



October 10, 2003

Marc P. Volavka, Executive Director  
Pennsylvania Health Care Cost Containment Council  
225 Market Street, Suite 400  
Harrisburg, PA 17101

Dear Mr. Volavka:

Thank you for the opportunity to respond to the "2002 Hospital Performance Report". We would like to comment on several areas identified in the report.

Mortality Data:

**Urinary Tract Infection** – While we are identified in the report with a higher than expected mortality, detailed record review indicates that these patients would have been more appropriately coded to septicemia as their principal diagnosis, and would have been expected to have a higher mortality.

**\*Seizure & Headache, Complicated** – Of the three mortalities in this DRG, all were unresponsive on admission and had Do Not Resuscitate orders, complying with patient and family end of life decisions.

**\*Fluid in Lung & Breathing Failure** - There were four mortalities out of the 8 cases in this DRG. All presented with acute respiratory failure and multiple system problems. One had a Do Not Resuscitate order on admission and two others had admission orders stipulating comfort care only.

Length of Stay:

**Septicemia** – Review of the patients contributing to a significantly higher percentage of long length of stay outliers showed that 5 of the 9 patients had significant underlying cancer that was also being treated. Two additional patients had endocarditis and multiple comorbid conditions, which required extended inpatient treatment

Holy Redeemer Hospital & Medical Center remains committed to providing the best health care in the most appropriate patient setting.

\* - denotes a diagnosis on the PHC4 website rather than published report.

Sincerely,

Charles Wagner, M.D.  
Chief Medical Officer

Drueding Center/  
Project Rainbow

Holy Redeemer  
Foundation

Holy Redeemer  
Hospital and  
Medical Center

Holy Redeemer  
Physician and  
Ambulatory Services

Holy Redeemer  
Managed Care  
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Lafayette-Redeemer

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