

# THE UNIONTOWN HOSPITAL

A subsidiary of Uniontown Health Resources, Inc

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October 15, 2003

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

Dear Mr. Volavka:

The Uniontown Hospital would like to thank the Pennsylvania Health Care Cost Containment Council for the opportunity to comment on issues related to our data from October 2001 to September 2002. The hospital was identified as having a greater than expected length of stay outlier rate for DRG 141 (Hypotension and Fainting, Complicated) and DRG 014 (Stroke, Non-Hemorrhagic.)

During this time, The Uniontown Hospital treated fifty-seven patients with Syncope. Ten of those patients had a very short length of stay, bringing the average length of stay below the state average. Upon review of the ten cases, five patients were found to have had a vasovagal response, two patients had orthostatic hypotension, one episode followed a motor vehicle accident, one episode was a vaso depressive response, and the last patient had presyncopal episodes. Nine of these patients experienced complete recovery within a short time period and returned to their place of residence. The tenth patient suffered multiple episodes of near syncope without loss of consciousness. Upon stabilization this patient was discharged to the Inpatient Rehabilitation Unit for continued therapy.

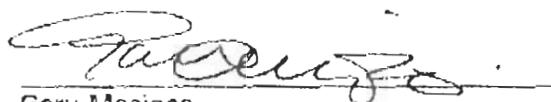
The Uniontown Hospital treated 153 patients for non-hemorrhagic stroke during this time. Twenty of those patients had a relatively short length of stay, once again bringing The Uniontown Hospital average length of stay below the state average. According to a CT Scan or MRI, nine of these patients actually had a stroke ruled out. Seven of the nine had either completely resolved symptoms or were stable and discharged to their residence while the other two were discharged to the Inpatient Rehabilitation Unit. A stroke was confirmed in ten of the twenty patients. Three patients were discharged to the Inpatient Rehabilitation Unit and six patients were comfort measures only and discharged to their residences upon the patients' and/or families' requests. Several of these patients had home hospice care. The remaining patient had complete resolution of symptoms within twenty-four hours and was discharged home in stable condition.

**VHA.**  
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In conclusion, it is the intent of The Uniontown Hospital to provide health care and to improve the health status of the people we serve consistent with our goal of clinical and service quality excellence.

Sincerely,



Gary Macioce  
Vice President, Operations

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