

November 30, 1999

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

Re: DRG 148 Major Intestinal Procedures

Dear Mr. Volavka:

Westmoreland Regional Hospital appreciates the efforts of the Pennsylvania Health Care Cost Containment Council to improve quality of care and cost efficiency.

Westmoreland Regional Hospital has a continuous peer review process and performance improvement plan. All surgical mortalities and return to surgery are reviewed monthly by the Patient Care Evaluation Committee.

For DRG 148, we had 114 cases in 1998 with 12 mortalities. The risk adjusted mortality of expected deaths was 6.6.

Review of the mortalities reveals the following:

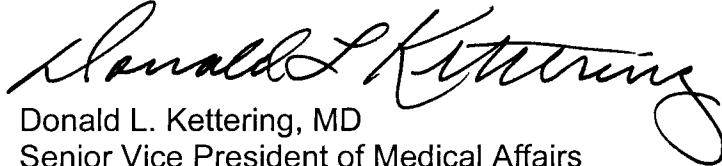
- . In all 12 cases, the family requested do not resuscitate status
- . Six cases of emergent colon perforation with fecal peritonitis prior to surgery with resultant sepsis
- . Three cases of small bowel obstruction from recurrent carcinomatosis

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- . Two cases of colectomy for sepsis from Clostridium difficile
- . One case of emergent lower bowel bleeding from diverticular disease in a nursing home patient who was a DNR prior to admission

There were no mortalities for elective cases. All mortalities had peer review and were found to have acceptable medical care.

Sincerely,



Donald L. Kettering, MD
Senior Vice President of Medical Affairs
DLK:sam