



SOCIETY OF CARDIOVASCULAR ANESTHESIOLOGISTS FOUNDATION



2009 –10 ANNUAL REPORT

## Executive Summary

In the first three years of service, the Society of Cardiovascular Anesthesiologists (SCA) Foundation exceeded its goals and objectives. The money raised has established a strong foundation, close collaboration with the Society of Cardiovascular Anesthesiologists has identified new programs which are being implemented, and awareness of our efforts is growing. This annual report chronicles the activities of the Foundation during the fiscal period of November 2009 – October 2010.

Based on the tenets of the Society of Cardiovascular Anesthesiology, the program areas of the SCA Foundation include Care, Investigation, and Knowledge. Having met the initial goals, the SCA Foundation Board of Directors undertook a rigorous strategic planning process to create a road map for the next three years. This plan, completed in October 2010, allowed the Board to refine the Foundation vision and mission. This refined plan has distinct goals and strategies to meet the needs of cardiovascular anesthesiologists and to improve care for cardiovascular patients through education and research.

**The board translated their beliefs into a vision for the future –**

**Optimal cardiovascular care for all.**

Our mission was refined to reflect the new goals and objectives while keeping the core functions intact.



## Letter from the Board Chair



The practice of medicine in general, and cardiac anesthesia specifically, offers a life rich with intellectual stimulation, the rewards of improving the lives of patients, and the day-to-day camaraderie of working with colleagues who share your passion. I don't have to ask you why you love it – I have experienced it first hand!

But cardiovascular anesthesiology is facing tremendous challenges. Our patients are increasingly fragile and complex, the pace of new information is increasing, and the activities required to build a career come after the many hours of just being a doctor.

The Society of Cardiovascular Anesthesiologists (SCA) has, for the past 30 plus years, provided education and support for cardiac anesthesiologists as clinicians. However, as a member-based society, the SCA has not had the resources to develop national initiatives, expand the research grant program, or provide training to enable our members to become leaders.

The SCA Foundation was established to increase fundraising and philanthropic efforts to advance the mission of the SCA. With the generous support of our donors, the SCA Foundation has met the initial fundraising goals, and has been able over the past 3 years to continue prior programs (Research Grants) and to implement new projects (Kaplan Leadership Academy, FOCUS Patient Safety Initiative).

Although the Foundation continues to be active in raising money, this past year has been more inwardly focused. After the intense fundraising activity of the first two years, the Board went through a careful and detailed strategic planning process to explore how we could best serve our donors and the SCA members. We emerged from this process with a renewed dedication to improve the lives of cardiovascular patients, and to enhance and continuously improve the profession of cardiovascular anesthesiology. We also emerged knowing that we can do nothing without the continued support of the SCA members and our other donors.

Our strategic plan includes continuing to fund the SCA research grant program that provides early support for our talented researchers. In this report you will read of Dr. Tomas Drabek's success, which began with an SCA Starter Grant. Here you can also meet the recipients of the 2010 Starter and Mid-Career grants. Our strategic plan also includes continuing our efforts in patient safety. The early phases of FOCUS have been completed and results from this SCA/SCA Foundation funded project are being published, even as we begin on a three year, AHRQ-funded collaborative with Dr. Pronovost's group at Johns Hopkins. Finally, our strategic plan includes continued expansion of the Kaplan leadership academy for our young members, to provide them with opportunities for training in leadership within the SCA, at home, and in the nation.

I believe that the future of cardiac anesthesiology is bright. Our cases are difficult, but we have increasingly sophisticated tools and a better understanding of how to care for them. With the continued support of our donors, the SCA and the SCA Foundation will be at the forefront of cardiovascular care. I look forward to continuing this exciting journey with you!

A handwritten signature in black ink that reads "Joyce Wahr". The signature is stylized and fluid.

Joyce A. Wahr, M.D.  
Board Chair, SCA Foundation  
University of Michigan

## Board of Directors 2009–10

### Chair

Joyce A. Wahr, M.D.  
*University of Michigan*

### Vice-Chair

John E. Ellis, M.D.  
*University of Pennsylvania  
School of Medicine*

### Secretary–Treasurer

Judith A. Fabian, M.D.

### Directors

Solomon Aronson, M.D.  
*Duke University Medical Center*

Ellise S. Delphin, M.D.  
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*Oklahoma University  
Health Sciences Center*

Joel A. Kaplan, M.D.  
*University of California,  
San Diego*

Christina T. Mora Mangano, M.D.  
*Stanford University*

Nancy A. Nussmeier, M.D.  
*State University of New York –  
Upstate Medical University*

Michael F. Roizen, M.D.  
*The Cleveland Clinic*

Salwa A. Shenaq, M.D.

Daniel M. Thys, M.D.  
*St. Luke's Roosevelt Hospital*

### Executive Director

John R. Melleky, CFRE

# The Strategic Plan for the Future



In 2009–10 the Board of Directors of the SCA Foundation initiated a strategic planning initiative. As the Foundation had exceeded its initial fundraising goals, this process included analyzing current programs and giving trends. The organization set the following goals and objectives to define the direction over the next three years. Our mission is to provide optimal cardiovascular care for all. The objectives allow the SCA Foundation to build an infrastructure to support enhanced programs in the areas of care, investigation, and knowledge.

## Planning Objective 1:

**Program** Advance patient safety and continuous improvement of the profession.

- A:** Develop collaborative patient safety project(s).
- B:** Maintain research grant guidelines in alignment with the SCA research agenda.
- C:** Identify leadership development initiatives and develop corresponding grant guidelines.
- D:** Establish Program/Grantmaking Committee (including non-board representatives) to oversee all program initiatives and goals A–C above.
- E:** Enhance communications/interaction between the SCA and SCA Foundation leadership regarding program development.

### Planning Objective 2:

**Development** Increase fundraising capacity in order to continue major project support while building and expanding the Foundation's base of support.

- A:** Increase total contributions while increasing percentage of unrestricted support.
- B:** Increase giving (dollars and donors) among the SCA membership.
- C:** Increase corporate and foundation support (restricted) of priority initiatives and activities.
- D:** Maintain support from the SCA and other related professional societies and associations.
- E:** Establish and charge Development Committee with oversight of goals A–D above.

### Planning Objective 3:

**Governance** Develop volunteer base for Committees and Board through recruitment of engaged individuals interested in Foundation initiatives.

- A:** Recruit individuals to aid in the ongoing development of the Board and the Foundation's leadership.
- B:** Identify and recruit individuals to serve on proposed and established standing committees.
- C:** Ensure the SCA Foundation governance structure is aligned to support overall strategy.

**D:** Establish training and orientation opportunities for the SCA Foundation Board and committee members.

**E:** Establish a Governance Committee and charge with oversight of goals A–D.

**F:** Enhance communications/interaction between the SCA and SCA Foundation leadership related to governance.

### Planning Objective 4:

**Marketing** Utilize marketing strategies to reinforce patient safety and professional development messages and encourage financial support of the Foundation as appropriate.

**A:** Develop overall marketing plan, emphasizing the various constituencies and support of revenue-generating strategies outlined in Planning Objectives 1–3.

**B:** Assign oversight of marketing to Development Committee.

### Planning Objective 5:

**Personnel** Maintain professional personnel required to effectively fulfill program, fundraising, and administrative objectives.

**A:** Invest in personnel required to achieve priority needs outlined in the strategic plan.

**B:** Invest in infrastructure to support personnel.

# INVESTIGATION



Research plays a significant role in keeping medical professions at the cutting edge of medicine. The SCA Foundation's research funding plays a dual role, as it both provides new knowledge about cardiovascular disease, and gives inquisitive and intelligent young researchers critical funding to establish their careers. In the words of one of this year's recipients:

*The SCA award is a great leap forward to establish my projects and myself in this new environment. I have received funding previously both during a research fellowship at Harvard Medical School and from the German Research Council. Being currently in the transition from Fellow to Faculty at Duke, this award is an important argument for me to secure protected time and logistical support from the department. I have enjoyed great departmental support so far, but this competitive award will strengthen my research standing which is essential to becoming an independent investigator. This award shows my collaborators outside the clinical field that the cardiovascular anesthesia community*

*recognizes the underlying problems of gut integrity preservation during cardiothoracic anesthesia. That recognition of my research focus will be a great motivator for my collaborators' contribution.*



**Joern A. Karhausen, M.D., Ph.D.**

Duke University Medical Center  
2010 Recipient Roizen  
Anesthesia Research Foundation  
New Investigator Grant

Our goal is to provide grants to all promising researchers among our cardiovascular fellows and faculty.

At the 2010 SCA Annual Meeting, the SCA Research Committee and the SCA Foundation awarded \$290,000 in grants, including \$150,000 in new 2010 research grants. We would like to recognize the International Anesthesia Research Society (IARS), the Clinical Practice Enhancement and Anesthesia Research Foundation, and Michael Roizen for their contributions to make these named grants possible.

The next great advance in cardiovascular anesthesiology is likely to **come from within the SCA** and is likely to have been supported by the **SCA Foundation.**

## Research Funding Leads to Results

Tomas Drabek, M.D., Assistant Professor at the University of Pittsburgh School of Medicine received an SCA Starter Grant to study, "The Effect of Microglial Activation on Neurologic Outcome after Deep Hypothermic Circulatory Arrest in Rats."

At the time of receiving the grant, Drabek noted, "I feel extremely honored as a recipient of the SCA Starter Grant. I would definitely suggest that my peers apply if they have a project pertinent to the field of cardiac anesthesia. The SCA Foundation represents one of the few funding agencies that is focused on the patient."

**Dr. Tomas Drabek's 2008 SCA Starter Grant provided an important step in the development of preliminary data for a successful application for an American Heart Association grant, various publications, and a boost for his academic career.**



As his SCA Foundation funded work progressed and is now complete, Dr. Drabek has seen tremendous results from his efforts. The project generated three published papers in Resuscitation and Anesthesia & Analgesia, and six abstracts. The grant-supported research also generated data for multiple local presentations to other fellows and medical students and prompted numerous awards, including the Young Investigator Award presented to Manuella Lahoud-Rahme, M.D. at the 6th Resuscitation Science Symposium of the American Heart Association. Most importantly, this funded research led to Drabek receiving a Beginning Grant-in-Aid from his local chapter of the American Heart Association to further the research.

This continuous success in obtaining funding, publishing activity, and teaching resulted in Dr. Drabek receiving a permanent position within his department and achieving the rank of Assistant Professor. He also has been accepted for the ABA "Alternate Entry Path" through which outstanding anesthesiology academicians moving to the United States can become productive members of U.S. academic anesthesiology programs.

## SCA/IARS Starter Grants

**Timo Brandenburger, M.D.**

University Hospital  
Duesseldorf, Germany

*Effects of microRNA-1 knockdown on IGF-1 and cMet expression and impact on hypoxia-induced cell death in rat myoblast cells H9c2*

**Tetsuro Sakai, M.D., Ph.D.**

University of Pittsburgh

*Role of Tissue Inhibitor of Metalloproteinase in Stem Cell Mediated Neuronal Protection In Vitro*

## Roizen Anesthesia Research Foundation New Investigator Grant

**Joern A. Karhausen, M.D., Ph.D.**

Duke University Medical Center

*The intestinal injury in a rat model of deep hypothermic cardiac arrest: critical role of mucosal mast cells for barrier function and inflammation*

## SCA/IARS Mid-Career Grant

**Gregory MT Hare, M.D.**

St. Michael's Hospital

*Determining the Hemoglobin Threshold for Hypoxic Cellular Responses: Studies in Anemic Hypoxia Inducible Factor (HIF)-ODD-Luciferase Mice*



# KNOWLEDGE

## Kaplan Fellows Program

The life of every individual is shaped by timely and thoughtful mentorship. Dr. Joel Kaplan, physician, educator, dean, chancellor, and past president of the SCA, has articulated an exciting vision for cardiovascular anesthesiology fellows and junior faculty. His vision is to establish leadership training and mentoring that will put them not only into positions of leadership within anesthesiology, but also in the offices of Chair, Dean, and hospital CEO. Many cardiovascular anesthesiologists have led the way before us. The cardiovascular anesthesiology field has great talent, but even great talent can be improved through mentoring and training.

Our goal is to create a unique leadership program for fellows and junior faculty.

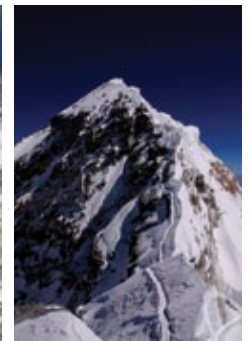
The Kaplan Fellows program has a three year roll out, with full implementation by the 2012 SCA Annual Meeting. The program will include seminars in business and leadership skills that will rotate on a three year basis. In addition, plans include developing criteria for a scholarship to leadership development seminars, like those offered by the American College of Physician Executives.





### Earl Wynands Lecture

Established in 2009, The Earl Wynands Lecture brings prominent speakers to the SCA Annual Meeting to share the latest developments and insights in medicine. The 2010 SCA Annual Meeting in New Orleans featured the inaugural lecturer Michael P. Grocott, M.B.B.S. His lecture entitled "Research on Everest: From concept to completion" presented his five years of research. With a band of ambitious and fearless intensivists, he designed and implemented an amazing research project to study human adaption to the extreme atmospheric conditions at Mt. Everest.



In 2009–10, the Cardiovascular Thoracic Section of the Canadian Anesthesiologists Society pledged a gift to help support the Earl Wynands Lecture for three years starting in 2011. Through the efforts of Jamie Ramsay, M.D. and Peter Slinger, M.D., this collaboration brings together the Canadian members of the SCA and the Canadian Anesthesiologists Society to honor Earl Wynands and his significant contributions to cardiac anesthesiology. Dr. Wynands dedicated his career to furthering the advancement of knowledge and education in cardiac anesthesiology, and is a beloved mentor and teacher, as well as an international leader. He served as President of the both the Society of Cardiovascular Anesthesiologists, and the Canadian Anesthesiologists Society.



# CARE The FOCUS Patient Safety Initiative

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Flawless patient care is our daily goal, but the complexities of each case, the limitations of our systems, and the intricate interactions of teams can make reaching this goal difficult. Cardiac surgery is a high-risk procedure performed by a multidisciplinary team using complex tools and technologies. Efforts to improve patient safety and reduce human error for cardiac surgical patients have been ongoing for more than a decade, yet the literature provides little guidance regarding best practices for hazard identification and interventions to effectively reduce risk.

FOCUS (Flawless Operative Cardiovascular Unified Systems) was conceived and initiated by the SCA and SCA Foundation as a way to understand the human factors that lead to less than perfect care, and to design interventions to build flawless teams. FOCUS employs rigorous social science and engineering methodologies in order to develop and measure the effectiveness of our interventions on complex systems in the operating room and across the entire episode of care. In the past year, FOCUS has been developing a collaboration of cardiac operative care societies – the SCA, AORN (nursing), AmSECT (perfusion), and STS (thoracic surgeons).

## FOCUS

FLAWLESS OPERATIVE CARDIOVASCULAR UNIFIED SYSTEMS

### The goals of FOCUS include:

To become the premier multidisciplinary research and implementation collaborative within cardiovascular surgery to reduce preventable harm in cardiac surgical patients,

To improve recognition and understanding of potential latent system hazards and develop specific risk-reduction interventions,

To reduce rate of surgical site and other acquired infections in cardiovascular surgical patients.

The first phase of FOCUS involved systematic investigation into how and why errors occur in cardiac operating rooms, and has generated three publications in the 2009–10 year. Scientific observations were collated and analyzed in over 500 hours of coding and programming which led to the development of four teamwork tools that will be used by cardiac operative teams to eliminate error.

## Grant Received

In late 2010, The Agency for Healthcare Research and Quality (AHRQ) recognized the pioneering nature of this work and provided a \$4 million grant to improve teamwork to prevent infections in cardiac operations. This research is a joint collaboration of the SCA Foundation and the Quality and Safety Research Group (QSRG) at the Johns Hopkins School of Medicine.

*“This study will examine whether a collaborative program to reduce infections and improve teamwork is more effective than the traditional passive method of sharing outcome data. This can positively impact cardiac surgery.”*

**Bruce Spiess, M.D.**  
Chair, FOCUS Initiative

This three year study, led by Dr. Peter Pronovost, M.D., Ph.D., director of QSRG, uses the Comprehensive Unit Based Safety Program (CUSP) to improve teamwork and safety culture, and technical interventions to prevent healthcare associated infections (surgical site infections, central line association bloodstream infections, and ventilator associated pneumonia). Dr. Pronovost states that, “For too long efforts to improve safety have been independent rather than interdependent, competitive rather than cooperative, and focused on efforts rather than results. In this project we will change this, working together, guided by science, informed by practice, to reduce patient harm.”

Seventeen SCA sites throughout the United States will participate in this study led by Dr. Peter Pronovost, M.D, Primary Investigator, with Joyce Wahr, M.D. and Bruce Spiess, M.D., as Co-Investigators.

The sites and primary cardiovascular anesthesia contacts are:

**Baystate Medical Center**  
Springfield, MA / Anath Kashikar, M.D.

**Bethesda North Hospital**  
Cincinnati, OH / Elizabeth Burgess, M.D.

**Duke University**  
Durham, NC / Alina Nicora, M.D.

**Lehigh Valley Hospital**  
Allentown, PA / Nanette Schwann, M.D.

**Liberty Hospital**  
Liberty, MO / Mark Beltran, M.D.

**Medical University of South Carolina**  
Charleston, SC / James Abernathy, M.D.

**New York University**  
New York, NY / Marc Kanchuger, M.D.

**San Francisco Veterans Affairs Medical Center**  
San Francisco, CA / Martin London, M.D.

**Shands Hospital at the University of Florida**  
Gainesville, FL / Gregory Janelle, M.D.

**Stanford University**  
Stanford, CA / Christina Mora Mangano, M.D.

**St. John’s Mercy**  
St. Louis, MO / Christopher Young, M.D.

**St. Lukes–Roosevelt Hospital Center**  
New York, NY / Zak Hillel, M.D.

**University of Maryland Medical Center**  
Baltimore, MD / Alina Grigore, M.D.

**University of Miami/Jackson Memorial Hospital**  
Miami, FL / Michael Barron, M.D.

**University of Michigan**  
Ann Arbor, MI / Wei Lau, M.D.

**University of Pittsburgh Medical Center Presbyterian Hospital**  
Pittsburgh, PA / Erin Sullivan, M.D.

**University of Texas Southwestern**  
Dallas, TX / Philip Greilich, M.D.

The FOCUS Initiative relies on a committee of dedicated volunteers listed below.

## Steering Committee

### Chair

Bruce D. Spiess, M.D.  
*VCU Medical Center*

James H. Abernathy, M.D.  
*Medical University  
of South Carolina*

Lebron Cooper, M.D.  
*University of Miami Hospital*

David Fitzgerald, C.C.P.  
*INOVA Fairfax Hospital  
AmSECT Representative*

Christine Goeschel R.N.,  
M.P.A., M.P.S., Sc.D.  
*Johns Hopkins University  
School of Medicine*

Martin London, M.D.  
*San Francisco Veterans  
Administration Medical Center*

Elizabeth Martinez, M.D., M.H.S.  
*Massachusetts General Hospital*

Nancy A. Nussmeier, M.D.  
*State University of New York –  
Upstate Medical University*

Peter Pronovost, M.D., Ph.D.  
*Johns Hopkins University  
School of Medicine*

Gary W. Roach, M.D.  
*Kaiser Permanente*

Juan Sanchez, M.D., PhD.  
*St. Mary's Hospital  
STS Representative*

Patricia Seifert, R.N., M.S.N.  
*INOVA Heart and  
Vascular Institute  
AORN Representative*

Thoralf Sundt, M.D.  
*Massachusetts General Hospital*

David Thompson, D.N.Sc.,  
M.S., R.N.  
*Johns Hopkins University  
School of Medicine*

Joyce A. Wahr, M.D.  
*University of Michigan*



## Advisory Committee

Solomon Aronson, M.D.  
*Duke University Medical Center*

Paul G. Barash, M.D.  
*Yale University*

Steven N. Konstadt, M.D.  
*Maimonides Medical Center*

Alan F. Merry, MBChB FANZCA  
*University of Auckland*

Wei C. Lau, M.D.  
*University of Michigan*

Jonathan B. Mark, M.D.  
*Duke University Medical Center*

M. Blair Marshall, M.D., F.A.C.S.  
*Georgetown University  
School of Medicine  
STS Representative*

Christina Mora Mangano, M.D.  
*Stanford University*

Glenn S. Murphy, M.D.  
*Evanston Hospital*

Scott T. Reeves, M.D.  
*Medical University  
of South Carolina*

Nanette Schwann, M.D.  
*Lehigh Valley Hospital*

Scott Shappell, Ph.D.  
*Clemson University*

Claudia D. Spies, M.D.  
*University of Berlin*

Erin A. Sullivan, M.D.  
*University of Pittsburgh*

Sugantha Sundar, M.D.  
*Beth-Israel Deaconess  
Medical Center*

Mark Taylor, M.D.  
*West Penn Allegheny  
Health System*

Michael H. Wall, M.D., F.C.C.M.  
*Washington University  
School of Medicine*

David P. Webb  
*Vanderbilt University  
Medical Center*

Christopher Young, M.D.  
*St. John's Mercy*

## Committee Members

Sharon A. Ashley, M.D.,  
M.P.H., M.B.A.  
*Memorial Hospital – West*

Atilo Barbeito, M.D.  
*Duke University Medical Center*

Michael Barron, M.D.  
*University of Miami –  
Jackson Memorial*

Laura Bauer, M.P.H.  
*Johns Hopkins University  
Quality Safety Research Group*

Ellise Delphin, M.D.  
*Montifiore Medical Center*

John E. Ellis, M.D.  
*University of Pennsylvania  
School of Medicine*

Jane C.K. Fitch, M.D.  
*Oklahoma University  
Health Sciences Center*

Laurent G. Glance, M.D.  
*University of Rochester  
School of Medicine*

Alina M. Grigore, M.D.  
*University of Maryland*

Marc S. Kanchuger, M.D.  
*New York University  
School of Medicine*

## Financial Report

The SCA Foundation hired Mitchell, Wiggins, and Company LLP to conduct an independent financial audit for the fiscal year of 2009–10. The audit was conducted in accordance with auditing standards generally accepted in the United States of America. The financial statements present fairly, in all material aspects, the financial position of the SCA Foundation as of October 31, 2010, and the changes in its net assets and its cash flows for the year then ended in conformity with accounting principles generally accepted in the United States of America.

### Society of Cardiovascular Anesthesiologists Foundation

#### Statement of Financial Position

##### Assets

###### Current assets

|                           |    |        |
|---------------------------|----|--------|
| Cash and cash equivalents | \$ | 21,397 |
|---------------------------|----|--------|

|                     |  |   |
|---------------------|--|---|
| Accounts receivable |  | 0 |
|---------------------|--|---|

|   |  |         |
|---|--|---------|
| Pledges receivable – net<br>– current portion |  | 419,876 |
|---|--|---------|

|                  |  |       |
|------------------|--|-------|
| Prepaid expenses |  | 1,880 |
|------------------|--|-------|

|                             |  |                |
|-----------------------------|--|----------------|
| <b>Total current assets</b> |  | <b>443,153</b> |
|-----------------------------|--|----------------|

|                              |  |       |
|------------------------------|--|-------|
| Property and equipment – net |  | 3,727 |
|------------------------------|--|-------|

##### Other assets

|   |  |           |
|---|--|-----------|
| Pledges receivable – net<br>– less current position |  | 1,464,386 |
|---|--|-----------|

|             |  |           |
|-------------|--|-----------|
| Investments |  | 1,137,107 |
|-------------|--|-----------|

|                           |  |                  |
|---------------------------|--|------------------|
| <b>Total other assets</b> |  | <b>2,601,493</b> |
|---------------------------|--|------------------|

|                     |  |                     |
|---------------------|--|---------------------|
| <b>Total Assets</b> |  | <b>\$ 3,048,373</b> |
|---------------------|--|---------------------|

##### Liabilities and Net Assets

###### Current liabilities

|  |    |         |
|--|----|---------|
| Accounts payable<br>and accrued expenses | \$ | 158,409 |
|--|----|---------|

##### Net assets

|              |  |         |
|--------------|--|---------|
| Unrestricted |  | 874,810 |
|--------------|--|---------|

|                        |  |           |
|------------------------|--|-----------|
| Temporarily restricted |  | 2,015,154 |
|------------------------|--|-----------|

|                         |  |                     |
|-------------------------|--|---------------------|
| <b>Total net assets</b> |  | <b>\$ 2,889,964</b> |
|-------------------------|--|---------------------|

|   |  |                    |
|---|--|--------------------|
| <b>Total Liabilities and Net Assets</b> |  | <b>\$3,048,373</b> |
|---|--|--------------------|

### Society of Cardiovascular Anesthesiologists Foundation

#### Statement of Activities

##### Changes in unrestricted net assets

###### Revenue and support:

|                          |    |         |
|--------------------------|----|---------|
| Investment Income (loss) | \$ | 143,480 |
|--------------------------|----|---------|

|       |  |       |
|-------|--|-------|
| Other |  | 9,625 |
|-------|--|-------|

|                                       |  |         |
|---------------------------------------|--|---------|
| Net assets released from restrictions |  | 310,989 |
|---------------------------------------|--|---------|

|                                  |  |                |
|----------------------------------|--|----------------|
| <b>Total revenue and support</b> |  | <b>464,094</b> |
|----------------------------------|--|----------------|

###### Expenses:

|           |  |         |
|-----------|--|---------|
| Operating |  | 166,207 |
|-----------|--|---------|

|           |  |       |
|-----------|--|-------|
| Education |  | 4,762 |
|-----------|--|-------|

|          |  |         |
|----------|--|---------|
| Research |  | 294,713 |
|----------|--|---------|

|       |  |         |
|-------|--|---------|
| FOCUS |  | 241,891 |
|-------|--|---------|

|                       |  |                |
|-----------------------|--|----------------|
| <b>Total expenses</b> |  | <b>707,573</b> |
|-----------------------|--|----------------|

|  |  |                  |
|--|--|------------------|
| <b>Decrease in unrestricted net assets</b> |  | <b>(243,479)</b> |
|--|--|------------------|

##### Changes in temporarily restricted net assets

|               |  |        |
|---------------|--|--------|
| Contributions |  | 94,525 |
|---------------|--|--------|

|                                       |  |           |
|---------------------------------------|--|-----------|
| Net assets released from restrictions |  | (310,989) |
|---------------------------------------|--|-----------|

|  |  |                  |
|--|--|------------------|
| <b>Increase in temporarily<br/>restricted net assets</b> |  | <b>(216,464)</b> |
|--|--|------------------|

|  |  |                  |
|--|--|------------------|
| <b>Increase (decrease) in net assets</b> |  | <b>(459,943)</b> |
|--|--|------------------|

|                                       |  |                  |
|---------------------------------------|--|------------------|
| <b>Net assets – beginning of year</b> |  | <b>3,349,907</b> |
|---------------------------------------|--|------------------|

|                                 |  |                     |
|---------------------------------|--|---------------------|
| <b>Net assets – end of year</b> |  | <b>\$ 2,889,964</b> |
|---------------------------------|--|---------------------|

## The Founders Society

The supporters of the SCA Foundation are the founders of the organization. As we close out this first campaign to create the Foundation, we wish to thank each of the following individuals for either making a gift to the Foundation or a pledge over multiple years. Their faith in our mission secures the future.

*\*Denotes pledge made over three or more years*

### Founder's Circle

Clinical Practice Enhancement  
and Anesthesia Research Foundation\*

International Anesthesia  
Research Society\*

JHU Quality and  
Safety Research Group\*

Society of Cardiovascular  
Anesthesiologists

Michael F. Roizen, M.D.\*

### Cornerstone League

Ellise Delphin, M.D.\*

Jane C. K. Fitch and John E. Fitch\*

Joel A. Kaplan, M.D.\*

Nancy A. Nussmeier, M.D.\*

Joyce A. Wahr, M.D.\*

### Foundation League

Dr. and Mrs.

George E. Burgess, M.D.\*

John E. Ellis, M.D.\*

Christina T.

Mora Mangano, M.D.\*

### Creator

Edwards Lifesciences\*

Nonin

Paul G. Barash, M.D.\*

Glenn P. Gravlee, M.D.\*

Bruce D. Spiess, M.D.  
and Heather Spiess\*

### Builder

Bordas & Bordas, PLLC

New York University

Drs. Solomon and Leena Aronson\*

Dr. John F. Butterworth and  
Pam Butterworth\*

Richard F. Davis, M.D.\*

Gregg S. Hartman, M.D.\*

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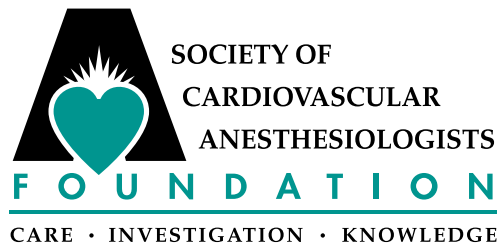
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