### Cedars-Sinai by the Numbers

**July 1, 2005 – June 30, 2006**

<table>
<thead>
<tr>
<th>Category</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient Days</td>
<td>274,981</td>
</tr>
<tr>
<td>Outpatient Visits</td>
<td>279,574</td>
</tr>
<tr>
<td>Inpatient Visits</td>
<td>53,800</td>
</tr>
<tr>
<td>Emergency Department Visits</td>
<td>77,038</td>
</tr>
<tr>
<td>Patients Cared for by Cedars-Sinai</td>
<td></td>
</tr>
<tr>
<td>Medical Care Foundation</td>
<td>110,327</td>
</tr>
<tr>
<td>Psychiatry and Mental Health Patient Days</td>
<td>17,980</td>
</tr>
<tr>
<td>Total Number of Research Projects</td>
<td>870</td>
</tr>
<tr>
<td>Total NIH Research Funding</td>
<td>$29.1 million</td>
</tr>
<tr>
<td>Total Number of Residents Trained</td>
<td>230</td>
</tr>
<tr>
<td>Donations</td>
<td>$74.3 million</td>
</tr>
<tr>
<td>Total Volunteer Hours</td>
<td>Approximately 200,000</td>
</tr>
<tr>
<td>Community Benefit Contribution</td>
<td>$135.8 million</td>
</tr>
</tbody>
</table>

(Community Benefit Contribution includes free and part-pay care for the uninsured and those with limited means, the unpaid costs of government programs and hundreds of community service programs at the Medical Center and in local schools, homeless shelters and community centers.)
Patients and visitors to Cedars-Sinai, as well as healthcare professionals and researchers from around the country, often remark about our “culture of quality,” and they want to know what we do to achieve this throughout the institution.

The simple answer is in the people who choose to care for patients here, to learn here, to research here, to volunteer here, and to work here. Most of them could work at any hospital in the country, yet there is a reason they choose Cedars-Sinai. They want to be in a unique environment where quality and innovation are truly valued, where they are surrounded by colleagues who share their passion and commitment, and where patient care is clearly the top priority.

The complex answer is found in how we work: continually measuring our progress and having the agility to make changes – big and small – that are setting the bar for quality at hospitals and health systems throughout the nation. This plays out on a daily basis in hundreds of places throughout the Cedars-Sinai Health System, as innovative new ideas are discussed, “tests of change” are planned, and pilot programs are evaluated and honed.

For while we are very proud of our results and our awards, we didn’t get to this position by resting on our laurels, and we take seriously our responsibility to our patients, our community and the nation to continue leading the quest for health in the years ahead.

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Thomas M. Priselac  
President and CEO
CEDARS-SINAI HEALTH SYSTEM | REPORT TO THE COMMUNITY 2006

Patient Care

► Cedars-Sinai was named one of the top five hospitals in the nation – and the only one in the western U.S. – for delivering high quality, safe and equitable patient care, according to an independent analysis by University HealthSystem Consortium, an alliance of the nation’s top academic medical centers. The other hospitals in the top five were Brigham and Women’s Hospital, Mayo Clinic, Ohio State University Medical Center, and University of Michigan Hospitals and Health Centers.

► The January 2006 opening of the 250,000-square-foot, 150-bed Saperstein Critical Care Tower dramatically expanded Cedars-Sinai’s intensive care services to meet the community’s growing needs. The tower is named for the David Saperstein family, which made the single largest donation in Cedars-Sinai history.

► Cedars-Sinai Medical Center was once again named one of “America’s Best Hospitals” by U.S. News & World Report. Cedars-Sinai was ranked among the top 50 hospitals in the nation in six specialty categories: Digestive Disorders, Heart and Heart Surgery, Kidney Disease, Neurology and Neurosurgery, Endocrinology and Gynecology.

► For the 19th consecutive year, Cedars-Sinai was named by Los Angeles consumers as the Most Preferred Hospital Overall in an independent survey. The National Research Corporation’s annual survey also again awarded Cedars-Sinai its Consumer Choice Award for ranking highest in each of the six categories for the Los Angeles Metropolitan Statistical Area, including: Best Overall Quality, Best Image and Reputation, Most Personalized Care, Best Doctors, Best Nurses, and Most Preferred Hospital Overall.

► Cedars-Sinai successfully completed the initial two-year pilot phase of Transforming Care at the Bedside (TCAB), a national program to improve patient care. Cedars-Sinai was one of just 13 hospitals in the U.S. –
and the only hospital in Southern California – to participate in this program created and sponsored by the Institute for Healthcare Improvement and the Robert Wood Johnson Foundation.

➤ Cedars-Sinai Medical Group and Cedars-Sinai Health Associates both achieved the highest level of performance among medical groups in California participating in an independent Pay for Performance analysis by the Integrated Healthcare Association. Criteria included clinical quality, patient satisfaction and use of information technology.

➤ Cedars-Sinai was the first hospital in California, and possibly the first in the nation, to develop and commission a small, lightweight “traveling Torah” that can be brought to patients’ bedsides. The small Torah has generated interest and inquiries from other hospitals in the U.S. and beyond.

➤ Cedars-Sinai’s Medical Delivery Network began implementing a new electronic medical record system to support safe, high quality medical care.

➤ Cedars-Sinai was one of only seven hospitals in California and 100 in the nation to receive “Most Wired” designation in a survey conducted by Hospitals & Health Networks, a journal of the American Hospital Association. The award recognized advanced use of information technology in patient and workforce safety and quality, customer service, business process and public health and safety.

➤ Cedars-Sinai created a Rapid Response Team of care providers who can give immediate support to nurses and patients during very urgent care situations outside the intensive care setting. Representatives from Nursing, Medicine, Surgery, Respiratory Therapy and Cardiology serve on the team and can respond to stabilize a patient and help coordinate a transfer to an intensive care unit, if needed. The team has helped to improve clinical outcomes and has also helped to reduce unplanned admissions to intensive care units.

➤ The Medical Center’s expertise in rapid, high quality care to stroke patients was honored by a national award from the American Stroke Association, called Get With the Guidelines – Stroke Initial Performance Achievement Award.

➤ The Comprehensive Transplant Center’s living donor liver transplant program was the first in the nation to receive “UNOS-approved” designation. UNOS, the United Network for Organ Sharing, administers the nation’s transplant policies and programs.

➤ The Comprehensive Transplant Center developed an online liver transplant support group that allows interested patients to communicate and ask questions regardless
of their health status or distance from the Medical Center. The virtual support group, which functions like an e-mail distribution list, is completely confidential and restricted to patients on the liver transplant waiting list at Cedars-Sinai.

► Cedars-Sinai expanded its Palliative Care Program, which provides compassionate and effective care to people diagnosed with a life-limiting condition. A second physician and a nurse practitioner were added to the care team, along with five specially trained volunteers who provide companionship, respite care and bereavement support to family members.

► The Cedars-Sinai Institute for Spinal Disorders pioneered combining 3-D computer-guided imaging technology with endoscopic surgical techniques to improve the safety, accuracy and efficiency of complex thoracic disc surgery.

► Cedars-Sinai’s Emergency Department, a Level 1 Trauma Center, served more than 77,000 patients – averaging 216 patients per day. The department implemented a 7-bed Fast Track unit that allows the 20 percent of patients who have less serious injuries and conditions to be quickly seen and treated, helping to reduce wait times.

► CarePages™, a free service that allows patients to create their own private, password-protected webpages where they can share personal news with family and friends, receive messages, and control the release of updates about their medical condition, was implemented throughout the Medical Center.

► In one of several innovative programs serving as national models to improve quality and patient safety in hospitals, Cedars-Sinai is adapting and incorporating some of the same safety techniques used by airline crews. Called Crew Resource Management by the airline industry, the program empowers every member of a team to speak up and call a “time out” if they have a concern about any aspect of a passenger’s – or, in this case a patient’s – safety.

► A pilot volunteer program launched in the Labor and Delivery unit allows volunteers to accompany nurses on rounds to offer
help to patients and visitors in various ways – from answering questions about the hospital, to obtaining ice chips, blankets and magazines.

〉 The Department of Obstetrics and Gynecology established a Center for Minimally Invasive Gynecologic Surgery, one of a few such centers in California dedicated to both patient care and research.

〉 The Department of Neurosurgery was established with the elevation of the neurosurgery division to departmental status. The change follows the approval last year by the national Residency Review Committee of a neurosurgery residency program at Cedars-Sinai; of the 57 academic medical centers nationally that have such an accredited program, all have a separate Department of Neurosurgery.

〉 As part of its new Women’s Heart Center, Cedars-Sinai became the only medical center on the West Coast to provide an innovative, two-step pharmacological test to diagnose microvascular heart disease, a dysfunction of the heart’s small arteries that is often missed in women when physicians use conventional diagnostic methods such as angiograms and exercise stress tests.

〉 To help ensure patient safety and satisfaction, hundreds of physicians and nurses at Cedars-Sinai participated in the MD-RN Collaborative, an ongoing initiative to foster excellent communication and cooperation between physicians and nurses in units throughout the hospital.

〉 The Department of Psychiatry and Behavioral Neurosciences is among the nation’s first psychiatric care centers to have nurses, physicians and case managers do rounds together, meeting as a group with individual patients. This innovative approach provides coordinated, seamless care to address each patient’s unique psychiatric, medical and psychosocial needs.

〉 Cedars-Sinai’s 45-bed neonatal intensive care unit (NICU) is pioneering the use of state-of-the-art ventilators that will directly send information to patients’ electronic medical records, allowing healthcare professionals to spend less time on administrative tasks and more time at their patients’ bedsides.

〉 The Department of Pathology and Laboratory Medicine expanded its ability to perform newly developed molecular diagnostic tests that help physicians make personalized diagnoses about patients’ disease conditions. Using proteomics and genomics, pathologists are routinely performing highly accurate diagnostic tests to better predict how a specific patient will respond to different treatments.
Cedars-Sinai Medical Center opened an International Stem Cell Research Institute, which in its first year has begun conducting studies involving adult stem cells in neurology and neurosurgery, cardiology, and connective tissues. The goal is to expedite research from bench to bedside to result in more effective treatments.

Cedars-Sinai was recognized for having one of the 500 most powerful computers in the world. The supercomputer at the Spielberg Family Center for Applied Proteomics is used to analyze massive amounts of data from blood proteins. The technology allows physicians to more accurately predict how individual patients will respond to specific therapeutic interventions. This individualized medical approach has tremendous potential to advance treatment and improve outcomes for life-threatening diseases such as cancer and heart disease.

Researchers found that a nonabsorbable antibiotic – one that stays in the gut – may be an effective long-term treatment for irritable bowel syndrome (IBS). The findings, which showed that participants benefited from the antibiotic use even after the course of treatment ended, support previously published Cedars-Sinai research identifying small intestine bacterial overgrowth as a possible cause of the disease.

The Board of Governors Gene Therapeutics Research Institute has developed a new method of signaling therapeutic genes to turn “on” and “off,” a mechanism that could enable scientists to fine-tune genetic- and stem-cell based therapies to be safer, more controllable and more effective.

Researchers from the Samuel Oschin Comprehensive Cancer Institute found that capsaicin, an ingredient in hot peppers, caused human prostate cancer cells to kill themselves, and also dramatically slowed the development of prostate tumors in laboratory mice.

While most people know that chest pain can signify the presence of heart disease, it is less well known that shortness of breath can also be a serious cardiac symptom. Researchers found that patients with shortness of breath have a higher risk of dying from
cardiac disease than patients without symptoms, or even those with typical cardiac pain.

- Cardiology researchers have found that a synthetic form of Apolipoprotein A-I protein intravenously injected significantly shrank plaque in coronary arteries and moderated an immune response that contributes to plaque buildup and rupture.

- In the largest published study of its kind, with 1,100 patient cases reviewed, a minimally invasive surgical procedure for lung cancer called video-assisted thoracoscopic surgery (VATS) was shown to be as effective as open surgery, with a low risk of complications and high survival rates when performed by experienced thoracic surgeons.

- In a mouse study, researchers at the Maxine Dunitz Neurosurgical Institute developed a tool using bone marrow-derived neural stem cells and a newly discovered cytokine that worked in tandem to track and kill malignant brain tumors and provide long-term protection against their return.

- Veins taken from a patient’s leg to replace a blocked artery to the heart tend to degenerate over time, requiring a second bypass operation or balloon angioplasty to reopen the vessel. A study conducted at Cedars-Sinai’s Cardiovascular Intervention Center confirmed that medication-releasing stents reduce scar tissue formation and reduce short-term incidence of vessel re-narrowing, heart attack and death.

- Researchers at Cedars-Sinai’s Maxine Dunitz Neurosurgical Institute found in a Phase I clinical trial that a new method of delivering a dose of radioactive iodine – using a man-made version of scorpion venom as a carrier – successfully targeted deadly brain tumors without affecting neighboring tissue or body organs.

- Cardiologists at Cedars-Sinai implanted a patient who has congestive heart failure with the first experimental HeartPod™ system in the Los Angeles area. The implanted sensor device, developed by Cedars-Sinai researchers, is designed to obtain and report data about pressure build-up in the heart so the patient and physicians can take readings at any time, without the need for repeated cardiac catheterization procedures.

- The Board of Governors Gene Therapeutics Research Institute at Cedars-Sinai developed a way to overcome immune privilege in the brain to eradicate potentially deadly brain tumors such as glioblastoma multiforme and other types of brain infections.

- Researchers at the Louis Warschaw Prostate Cancer Center at the Samuel Oschin Comprehensive Cancer Institute have shown that Raloxifene, a drug commonly
used to treat osteoporosis, has a potential clinical benefit to treat men with prostate cancer.

- A study found that a targeted cancer drug given with low-dose chemotherapy shrank ovarian tumors and slowed progression of ovarian cancer in patients with recurrent disease. Bevacizumab is in a new class of “anti-angiogenesis” drugs that prevent the growth of blood vessels that feed tumors.

- An experimental laser-induced fluorescence spectroscopy device developed at Cedars-Sinai detected inflammatory cells in blood vessels. The goal is to develop a minimally invasive method to diagnose atherosclerotic plaque vulnerable to rupture, which leads to heart attacks and strokes.

- Patients with metabolic syndrome and a moderate level of calcium in the coronary arteries were shown to have a greater chance of having blockage of those arteries, as detected on a stress imaging test. Metabolic syndrome includes abdominal obesity, high blood pressure, abnormal cholesterol levels and high blood sugar, and frequently leads to diabetes and accelerated heart disease.

- In the first study to identify weight as an independent factor in ovarian cancer, researchers showed that obesity affects survival rates, shortens the length of time to recurrence of the disease, and leads to earlier death from the cancer. The study’s findings suggest that fat tissue excretes a hormone or protein that causes ovarian cancer cells to grow more aggressively.

- Researchers at the Saul and Joyce Brandman Breast Center at the Samuel Oschin Comprehensive Cancer Institute developed objective criteria to help physicians improve the accuracy and reliability of using PET scans to detect the spread of breast cancer to the lymph nodes.
Cedars-Sinai established a state-of-the-art Surgical Simulation and Training Laboratory that is one of the first of its kind in the western United States for teaching minimally invasive surgical techniques. The laboratory has several stations that allow both surgical residents and experienced surgeons to practice and fine-tune their skills using computer-based simulators for laparoscopic and endoscopic procedures, among others.

With the guiding philosophy that translational research and patient care are equally important for neurosurgeons, Cedars-Sinai established a Neurological Surgery Residency Program. Accredited by the American Council for Graduate Medical Education (ACGME) for up to five residents, it provides one year of training in general surgery and five years in neurosurgical surgery. Cedars-Sinai also offers a fellowship program in Neurosurgery — a one or two-year post-residency program.

The Medical Center established an ACGME-accredited training program in Thoracic Surgery to train future heart and lung surgeons. The program is one of only a few newly accredited programs in this field.

Cedars-Sinai began partnership with the Veterans Affairs Greater Los Angeles Healthcare System (VA) to expand its internal medicine residency program. The hospital hosts more than 130 residents who are being trained in how to use evidence-based medicine to care for patients from diverse cultural and socioeconomic backgrounds. Participants also have access to several hundred academic faculty members at both the VA healthcare system and Cedars-Sinai who are conducting research in areas ranging from cancer and cardiology to mental health and women’s health.

Cedars-Sinai received a new endowment for the Melvin Brody, MD Endowed Chair in Medical Education, which will support educational innovation for years to come. It is the first endowed chair at the Medical Center focused solely on medical education.

Cedars-Sinai received a grant from the U.S. Department of Labor, in partnership with the City of Los Angeles Workforce Investment Board, to implement a program called “Stand and Deliver” that provides mentoring and work experience to high school graduates from disadvantaged backgrounds. Participants will spend up to 20 weeks learning about healthcare jobs at Cedars-Sinai in both classroom and departmental work settings.

The Brawerman Nursing Institute at Cedars-Sinai partnered with both California State University, Los Angeles and UCLA’s School of Nursing to develop bachelor’s and master’s degree-prepared nurses, and collaborated with CSULA to help nurses with associate’s degrees earn their bachelor’s degrees and master’s degrees more quickly.
In FY 2006, Cedars-Sinai Health System’s community benefit contribution totaled more than $135.8 million. This includes free and part-pay care for the uninsured and those with limited means, the unpaid costs of government programs and literally hundreds of community service programs at the Medical Center and in local schools, homeless shelters and community centers.

Cedars-Sinai sponsored or participated in approximately 5,200 community programs that reached more than 258,000 people.

To reach children at an early age with information about healthy eating and physical activity, Cedars-Sinai developed Healthy Habits, a new program that brings health education to second-grade students and their parents. The program was successfully piloted at two local elementary schools.

Cedars-Sinai continued to fund and implement therapy groups to help K-2 students with mental health issues; and also supported parenting groups. For example, Cedars-Sinai helped fund and implement a New Mom-New Baby support group at the Los Angeles Free Clinic, which helps women to develop parenting skills and confidence.

The Psychological Trauma Center affiliated with Cedars-Sinai’s Department of Psychiatry and Behavioral Neuroscience celebrated its 25th anniversary of providing mental health services to elementary and secondary school students. The center’s “Share and Care Program” serves 11 Los Angeles schools, conducting art therapy and group sessions to help children cope with violence they’ve encountered at home, in their neighborhood, or at school.

Cedars-Sinai reached more than 30,000 seniors with health fairs, exercise programs, and screening programs for conditions such as cardiovascular disease, diabetes and hypertension; and offered immunizations, lectures and workshops.

Cedars-Sinai continued collaboratives with the Alzheimer’s Association, the city of West Hollywood, the city of Los Angeles’
Department of Aging, the city of Beverly Hills and the Delta Senior Center in Los Angeles to provide clinical and educational services such as screenings, immunizations and lectures. The organization also continued its partnerships with the 2nd A.M.E. Church, 88th Street Church of God in Christ, Park La Brea community, People Coordinated Services, and Temple Beth Am.

- Cedars-Sinai contributed computers and funding to help open a computer laboratory for seniors in the senior center at People Coordinated Services in Los Angeles, in collaboration with the Los Angeles Unified School District Adult Division and the city’s Department of Aging. More than 80 adults have registered to take computer lessons at the center.

- The C.O.A.C.H. (Community Outreach Assistance for Children’s Health) for Kids® program continued to bring free health and dental care services to low-income children. Staffed by Cedars-Sinai professionals and volunteers, two fully equipped mobile units – “medical clinics on wheels” – make regularly scheduled visits to community centers, schools and shelters to provide immunizations and screenings, diagnosis and treatment of minor illnesses.

- Cedars-Sinai continued to be the only medical center in Los Angeles to sponsor Lifeline®, a service where seniors wear either a wristband or necklace – or use a special telephone communicator – allowing them to press one button to call for help in case of an injury or other health problem. Cedars-Sinai staff members and volunteers visit seniors’ homes to install the system and explain how to use it.

- The P.O.O.C.H. (Pets Offering Ongoing Care and Healing) Program expanded to allow visits from canine volunteers and their owners to patients at the outpatient cancer center of the Samuel Oschin Comprehensive Cancer Institute. First introduced in the hospital’s rehabilitation unit in 1992, the P.O.O.C.H. Program involves more than 40 dogs and their owners who visit patients in various areas of the hospital.

- The Music for Healing Volunteer Program continued to bring diverse volunteer musicians – from guitarists and vocalists to harpists and flutists – to visit patient rooms to perform for patients and families.

- The Sharon Osbourne Colon Cancer Program, part of the Samuel Oschin Comprehensive Cancer Institute, continued to assist colon cancer patients by providing financial grants for transportation and at-home help, access to support groups, and educational material about nutrition and the latest treatments.
Since commencing on February 1, 2005, the Campaign for Cedars-Sinai has received contributions totaling more than $100,000,000. The following generous, forward-looking philanthropists, support groups, and foundations have made leadership gifts to the Campaign.

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The PROS (Louis Warschaw Prostate Cancer Center Support Group)
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Our Mission

Cedars-Sinai Health System, a nonprofit, independent healthcare organization, is committed to:

- Leadership and excellence in delivering quality healthcare services.
- Expanding the horizons of medical knowledge through biomedical research.
- Educating and training physicians and other healthcare professionals.
- Striving to improve the health status of our community.

Quality patient care is our priority. Providing excellent clinical and service quality, offering compassionate care, and supporting research and medical education are essential to our mission. This mission is founded in the ethical and cultural precepts of the Judaic tradition, which inspires devotion to the art and science of healing, and to the care we give our patients and staff.