50 beds in 26 comfortable rooms

Inauguration of the new Unit 33, completely refurbished

Last January 6th, a new hospitalization floor was inaugurated at the Fundación Jiménez Díaz. It is Unit 33, located on the third floor, which has undergone a complete refurbishment. The refurbishment has been done on some 1,526 square metres, and now offers 26 modern rooms, which will make our patients’ stay much more comfortable and will facilitate the task of our care professionals.

A new day-time room with tables and chairs has also been built in the new Unit 33, to make hospital stay as pleasant as possible. Four of the above mentioned rooms are suited as isolation areas for patients with contagious diseases. These rooms offer all the necessary amenities for the patient’s comfort and the best working spaces for the health professionals.

All bathrooms, where state-of-the-art furniture has been installed, are suited for disabled people.

New Observation area

Another recently inaugurated area is the renewed Adult Observation Area in the Emergency Unit.
I would like to take this opportunity presented to me by the publication of the sixth issue of our ImPULSO magazine to express my satisfaction to all FJD’s professionals for the celebration, last February 13th, of our Clinic’s 51st Anniversary and the Research Institute’s 71st Anniversary. Above all, it has been an honour for me to share these twelve months of work with all of them.

We are also celebrating our integration in Capio a year ago. If I had to choose one term to define the work undergone at the Fundación during this past year, it would probably be “personal investment”: investment in a common project, brought to life by the viability, development and ongoing improvement in data, health care and quality indicators.

The figures shown in the recently published 2005 Annual Report reflect an intense year of efficient work and the effort made by all our professionals.

Those figures also reflect the renewal works of hospitalization Units, the investment in new technologies and a complete renovation of the communication systems.

Nowadays, we are facing a new challenge at the Fundación: the Future Plan for the coming years. This challenge is giving us the opportunity to assess the Clinic’s present situation, and to commonly plan the sort of Clinic we want for the future.

I have no doubts that this Plan will represent a new milestone in the history of this Institution, where the care interests will be integrated with those of the citizens by means of a clinical management, process orientation, internal and external center coordination, all based on a Plan in which we all played an active role.

Juan Antonio Álvaro de la Parra
General Manager at FJD

Appointments

FJD’s Medical Management has appointed the following professionals as Unit Chiefs:

- Dr. Ignacio Gadea Gironés
  Microbiology
- Dr. Félix Manzarbeitia Aranbarri
  Anatomical Pathology
- Dra. Ángeles Franco López
  Radiology
- Dr. Luis Requena Caballero
  Dermatology
- Dr. Antonio del Río Prego
  Angiography and Vascular Surgery
- Dr. César Pérez Calvo
  Intensive Care Medicine
- Dr. Manuel Fernández Guerrero
  Internal Medicine
- Dr. Pedro Gómez Balboa
  Plastic Surgery
Specialists' warning: one out of three patients does not react to drug treatment

Fundación Jiménez Díaz hosted the 1st International Meeting on Translational Research and Individual Medicine, the first multidisciplinary meeting where Pharmacogenetic and Pharmacogenomic knowledge was shared and updated. The meeting was chaired and coordinated by Dr. Carmen Ayuso, Chief Member of the Genetics department and FJD’s Research Assistant Manager.

“Despite theoretically correct diagnosis and therapeutics, approximately one out of three patients do not react adequately to the drug treatment” commented Professor Julio Benítez, Chief of the Clinical Pharmacology Unit at the Infanta Cristina University Hospital.

Pharmacogenetics, highlighted Dr. Enrique Baca-García from the FJD’s Psychiatry Service, “is a tool that, when correctly integrated within consensus, clinical lines and pathways, can help diminish the variability of medical practice at the same time as an individual medicine is carried out”.

According to Dr. Pedro Mata, Chief Member of FJD’s Internal Medicine, “the benefits from the results in translational research on family hypercholesterolemia will represent a decrease in death rates caused by premature cardiovascular disease”.

FJD’s Genetics and Ophthalmology Services have been studying, for over 15 years, the pathophysiological basis for retina dystrophy, a group of progressive and hereditary degenerative diseases, which only in Spain affect some 15,000 patients, for whom no treatment currently exists.

Dr. Carmen Ayuso, FJD’s Chief Member of the Genetics department, commented “the knowledge of retina dystrophy genetic basis and environmental modifying factors will bring about the identification of new therapeutic targets”.

Fundación Jiménez Díaz hosts a Prenatal Diagnosis Unit where translational research is currently being developed. “Non-invasive fetal diagnosis linked to the application of new molecular diagnostic methods on reproductive problems, are the two currently developing lines”, explained Dr. Carmen Ramos, FJD’s Chief Member of the Genetics department.

Degenerative osteoarthritis and osteoporosis are two of the most frequent diseases in our society; often affecting the same patient. The clinical interference of these two illnesses on each other is a controversial still-not-solved matter. According to the results obtained from animal model studies carried out by Dr. Gabriel Herrero-Beaumont, FJD’s Osteo-Articular Pathology Lab Manager “osteoporosis deteriorates osteoarthritis progress. This is most probably occurring in our patients, and implies therapeutic attitudes based on individual medicine, which tries to offer each patient a tailored solution for their health problems”.

SOCIAL WELFARE
Translational research must be regarded as a two-lane pathway: one leading from the patient’s bed to the lab, and the opposite one, going from the basic lab to the patient’s bed. In any case, translational research must rest on the hands of a multidisciplinary team made up of baseline researchers and general practitioners, all sharing basic knowledge from their respective working fields.

To summarize, investing in research and applying it to the health care system affects society’s welfare.

During the meeting, eight symposia were held on the influence of translational research on different specialties: ophthalmology, orthopedics and rheumatology, psychiatry, cardiovascular pathology, prenatal diagnosis, respiratory and inflammatory diseases, endocrinology and oncology.
Electronic Medical history for Emergency Service

N o 19th September 2005, the electronic medical history was introduced in the Emergency Service at Fundación Jiménez Díaz. Prior to this date, the computer system, which had already been developed in the other Capio Group hospitals in Spain, had been functioning in test mode on one of the hospital’s floors.

Until that day, the doctors in Emergency used to write their reports on carbon copy paper with all the advantages and inconveniences that that entails. Among the advantages of this type of report, one is clear: the familiar pen and paper. Tied to this idea are the ease of execution and its suitability to the traditional filing method. Among the inconveniences are legibility, inflexibility in terms of errors or reinterpretations, excessive use of stationary material, and a necessity for a voluminous filing system, in which files are easily misplaced and often difficult to locate.

**Needs and Initial Ideas**

All change generates anxiety. Inertia when facing change is a universal fact. To confront it, strong leadership and a clear vision of the future from the Center’s and the Group’s management team is necessary and will help to combat the immediate inconveniences that will irremediably arise.

We need to rely on an IT systems-company, in our case INDRA, and system management directors with firm full support, who would not spare the technical and human resources necessary to carry out the task.

Staff training is needed. In the case of Emergency, this involves a lot of people because, apart from the technical staff, all the on-call doctors present in this Service will need to use the medical history system. The training courses have to be conducted during working hours; therefore they have to be short. In addition, they need to be practical and very much directed towards the objective. Finally, they should be immediate - in other words they must precede the arrival of the system and take place no later than 15 days prior to its installation. Once installed, the training staff will need to tutor at the premises - for a few days and 24/7 - the hospital staff who begin to use the system.

One of the most frequently expressed concerns in recent days is getting behind on patients’ care. One must type - something that not everyone masters - and the number of computers must be great enough so that doctors do not have to queue. Furthermore, the program needs to be intuitive and logical, in other words sensible, from the point of view of the health professional, as well as user-friendly and visually attractive.

Another worry related to the previous point is that the system could go down, that it could fail at any time. As mentioned above, the computer company responsible for the system must be not only completely trustworthy but it should also have previous and similar experience in the health field, and the company must understand that this effort is exclusively focused to success. Such a company needs to be willing to give their all in technical and human terms. That means, among other things, expert staff available around the clock, seven days a week.

Obviously, the system installed needs to be appropriate from the onset, but it also has to be flexible. It must have sector-growing potential and it needs to support improvement from experience gained from day-to-day work. As such, the excellence of the IT Company and of the directors of systems management is, once again, fundamental.

**Results**

Nearly four months after the implementation of the electronic medical history system, I can say that the acceptance from the medical and administrative staff has been total. The training courses have been developed as planned, with sufficient flexibility to be adapted to the sometimes chaotic time constraints of the staff.

There has been no single delay in patient care. The number of available computer terminals has been more than enough, as has the capability and the number of printers. The program has been progressively refined to become user-friendly for the doctors’ purposes. Common items are filled in by default, saving doctors’ time. The system is proving to be extremely robust and reliable, and specific problems of certain terminals are overcome quickly without compromising adequate attention to patients.

The reports are perfectly legible, there are no corrections or additions, and they are arranged in a logical and intuitive manner. The names of the doctors in charge of the case appear in capital letters, so that it is perfectly clear who is responsible for discharging the patient.

The archive is electronic. The retrieval of all information regarding past admissions is immediate. Information about previous admissions is available from Emergency and the floor progress of certain interesting patients can also be followed. The system ensures the confidentiality of medical information, restricting the access to certain data to specific users.

The system continually incorporates new functions. Initially, it incorporated the request for medical image results. Later, it was adapted to order Emergency laboratory tests, and currently we are looking at medical treatments according to the hospital’s handbook. In the coming months, we will be able to directly access the images generated by Radiology, Nuclear Medicine, Gastroenterology, etc. Every incorporated sector is continually updated and improved by comments, criticisms, and contributions that are discussed weekly with INDRA’s technical staff.

Although this may not concern Emergencies, I do not want to finish without drawing attention to the management tool that the electronic medical history represents. One can determine waiting and treatment times, that is: the time it takes from admittance, to assessment and to be seen by a doctor or specialist. We can also determine the number of patients each doctor sees in a given period of time, the ordering of additional tests, the medications administered, and many other types of data retrieval and studies both descriptive and statistically worth pointing out.

**Conclusion**

In the preparatory meetings for the installation of the IT system I took on the responsibility of conveying to my department staff the inevitability of the change. That the change was going to occur was as inevitable as the sun rising every day. We just had to do it under the best possible conditions: the best company, the best IT system, the best professionals, all necessary material without financial constraints, etc. The question was not whether or not we needed to computerize the medical history information. The questions were when and how.

Juan A. Azofra García
Coordinator of Emergency Department at FJD
First “Capiometer” carried out at FJD

Last February, one year after Fundación Jiménez Díaz’s integration in Capio, the first “Capiometer” was carried out amongst all staff members. The “Capiometer” is a survey to study the scope and development of Capio’s values and it is sent to all the centers which make up the company.

This 34-question survey is a tool for all professionals to express themselves and give their opinion on several matters such as communication, organization knowledge, development and promotion potential, etc.

It is an anonymous and confidential yearly survey and is done simultaneously at all Capio Group European centers.

Interdisciplinary Orthodontics Course

Last February 25th, FJD’s Orthodontics Unit celebrated the Interdisciplinary Orthodontics Course entitled “Clinical Cases Marathon”. The course’s goal was to react accordingly to the current trend in the field in which the patient’s profile has considerably changed over the years. Orthodontics professionals admit their need for cooperation with other specialists to successfully solve many of their clinical cases. Likewise, general dentists can also benefit from sharing their working experiences with orthodontists.

General Session on Quality matters

Fundación Jiménez Díaz’s General Session on Quality matters was held at the Main Lecture Hall at the end of 2005. Mr Julio Albisu was in charge of the introduction while the lecturers were Mr Ignacio Basurte (Psychiatry Improvement Group), Ms Marisa Sánchez (Admission Improvement Group), Mr Carmelo Fernández (Rehabilitation Improvement Group) and Ms Silvia Polo (Kitchen Improvement Group). The self-assessment results —according to the EFQM Excellence Model— were presented at the session. These results were obtained by the Managing bodies, the Quality Core Proprietor, the Process Proprietors and the Quality Unit (methodological support). The EFQM Model’s nine criteria were assessed; the results are shown on the attached table. The results of an Internal Quality Audit were checked at the session held in October, where all processes were revised, finding the improvements accomplished by the Working Groups.

Since last January, the people responsible for the Quality Unit have been holding different meetings with the Managers and the Process Proprietors to define the 2006 Quality Plan. 2003-2005 Self-assessment results

<table>
<thead>
<tr>
<th>Concept</th>
<th>Possible</th>
<th>2003</th>
<th>2004</th>
<th>2005</th>
</tr>
</thead>
<tbody>
<tr>
<td>Criteria 1: Leadership</td>
<td>100</td>
<td>27.6</td>
<td>65.6</td>
<td>89.0</td>
</tr>
<tr>
<td>Criteria 2: Policy and Strategy</td>
<td>80</td>
<td>31.40</td>
<td>64.40</td>
<td>70.80</td>
</tr>
<tr>
<td>Criteria 3: People</td>
<td>90</td>
<td>24.4</td>
<td>44.2</td>
<td>39.8</td>
</tr>
<tr>
<td>Criteria 4: Alliances and Resources</td>
<td>90</td>
<td>25.9</td>
<td>39.1</td>
<td>74.2</td>
</tr>
<tr>
<td>Criteria 5: Processes</td>
<td>140</td>
<td>64.3</td>
<td>74.6</td>
<td>98</td>
</tr>
<tr>
<td>Criteria 6: Results in clients</td>
<td>200</td>
<td>8.7</td>
<td>40.7</td>
<td>97.1</td>
</tr>
<tr>
<td>Criteria 7: Results in people</td>
<td>90</td>
<td>1</td>
<td>11</td>
<td>3.9</td>
</tr>
<tr>
<td>Criteria 8: Results in society</td>
<td>60</td>
<td>4.7</td>
<td>4.8</td>
<td>19.9</td>
</tr>
<tr>
<td>Criteria 9: Key Results</td>
<td>150</td>
<td>16.5</td>
<td>19.5</td>
<td>38.8</td>
</tr>
<tr>
<td>EFQM Total Marks</td>
<td>1000</td>
<td>204.50</td>
<td>363.90</td>
<td>531.54</td>
</tr>
</tbody>
</table>

The Hospital is financing treatment for those professionals who wish to follow it

FJD widens its anti-smoking program

Due to the implementation of the Spanish Health Anti-Smoking Measures Law last January 1st, the already existing anti-smoking rules at the FJD have been reinforced. It implicates workers, patients and visitors and intends to reduce tobacco consumption at the hospital. At the same time, the Prevention and Working Health Service is coordinating the smoking-cessation program for those professionals who wish to follow it.

However, even though the Smoking Prevention Committee founded in 2004 has already achieved positive results, the final goal is to turn the hospital into a completely smoke-free area.

Treatment for FJD’s smoking professionals

FJD is part of the Smoke-free Hospital Network in the Region of Madrid. Thanks to its participation and the help of a supporting structure and organization for kicking the smoking habit, the center has been given the chance to participate in the Regional Plan for Smoking Prevention and Control implemented by the Regional Development and Public Health General Office.

A new inscription period has been opened for all FJD professionals who wish to follow the smoking-cessation program, funded entirely by the center. Those interested should contact the Workplace Health Service (Ext. 3259) to sign up and inquire about timetables.
ARTURO CANALDA, VICE ADVISOR OF HEALTH CARE AND INFRASTRUCTURE, PRESIDED OVER THE EVENING DINNER

Homage paid to Fundación Jiménez Díaz's professionals

Last February 13th, Fundación Jiménez Díaz celebrated the 71st Anniversary of the Medical and Clinical Research Institute, core centre of the FJD, and the 51st Anniversary of the Concepción Clinic. Following the tradition once again, the Main Lecture Hall was the place where the professionals paid homage to their colleagues who were presented with an Honorary Diploma for their 25 years working for the FJD.

The day began with a mass at the Clinic’s Chapel, followed by a Pathology Clinical Session on a “51-year-old HIV-positive patient, with right flaccid hemiparesis and brain damage”, introduced by Dr. Rafael Aldai, from the Neurosurgery Unit in 12 de Octubre Hospital.

After the clinical session, the Honorary Diploma-giving Ceremony took place, chaired by Prof. Julio R. Villanueva, President of the FJD’s Governing Council who congratulated the audience for the good functioning of the Institution and the personnel’s effort.

Representing the honorary members, Valentín Calvo Herrero, librarian at the FJD, summed up with great affection his memories during these past years. To put an end to his
As part of the celebration ceremony of the FJD’s Anniversary, the 2nd FJD Research Award-giving Ceremony was also held, chaired by Dr. Joaquín Arenas, Assistant General Manager of Research Evaluation and Promotion of the Health Institute Carlos III.

Dr. Arenas pointed out the relevance of such initiatives as a recognizing and helping tool for researchers. He also encouraged the FJD’s managing body to continue supporting the hospital activity, which is a point of reference for certain research areas. The Assistant General Manager of the Institute Carlos III reminded those in attendance of the scientific background of the Fundación from its very beginnings, and highlighted the fact that its model based on health care, teaching and research has become the reference point for modern health care systems.

Dr. Carmen Ayuso, FJD’s Assistant Research Manager, encouraged the Institution’s professionals to take advantage of the help offered by these awards to finalize their training and also explained the strict evaluation system used to assess the participating works.

Awards winners
This year’s prizes were 1,800 for the winner and 900 for the second best, at each category. The following were the awarded researchers:
- First prize for FJD Clinical Bio-medicine (shared) was awarded to Ms María García Hoyos and Ms Cristina Isabel Gómez Abad.
- First prize for Experimental Biomedical Research was awarded to Ms Mónica Rupérez Zaldueño.
- Second Prize for Experimental Biomedical Research was awarded to Mr. Julio Gallego Delgado.

The day finished with the traditional Anniversary Banquet, this time presided by the Vice advisor of the Regional Health Care and Infrastructure Office. During his speech, the Vice advisor extended his compliments for the Fundación Jiménez Díaz, on their health care, research and scientific activity and on the high level of all its professionals.
Professor Juan Rodés will present the 38th Jiménez Díaz Commemorative Lecture

In my opinion, the fact of facing pain and suffering day after day has taught us to become immune to it. Every day, we try and cool down our feelings to avoid our personal life feeling threatened by a feeling of pity and compassion. But this defence mechanism, key to keeping our psychological integrity, must not erase our reaction capacity towards the injustice around us.

That is why, the training doctors at Fundación Jiménez Díaz, in collaboration with Action Against Hunger, have decided to begin a small awareness project among the Fundación’s personnel. It is our aim to bring closer some real situations, which in many cases are just a three-hour-flight away.

We do not wish to get lost in dead-end winding pathways or in abstract ideas never brought to life; we invite you to participate in feasible projects, with specific means and goals. The objective is not just about improving the starvation situation or the lack of access to health care for some people, but to modify our understanding of reality, realize the real scope of our problems and feel little bits of a whole.

The means… well, it would be redundant to say they are scarce; you all know it already. To solve this, we are planning on implementing different fundraising mechanisms this year. These funds will be invested in projects in those countries that need them the most. They will be consolidated projects, feasible projects, in which you may take part. The main mechanism is already running: at the nursing stations and in many other hospital locations, you will find Action Against Hunger collaboration leaflets. By filling in and sending one of these leaflets, you will help fight against starvation in Malawi, especially amongst children. Action Against Hunger will organize the investment of the collected funds on the different activities in this country: opening Supplementary Nutrition Centers, organizing educational sessions on health and nutrition in the different communities…, remaining always aware of any emergency situation that may require immediate action. On a regular basis, the people responsible for Action Against Hunger will keep us updated on the project’s progress.

If you have any doubts, concerns, or if you just want some more information or details on this project, you may easily find us at the hospital; there are several of us “in the business”, but here are four names to make it easier:

- Carme Aralanzón (Medical Oncology): Unit 68 (extension: 3899).
- Miriam López (Medical Oncology): Unit 68.
- Soledad Justo (Internal Medicine): Units 35 or 66 (extensions: 3174 or 3699).
- Eva Aguilar (Internal Medicine): Units 35 or 66.


In February last year, a competition was carried out, and the winners were presented at the 38th Jiménez Díaz Commemorative Lecture. A painting contest was organized in conjunction with the Christmas Child Action Against Hunger, with the objective of publicizing this project.

The Third Prize (€50 was for 14-month-old Irene Guadamillas Díaz from Tres Culturas Hospital. The Third Prize (€50) was for 14-month-old Irene Guadamillas Díaz from Tres Culturas Hospital.

The FJD’s General Manager, Juan Antonio Álvaro de la Parra, representing the Fundación’s professionals, received acknowledgment from the Association of Madrid Press, in an act celebrated to honour the most remarkable entities and people for their work and collaboration with the Association’s Medical Service.

The Second Prize (€100) went to 5-year-old Anna Valls Bielsa from General de Catalunya Hospital.
ImPULSO February 2008

SECTOR PRIVADO

Improvement in Private Consultations at FJD

FJD has undergone a renewal in Private sector consultations. The major works were done during the Christmas festivities, to avoid disrupting everyday activity, and were finished in the month of January. The objective is to renew the private consultations area, improving the premises and facilitating the process for patient service.

The new FJD-Capio uniform makes customer service staff easier to be identified. The number of staff working for the Customer Service department has been increased in order to speed up administration work and diminish waiting time. The permanent Call Center service works from 8am to 9pm (902 11 11 52) for all Private Sector phone calls.

To facilitate the process for patient service, appointments for X-ray tests and several high activity consultations, such as pre-anaesthetic assessment, can be made over the phone. Furthermore, thanks to the e-clinical history, the service rendered to patients at the different consultations will become easier, as the doctor will always have access to the clinical information needed to help the patient.

These improvements in the Private Sector are part of a Strategic Plan for Private Care and Companies, which consists of an ambitious improvement program ruled by the quality requirements of a top-level health care center, which involve all medical specialties and state-of-the-art technology.

Javier Flandes Aldeyturriaga
FJD’s Medical Assistant Manager, Private Sector

Prenatal Diagnosis Unit

FJD’s Prenatal Diagnosis Unit was founded in 1977, becoming the first of its kind in Spain. It is also a research center, which, since the 80s, has carried out an important work of biotechnology development and integration process into prenatal diagnosis.

Since then, the members of this Unit have integrated all updates, both obstetrical and analytical, directed to a wide fetal diagnosis. It is currently a reputable and prestigious training center for other specialists in prenatal diagnosis.

The Prenatal Diagnosis Unit consists of: Genetics and Prenatal Diagnosis Consultation located on the first floor and the Obstetrical Scan Unit on the 4th and 2nd floors within the Gynecology Service.

The Prenatal Diagnosis Unit’s premises offer a group of rooms and facilities for the integral care of the patient.

The amenities include the following: Consultation for Fetal Diagnosis and Genetics Assessment; Consultation for Prenatal Scan Diagnosis; Obstetrics Consultation for high-risk obstetric follow-up; High Resolution Scan and Fetal Doppler; 3D Scan and 4D real-time Scan; Operating Theatre and all necessary equipment for all invasive techniques for prenatal diagnosis from the first gestation quarter; Cytogenetics Lab available for any cytogenetic exploration; Molecular Genetics Lab for the diagnosis of most genetic diseases; and Microbiology and Biochemical Lab.

The Unit also offers a permanent obstetric emergency service.

Furthermore, thanks to the use of molecular techniques on genetics, it is now possible to identify, both in the fetus as in other individuals, the most common genetic diseases. They cover the following fields in fetal disease diagnosis and prevention: genetic assessment and dysmorphology consultation, cytogenetic exploration, molecular studies and scan prenatal diagnosis.

Agreements with Insurance Company DKV and Grupo Sersanet

Health Care Insurance Company DKV and Fundación Jiménez Díaz have reached an agreement for the FJD to assist this company’s policy holders from Madrid and its surrounding areas.

The agreement includes the access to all medical and surgical specialties in FJD, as well as the access to diagnostic tests (x-ray, analysis, etc.)

DKV is a national Insurance Company, with over 40,000 different policy holders -medical health care, reimbursement, etc.- just in the Region of Madrid. This company is part of the German Ergo Group, European leader in health insurance services.

Grupo Sersanet
Health Group Sersanet joins the Fundación. This health care company manages the policy holders from Spanish insurance companies such as: Cajasur, Euromutua de Seguros y reaseguros, Ges, Helvetia previsión, Mutua general de seguros, Reale and Sersanet. This agreement has been reached at a national level and involves health care policies. The number of policy holders in Madrid is higher than 5,000. This agreement includes health care services of all medical and surgical specialties carried out at the FJD.

Rafael Alfonso Ochotorena
FJD’s Commercial Manager

www.capiosanidad.es
Capio's New President

After 12 years at Capio, Per Båtelson has decided to announce his resignation as Capio AB’s President and Capio Group's CEO at the company’s General Annual Meeting, which will be held on April 6th. Ulf Mattsson, former CEO of the medical technology company Mölnlycke Healthcare AB, will take over his position.

Ulf Mattsson has extensive international experience and was most recently employed at Mölnlycke Healthcare AB in Sweden, where he was the company CEO. Prior to that, he was President of the manufacturing company Domco Tarkett, which is listed on the Toronto Stock Exchange in Canada.

Ulf Mattsson has a long and fruitful professional experience in international business. He has worked in North America, UK and Germany, where he widely proved his capacity as leader of international organizations. “We are delighted for Ulf to take over the company’s management and for him to continue Capio’s international expansion” said Roger Holtback, Capio’s Board Chairman.

European leader

“I am looking forward to assuming my new role. Capio is a big company, with an astounding development and a great future potential in such a stimulating area”, commented Ulf Mattsson.

“Per Båtelson turned Capio from zero into a leading European health care company with 14,000 employees and an annual turnover of SKr 12 trillion. Sharing my work with Per during this intensive growing period has been a great pleasure for me”, said Roger Holtback.

1st Anniversary of Capio Tres Culturas Hospital

Capio Tres Culturas Hospital in Toledo celebrated its 1st anniversary with the organization of a Clinical Session on “Electro chemotherapy, physical and biological principles. An experience of Gustave Roussy centre in Villajuif”.

Two specialists from the Gustave Roussy de Villejuif Institute in Paris attended these talks. Dr. Mir, Manager of the Nucleic Acid and Physical and Chemical Vectoring of Drugs spoke about Electro chemotherapy, physical and biological principles, as experienced at the Gustave Roussy in Villajuif.

Dr. Muñoz Madero, from the Oncological Surgery European Board and an oncology surgeon himself at Tres Culturas Hospital, mentioned the feasibility and usefulness of the electrochemotherapy unit.

Capio's Nursing Managing Departments meet in Toulouse

Toulouse held Capio Group’s Nursing Managing Departments meeting, where professionals from Fundación Jiménez Díaz and Hospital General de Cataluña took part. The Spanish Nursing group, represented by the corresponding managers, exposed the different works they have been conducting. On the one hand, Fundación Jiménez Díaz showed their Department’s goals for the improvement in the organization and patient’s attention service. The main goals were divided into four categories: care, quality, research-training and organization. It is worth mentioning the introduction of the nursing history into the IT system. On the other hand, Hospital General de Cataluña presented an assessment of the nursing professionals at their hospital. They also explained a quality plan and the application of the IT nursing care plan. All the above mentioned are integrated in Capio’s quality management system.

Spanish Participants

Hospital General de Cataluña:
- Ms Carmen Farré, Nursing Manager.
- Ms Montserrat Viura, Medical Hospitalization Supervisor.
- Ms Montserrat Gratacos, Responsible for Staff Recruitment.

Fundación Jiménez Díaz:
- Ms Natividad Comes Gorriz, Nursing Manager.
- Ms Carmen Trillo Civantes, Internal Medicine Unit Supervisor.
- Ms Juana Mª Saez Ortega, Emergency Unit Supervisor.

The center was awarded the “Science and Research Prize” by journalists

The journalists from the Spanish Region of Murcia awarded the Science and Research Prize to Molina Hospital during a Ceremony attended by the Minister of Culture, Ms Carmen Calvo. The hospital’s General Manager pointed out the relevant work carried out by the 145 hospital workers and thanked the experts in health care information for their award.

Mr Francisco Guirado commented on the fruitful cooperation established with the Fund for Medical Studies in Molina de Segura, where the hospital is a member of the Board. During his speech, the President of the Autonomous Region, Mr Ramón Luis Valcárcel, mentioned the efficient managing model put into practice by this health care center.
Ms Esperanza Aguirre, President of the Autonomous Region of Madrid, presided over the ground-breaking ceremony of the future Capio Valdemoro Hospital, a project included in the Community’s Plan for Health Infrastructures.

An estimated 72,000,000 will be invested in building this new hospital. Capio’s concession includes the center’s building and managing works for a 30-year period. Firstly, it will hold a total of 8 operating theatres, 2 recovery and birth wards, 35 emergency positions, including boxes and care and observation stalls; 38 external consultations, 42 examination offices, 10 radiology wards and up to 28 dialysis stalls. These figures will be gradually increased until 2017, when the forecasted numbers are 10 operating theatres, 4 birth and recovery wards, 44 emergency stalls, 107 external consultations, examination offices and radiology wards.

Ms Esperanza Aguirre was accompanied by Mr. Víctor Madera, Senior Vice-president and Head of the Capio Health Care Business Area. Some other personalities attending the event were Mr. Manuel Lamela, Health Advisor, Mr. José Miguel Moreno, Mayor of Valdemoro, as well as the Governing bodies of Ciempozuelos, San Martín de la Vega and Titulcia.

The ceremony was presided over by the President of the Region of Madrid

Ground-breaking ceremony at Capio Valdemoro Hospital

Ms Esperanza Aguirre was accompanied by Mr. Víctor Madera, Senior Vice-president and Head of the Capio Health Care Business Area. Some other personalities attending the event were Mr. Manuel Lamela, Health Advisor, Mr. José Miguel Moreno, Mayor of Valdemoro, as well as the Governing bodies of Ciempozuelos, San Martín de la Vega and Titulcia.

Ms Esperanza Aguirre presided over the ground-breaking ceremony at Capio Valdemoro Hospital. Over caption, computer-designed images of the future hospital.

Francisco Granados, Presidency Advisor and Mr. José Miguel Moreno, Mayor of Valdemoro, as well as the Governing bodies of Ciempozuelos, San Martín de la Vega and Titulcia.

The ceremony was presided over by the President of the Region of Madrid

Research Awards

Last February 3rd, the CAPIO-HGC Research Awards Ceremony took place at the General de Catalunya Hospital’s Main Hall, chaired by Ms Elena Arias, Group’s Human Resources Manager, Dr. Joan Sala, the Hospital’s General Manager, Dr. Raül Muñiz, Medical Director, Ms Carme Farré, Nursing Manager and Dr. Eduard Esteller, President of the Research Committee.

The number of participants this year has risen notably -a total of 12 research works have been presented-as well as the scientific level of the works.

The award-winning works received €2,500 per work and €1,500 per project presented.

Award-winning Works

The panel concluded on the following winners in each of the four categories set by the conditions of entry.

Management and Organization work: “Emergency Unit IT system. HGC. System implementation of Continuous Quality Improvement.” Dr. Jordi Ibáñez, Emergency Unit.

Medical Health Care work: “Morphometric Study of high-grade Cervical Intra-epithelial Neoplasia secondary to Human Papillomaviruses”. Dr. Miquel Angel Carrasco, Anatomical Pathology Unit.

Nursing Care works: “Caesarean Section Early Ingesta Tolerance at General de Catalunya Hospital”. Ms Carmen Naranjo and Ms Pilar Fuster, Maternal and Child Unit.

Research Projects: “Characterization of Platelet Addition Condition with Aspirin Percutaneous Coronary Surgical Radiology, after Additional Administration of intravenous SSA, observed by 100m-PFA Analyser”. Dr. Pere Álvarez, Cardiology Unit.

Capio Recoletas in Albacete

First state-of-the-art Open Magnetic Resonance Imaging System in Castilla-La mancha

Capio Recoletas, in Albacete, will benefit from the first state-of-the-art Open Magnetic Resonance Imaging System introduced in the Spanish Region of Castilla-La Mancha.

It is an “Airis Elite” 0.3 Tesla vertical field permanent magnet MRI, whose main features are a small size and a high performance. The rear 70-degree opening offers better lighting, tranquility and comfort for the patient during the imaging process.

Some of its advantages are:
- Children do not need anaesthetic.
- Claustrophobia-related problems are avoided.
- Better access for handicapped patients.
- It cuts down on invasive explorations.

Open Magnetic Resonance Imaging System at Capio Recoletas Albacete.
The Spanish Society of Health Customer Service (SEUSA), will celebrate its 7th Symposium on 25th, 26th and 27th May 2006 at Fundación Jiménez Díaz. Ms Pilar Martín Merchán, FJD's Customer Service Chief, will chair the meeting where over 400 professionals from different Spanish health care centers are expected to attend.

The SEUSA is comprised of patient or customer service professionals in health care areas as well as specialists interested and committed to this subject, such as health services managers or members from different customer associations. The SEUSA, founded in 1989, has national coverage and, among its scientific activities, they organize a yearly congress or symposium, and other training, research and editorial activities.

Fundación Jiménez Díaz, as the Capio Group's most high-profile hospital, shares the company's values consisting of keeping attention focused on the patient at all times, resource quality and efficiency, reporting benefits for society, trust, respect and initiative.

For more information on this symposium, you may visit our web site: www.capiosanidad.es