overhead, how do you afford new equipment, improvements or raises to staff?" he asks.

What's more, government reimbursements barely cover the cost of patient care—no small issue when 75 percent of Holyoke Medical Center patients are covered under Medicare or Medicaid. "It takes a lot of work for a hospital just to keep the lights on," says Candito.

PROVIDING THE MOST CURRENT TREATMENTS

That's why Holyoke Medical Center relies on charitable donations to provide the most current and effective treatments, offer wellness services to the community and continually improve patient care.



William Whiting, the founding father of Holyoke Medical Center

WHY 'DEVELOPMENT' IS IMPORTANT

DONATIONS FUND VALUABLE PATIENT PROGRAMS AND IMPROVEMENTS TO CARE.

Nearly every dollar donated is spent on new medical equipment and therapies, renovations, staff additions or new services. Donors can designate gifts to a specific unit or purpose or they can give an “unrestricted” donation that is allocated where it’s most needed.

Hospitals have long depended on the public’s generosity to thrive, and it was philanthropy that led to the birth of Holyoke Medical Center 125 years ago. Back in 1891, industrialist and onetime Holyoke Mayor William Whiting was outraged when a friend laid ill in a hotel room because the city lacked adequate medical care. Whiting started pushing for a local hospital, and he and another businessman, silk magnate William Skinner, raised \$50,000 (in today’s money about \$1.35 million) to help build Holyoke City Hospital (as it was initially known). Approximately 10 years later, Whiting contributed another \$10,000 (almost \$270,000 today) to help finance the hospital’s expansion.

A POSITIVE FORCE IN THE COMMUNITY

More than a century later, Holyoke Medical Center’s relationship with the community remains strong, as evidenced by the recent “Care. Community.

Commitment.” capital campaign, which raised \$2.75 million to finance the expanded Emergency Department.

“We have a longstanding relationship with area foundations, financial institutions and major manufacturers from the Pioneer Valley,” says Candito. “They have remained loyal to us. That speaks to the nature of who we are and who we help as a community hospital. We would not be able to offer the quality care and service we provide without their support.”

Patients and area residents at large also chipped in. “We do our best to provide the highest quality healthcare at the most affordable price,” says Candito. “I think people in the community responded in kind by donating.”

Although the recent capital campaign is now history, year-round support for day-to-day medical center operations is still needed. Candito says campaign donors will be offered the chance to make an annual pledge, and holiday donation requests will be sent to patients, staff, physicians and past donors. The annual fall gala provides another donation stream—part of the ticket price is a direct gift to Holyoke Medical Center.

Also in the works: a “grateful patient” program, in which patients can donate directly to the unit or department that

cared for them. “We’ve received above-average scores in patient satisfaction and regularly exceeded our patients’ expectations,” says Candito. “We’re hoping our patients might respond to this new initiative in a positive way.”

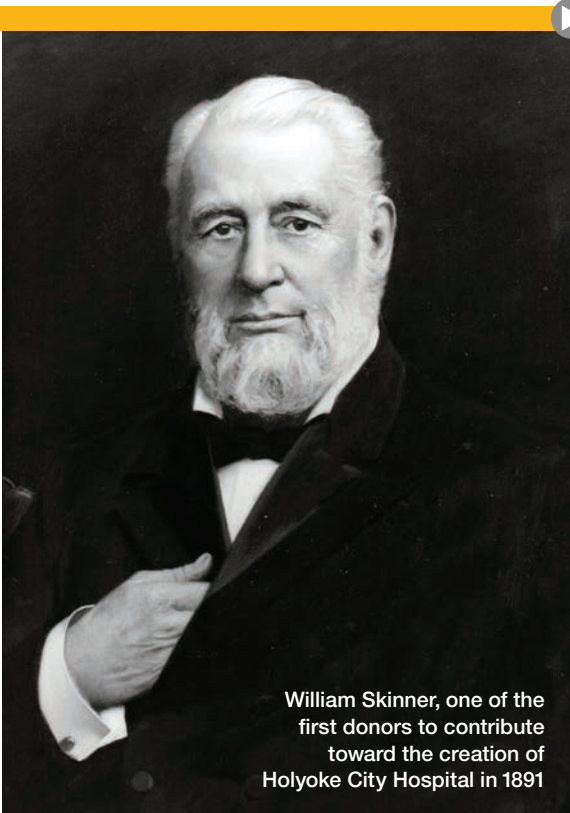
SCREENINGS AND SERVICES

Aside from benefitting Holyoke Medical Center, these year-round development efforts also have led to community programs that have benefitted people throughout the Pioneer Valley. Candito estimates that in the past year \$15 million in staff, supplies and services has been devoted to providing free or low-cost services such as health fairs, blood pressure screenings, health education programs and free holiday dinners for families in need. The popular bicycle rental program, which promotes exercise and well-being by encouraging patients to rent a bicycle for short-term transportation, is also the result of community support.

“These programs could not have happened if our neighbors weren’t willing to step up and fund them,” says Candito.

Ultimately, a donation to Holyoke Medical Center, your local hospital, is an investment in your community, Candito notes. “When you give to our community hospital, you’re giving to the people who you’ll be running into in the local grocery store—the people who are providing the medical services that you’ll need throughout your lifetime.”

*** To continue the legacy of community support by making a donation of cash, stock or mutual funds, life insurance policies, bequests or income-producing gifts, please call Christina Reynolds in the HMC Development Office at 413.535.4731.**



William Skinner, one of the first donors to contribute toward the creation of Holyoke City Hospital in 1891



Phil Candito, Vice President of Business Development

“These programs could not have happened if our neighbors weren’t willing to step up and fund them.”

—Phil Candito



1890s

First HMC doctors: The Whiting Ward in the 1890s. The bearded physician in the rear of the room on the left is Dr. Frank Holyoke, a descendant of Elizur Holyoke, for whom the city was named. Standing in the center of the room is Dr. Lyman Tuttle, the hospital's first superintendent. Dr. O.J. Comtois bandages a patient on the right side of the room.

PHYSICIANS: 125 Years Bring Big Changes

THOUGH
GENERAL
PRACTITIONERS
ONCE
ADMINISTERED
ANESTHESIA AND
PERFORMED
EMERGENCY
CARE, DOCTORS
TODAY
OFFER MORE
SPECIALIZED
SERVICES.

MEDICINE HAS advanced considerably over the last 125 years, and the doctors at Holyoke Medical Center (HMC) have kept pace while expanding their reach into the community.

"Holyoke has changed quite a bit since I started," says Jennifer Mark, M.D., chief medical officer at HMC, who has been with the hospital for the past 11 years. "We are seeing patients from all over western Massachusetts and have been branching out, adding new service lines like wound care, bariatric surgery, vascular surgery and a pain-management clinic."

Today, HMC is staffed by hundreds of physicians who are board-certified specialists. But that wasn't always the case: Like many hospitals, HMC has a long history of general practitioners (GPs) treating patients.

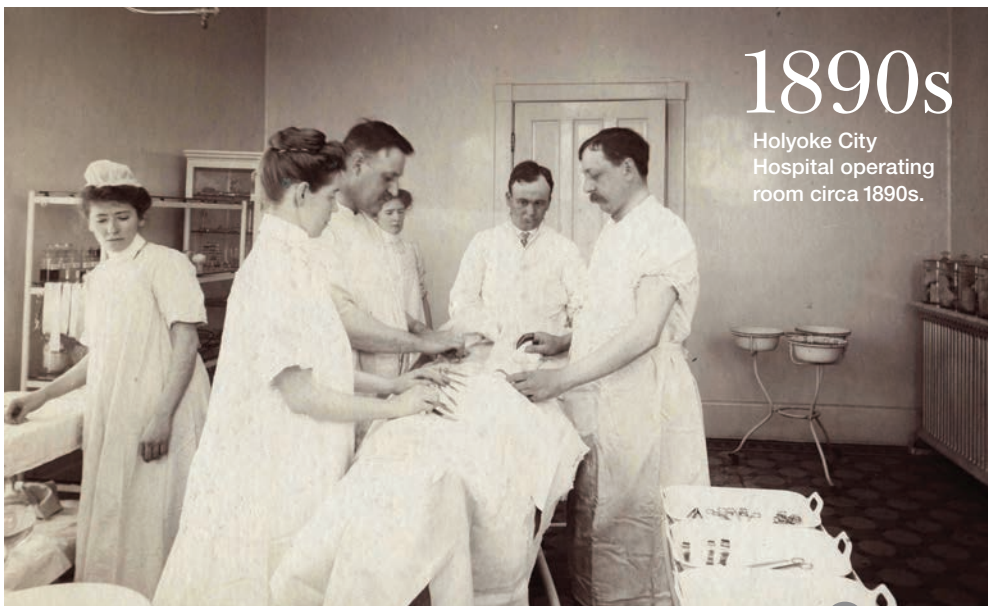
In the 1940s and 1950s, when dozens

of GPs worked at the hospital, the doctors would rotate through various medical departments on a monthly basis, caring for patients who didn't have their own doctors. They'd also work shifts in the emergency room because at that time hospitals didn't have dedicated emergency specialists.

THE COMING OF SPECIALTY CARE

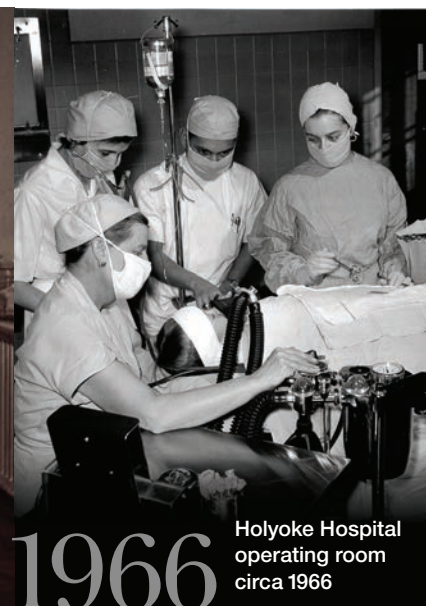
When Garry Bombardier, M.D., medical director of The Work Connection at Holyoke Medical Center, arrived at Holyoke Hospital in 1979, many of the doctors were still general practitioners. "We had GPs giving anesthesia and GPs delivering babies," says Bombardier. "I was delivered here by a GP."

Soon after Bombardier came to work at Holyoke Medical Center, many of those



1890s

Holyoke City
Hospital operating
room circa 1890s.



1966

Holyoke Hospital
operating room
circa 1966

GPs retired. The younger doctors who filled vacancies were board-certified specialists. "It was a different group of doctors that was taking over for them," says Bombardier. "Somewhat of a passing of the baton, making Holyoke a hospital with board-certified doctors offering specialty care that in the past you would have had to go to a bigger university hospital to get."

WHAT'S OLD IS NEW AGAIN

One of the newer practice sites that the hospital offers is a nod to the GPs of the past, with a modern twist. "We have started a family medicine service, getting back to basics," says Mark. "It consists of providers who did family medicine residencies and one who did a fellowship in obstetrics. They do full-spectrum medical care, seeing patients of all ages. It's a little bit of a throwback to the past."

Throughout much of the hospital's early years, Holyoke physicians regularly made house calls. In the 1940s and 1950s it was still commonplace, but by the 1970s and 1980s, most doctors had phased it out.

"When I began, I made house calls," says Bombardier. "But as time went on, you couldn't continue with it because it was too expensive. When we made house calls we were paid the same as for an office visit, but you could spend five hours in the morning making three visits."

Although very few Holyoke physicians make house calls today, the hospital still sends representatives into the community to care for patients at home. "We have a very robust visiting nurse service,"

says Mark, "and community navigators who see patients in their homes if that's needed."

INVALUABLE ASSISTANCE ARRIVES

Over the past decade, Holyoke Medical Center doctors have been joined by mid-level practitioners, including physician assistants and nurse practitioners. Their presence at the hospital has been invaluable.

Physician assistants and nurse practitioners are "a very big part of our practice here," says Mark. "They fulfill a huge patient-care need. They assist us in every manner possible and are a very important part of our medical community."

Bombardier has two physician assistants working in his office, and he's pleased to offer their services to patients. "Using mid-level providers has become important in medicine," says Bombardier. "They're really good and help us provide excellent patient care. Their depth of knowledge is different than a doctor, but for trickier cases or sicker patients, physicians are always available."

Looking forward, physicians at Holyoke Medical Center plan to continue serving the community with as much skill and enthusiasm as they did during the first 125 years.

"Our goal is to be a magnet community hospital where we get great results," says Mark. "Patient safety and patient experience are our top priorities. We hire doctors who have those goals in mind."



Dr. Jennifer Mark, Chief Medical Officer



Dr. Garry Bombardier, medical director of the HMC Work Connection and member of the medical staff since 1979

THE EVOLUTION

NURSING HAS CHANGED DRAMATICALLY IN THE PAST 125 YEARS, EVOLVING IN MANY AREAS—FROM SKILLS TO DRESS CODES.



1918

Agnes Dazelle Eckart, of the Holyoke City Hospital School of Nursing class of 1918



Doris Hamel, RN, seen here with one of her patients, wearing the white nursing uniform and cap in 1986

1986

“The job can be stressful and requires long hours spent on your feet, but that never takes away the satisfaction of seeing a patient improve and of helping to prevent future health issues for someone.”

—Helen Arnold, RN, BSN, MS

IF YOU'D HAD THE opportunity to be admitted to Holyoke Hospital in its first 75 to 85 years of existence, the nurses who would have cared for you would have undoubtedly been women in starched white dresses and prim matching caps.

Today, things are markedly different. For starters, many of the nurses at Holyoke Medical Center are men and all of the nurses wear scrubs. “Dress codes have changed, and comfort and professionalism are at the forefront,” says Helen Arnold, RN, BSN, MS, who worked at the hospital for 42 years.

PANTS CAUSE A STIR

Arnold began her career at Holyoke Hospital, as it was then known, wearing a uniform consisting of a white dress, white stockings and a white cap. During the 1970s, the hospital allowed nurses to start wearing pants. “I was one of the first to put the pants on because it was so much more comfortable,” says Arnold. “The nurses

who had been there for a while mainly stayed in the dress until the mid-'80s before changing to pants. It was the new grads and younger nurses who were excited.”

Nurses today don't just look different than their counterparts of previous generations: They're also seen differently. In decades past, nurses didn't garner the same respect from physicians that they do now.

“Once upon a time, there was a very prominent hierarchy,” says Colleen Desai, MBA, MSN, RN, CEN, chief nursing officer and vice president for patient care services at Holyoke Medical Center. “Now we're peers and equals. It's nice to hear doctors and nurses call each other by their first names.”

OF NURSING

2017



Laura Ventresca, RN, seen here in present-day scrubs worn by nurses



Helen Arnold, RN, BSN, MS



Colleen Desai, MBA, MSN, RN, CEN,
Chief Nursing Officer and Vice President
of Patient Care Services

During her long career, Arnold experienced the gradual evolution of doctor-nurse relationships. “One of the most important changes is the respect that has been given to nurses,” says Arnold. “Today healthcare providers are seen as a team—and the nurse sometimes leads the team. And that took a long time to transpire. We weren’t really recognized for our education and our knowledge over the years. That’s finally happened.”

SPECIALIZATION COMES TO NURSING

In more recent years, nurses also have been able to specialize in different medical fields, thanks to changes in educational opportunities. In the past, nurses were placed at any hospital unit where they were needed and most had a more generalized skill set, which was sufficient for the time, when many doctors also were generalists.

“Qualification for nurses is very specific

today compared to the past,” says Arnold. “Nurses have the opportunity to enter higher levels of care, such as diabetes, wound care and other specific disease-centered care.”

BETTER WORK/LIFE BALANCE

Another difference: Today, Holyoke Medical Center caters more to nurses’ lifestyle needs than in years past, offering a variety of shift options to suit people’s differing schedules.

“We’ve become more flexible with the nurses to help accommodate their work-life balance while maintaining consistency, which we value,” says Desai, noting that the hospital strives to develop and maintain a strong nurse-patient dynamic.

“There’s value in advocating for the same patient on multiple days so relationships can be built and patterns can be identified,” she says. “Whatever changes happen in a patient, the nurse is going to see it first.”

Nurses at Holyoke Medical Center

always have had a strong commitment to caring for patients to the best of their abilities. Earlier this year, Desai had the opportunity to mingle with retired Holyoke nurses at a nursing alumni reunion, which gave her a new perspective on the history of nursing at the hospital.

“There was such a warmth and such an air of professionalism; an air of pride and gentleness and kindness,” says Desai. “I was truly awed by the path that they paved for nursing at Holyoke.”

And although many things are different today for nurses at Holyoke Medical Center, some things have stayed very much the same.

“The part that has not changed is that nursing is still both rewarding and challenging,” says Arnold. “The job can be stressful and requires long hours spent on your feet, but that never takes away the satisfaction of seeing a patient improve and of helping to prevent future health issues for someone.”

2017

Members of the Holyoke Hospital School of Nursing Alumni Association at the 2017 Annual Luncheon at Holyoke Medical Center



THE LEGACY OF HOLYOKE MEDICAL CENTER'S SCHOOL OF NURSING LIVES ON IN THE FINE WORK AND MEMORIES OF THE NURSES WHO TRAINED THERE.

The CARING Continues

WHEN HOLYOKE City Hospital (as it was then known) opened its School of Nursing in 1893, medicine was riding the wave of reforms—including sanitary standards, patient observation and note-taking—inspired by Florence Nightingale.

From the start, the Holyoke Hospital School of Nursing, recognizing the importance of skilled nurses, selected gifted students directly out of high school for its demanding two-year apprenticeship program, which later transitioned to a three-year program in 1900. Nurse trainees managed a grueling six-day-a-week schedule, studying and working for 12 hours daily with Sundays off for churchgoing.

In 1895, the hospital celebrated its first nursing school graduates: Hulda Klemm, Isabelle Parfitt, Helen Fairgrieve, Ella Pool, Florence Stickley and Mildred Jenkins. The graduates were paid an allowance of \$18 a month as they began their busy careers.

Over the years, nursing—and nurse training—kept pace with the fast evolution of medical techniques. Although the nursing school closed in 1977, what didn't change was the nursing students' devotion to their patients and to their school. The first alumnae association was incorporated on September 18, 1902. The group—now known as the Holyoke Hospital School of Nursing Alumni Association—remains



James and Marjorie Shaw with the School of Nursing display case they generously donated in 2016

a force at Holyoke Medical Center.

A LEGACY LIVES ON

The alumni association, led by Connie Kurdziel (president) and Marjorie Shaw (vice president), hosts an annual luncheon for members. Sponsored by the hospital, it functions as a reunion and honors a different graduating class each year.

Year-round, visitors can view the legacy of the nursing school in the lobby of HMC, where a museum-quality display showcases photographs, yearbooks and other memorabilia. The exhibits housed in the display case, donated by Marjorie and



Holyoke Hospital School of Nursing Alumni Association Board of Directors: Laurene Kittler, Connie Kurdziel, Marjorie Shaw and Francine Rusinchi

her husband, Jim Shaw, rotate to spotlight different eras. For example, the 1930s exhibit featured a mannequin outfitted in a 1936 graduation uniform, as well as a class ring, pins and insignias.

The display case and the alumni association provide a historical counterpoint to the current high-tech hospital landscape, offering a glimpse of a bygone era when hospitals—not universities—trained nurses. Most important, they spotlight the unbreakable thread of skill and caring that continues from the nursing school era to this day.

*** Alumni interested in engaging with the Holyoke Hospital School of Nursing Alumni Association can contact Connie Kurdziel at 413.533.6974.**

A GENEROUS History

SINCE WORLD WAR II, VOLUNTEERS AT HOLYOKE MEDICAL CENTER HAVE PLAYED AN IMPORTANT ROLE IMPROVING THE PATIENT EXPERIENCE.

COMPASSION. Kindness.

Empathy. Hard work. These admirable qualities define the members of Holyoke Medical Center's volunteer program, which has aided patients in invaluable ways for decades. The key to the program's success: its generous and tireless participants. "The most important thing in terms of our history is the volunteers themselves—they are our cornerstone," says Beverly Fein, vice president of human resources at Holyoke Medical Center. "These individuals are so passionate about giving back—they're truly committed and loyal to this organization." The current incarnation of the volunteer program dates back more than 30 years, with as many as 50 dedicated volunteers contributing thousands of hours of their time each year.



**Beverly Fein, Vice President
of Human Resources**

HOW THE PROGRAM BEGAN

Since its founding, Holyoke Medical Center has attracted exceptional volunteers. The seeds of the volunteer program were sown during World War II, when many employees of Holyoke Hospital (as it was then called) were serving in the military. Members of the community stepped in to perform duties as needed. By 1968 there were more than 90 volunteers, known as Candy Strippers, actively involved in the hospital's daily operations. They did everything from manning the information desk and escorting new patients to their rooms to delivering flowers and distributing mail.

In November 1976, a patient representative program was established that directed volunteers to serve as a liaison between the hospital and its patients. Patient representatives visited patients to ask about the hospital's service and took any issues directly to hospital administration for solutions. The program was an immediate success.



Luiza DaFonte receives a certificate for 33 years of service from HMC President and CEO Spiros Hatiras at the 2018 Volunteer Luncheon

THE LEGACY LIVES ON

Today, volunteers at Holyoke Medical Center support its staff through administrative work and make its patients feel secure and at ease. "Our volunteers are assigned to specific units, really become part of the fabric of each unit and remain very dedicated to that team," says Fein. "Many of our volunteers have also been patients here, so they understand what current patients are feeling."

The patient representative program continues to be a highly effective volunteer enterprise. "Our patient representatives help to answer questions and solve problems," explains Fein. "Their work enhances our emphasis on service and helps us maintain an environment where our patients are our No. 1 priority."

The optimism and enthusiasm of Holyoke Medical Center's volunteers is contagious. "Our volunteers demonstrate a zest for life and for giving back," says Fein. "They just can't wait to be here. These individuals are willing to go above and beyond and are so positive."

Luiza DaFonte is the perfect example of this winning attitude. Her friendly presence has graced the medical library every Monday morning and afternoon during her 33-year tenure at Holyoke Medical Center. "The best thing I ever did for myself was to volunteer," says DaFonte. "I have met the most wonderful people during the years that I have been here and I think they're the best!" Fein returns the compliment. "Our volunteers are so happy to be part of our community, and it just makes your heart swell to see them," she says. "It's a privilege to know them."

*** Interested in learning more about volunteer opportunities at Holyoke Medical Center? Call Volunteer Services at 413.534.2675.**

USING TECHNOLOGY TO IMPROVE CARE

CONSTANT INNOVATION HELPS HOLYOKE MEDICAL CENTER CONTINUE ITS TRADITION OF PROVIDING STATE-OF-THE-ART PATIENT CARE.

THE WAVE OF technological innovation that's rapidly changing the world is also revolutionizing how healthcare is delivered and accessed. Holyoke Medical Center is keeping pace with cutting-edge technologies that enhance patient care, speed the flow of crucial patient information and improve

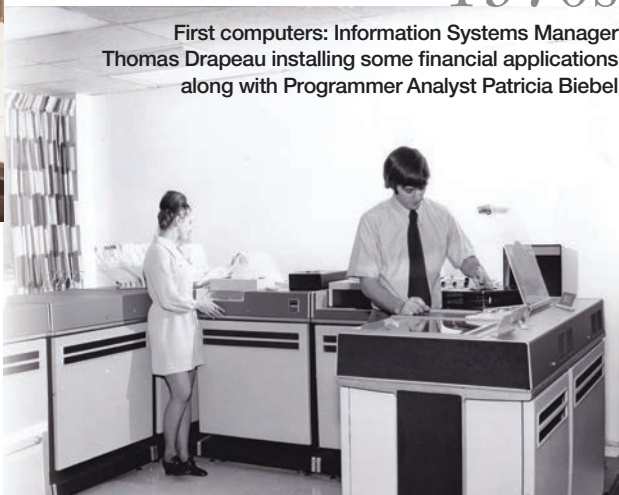
the patient experience.

"Every year, we budget between \$2 million and \$4 million for capital projects," says Carl Cameron, Holyoke Medical Center's chief operating officer. "Most of that money goes toward adding new technologies, upgrading aging equipment or investing in electronic medical records technology." Those innovations over the past two years include:



1950s

X-ray procedures have come a long way from the days this machine was in use. Photo shows X-ray technician Martha Rogalski



First computers: Information Systems Manager Thomas Drapeau installing some financial applications along with Programmer Analyst Patricia Biebel

1970s

3-D MAMMOGRAPHY.

Compared with conventional 2-D mammography, this technology generates a more detailed image that helps doctors spot a malignant growth and reduces the risk of misdiagnosis.

3-D STEREOTACTIC BREAST BIOPSY.

This technology employs mammography to help identify and biopsy a suspicious

Tech Timeline

2008

Computerized Physician Order Entry introduced among medical staff

2009

Single-incision gallbladder surgery introduced. Dr. L. Willis Roberts performs first procedure

2012

HMC HealthConnect begins, giving ER physicians immediate access to patient records

2012

Gastrointestinal unit begins using Pill Cam, a camera in a capsule that patients swallow to capture images of the GI tract

2013

First 128-slice CT scanner outside of Boston area installed

HOLYOKE MEDICAL CENTER HAS A HISTORY OF USING TECHNOLOGY TO PROVIDE STATE-OF-THE-ART CARE. HERE IS A SAMPLING OF PROGRESS MADE IN JUST THE LAST TEN YEARS.

abnormality, allowing doctors to more accurately target malignancies and identify more breast cancers.

TRANSCRANIAL MAGNETIC STIMULATION (TMS).

By using magnetic fields to stimulate nerve cells in the brain, TMS improves symptoms of depression. TMS has shown effectiveness as a second-line treatment for patients with depression who need combination therapy with antidepressants. Holyoke Medical Center has offered TMS since 2017, and Cameron says patient response has been so positive that a second unit may be added next year.

Patient information is also flowing more quickly and

securely. HMC HealthConnect speeds emergency treatment by giving ER physicians immediate access to patient records and ensures that information flows seamlessly across the ER. The Patient Portal offers patients access to their medical records so that they can track test results, schedule medical appointments and become more active in their care. And since 2014, Holyoke Medical Center has been participating in the Mass Hlway Health Information Exchange, which enables clinicians in hospitals across Massachusetts to

securely share electronic medical records.

Over the next year or two, Cameron says, the electronic medical records (EMR) infrastructure will get a face-lift. The enhancements will make documentation and record sharing among physicians even more efficient and will give patients faster yet secure access to their information. Another potential benefit: improved rapport between physician and patient. "We're hoping this new system will help streamline documentation, so that physicians can spend more face time with patients," says Cameron.

Innovation is nothing new

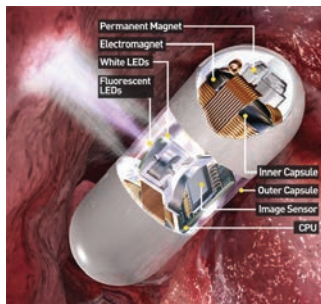
to Holyoke Medical Center (see "Tech Timeline"), but in a healthcare market where patients are tech-savvy and health-conscious, Cameron says staying current has never been more important. Whereas physicians once had a "hierarchical" relationship with their patients, today's smartphone-enabled patients expect both a one-on-one doctor-patient relationship and real-time access to health information.

"Technology is driving engagement from patients," says Cameron. "Patients want real-time access to their information, and they want technology to help them manage their health." With that change comes the need to explore cutting-edge treatments and become more "transparent" and accessible to patients, he adds.

In the end, innovation isn't about flashy bells and whistles, but about people, and Cameron says the "patient first" philosophy drives every decision on whether to implement a new technology. "We take a lot of pride in our state-of-the-art medical technology," he says, "but we couple that with compassionate patient care."

2013

Pill Cam for GI tract imaging



Carl Cameron,
Chief Operating Officer and
Chief Information Officer



2013

Patient Portal is created, allowing patients to access their electronic medical records

2014

Holyoke Medical Center enters Mass Hlway Health Information Exchange, which allows hospitals across the state to share electronic health records

2015

Holyoke Medical Center partners with Boston-based QPID to offer quicker data mining technology of medical records for Emergency Department patients

2016

3-D mammography and stereotactic breast biopsy added

2017

TMS therapy to treat depression is offered

2017

Holyoke Medical Center receives CIO 100 Honoree Award for Innovative Use of Technology

2018

Weight Management Program is only Northeast site for clinical trial of Elipse Balloon gastric implant



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Anniversary Gala*



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