

# Brighter Tomorrows

Dear Friend,

A woman is rushed to the hospital by ambulance following a bone-jarring car accident.

A man shows the tell-tale signs of a stroke.

Blood clots are suspected to be the cause of a patient's severe leg pain.

A young woman has intermittent chest pain and a family history of premature death because of heart disease, but all other investigations have proven negative.

A man is here for follow-up care, to find out if his cancer treatment is working – or if the tumors have spread.

Each of these patients needs timely, compassionate care – **and each needs a CT scan.**

I've been a Radiologist at the Ross for 15 years now, and I call the hospital's CT scanner 'the workhorse' of the Diagnostic Imaging department. It's one of our most vital pieces of hospital equipment and provides life-saving support to the Emergency department day and night.

If you've never had a CT scan, it works like this: Computerized Tomography scanning combines a series of images taken from various angles to create cross-sectional views of a patient's bones, blood vessels and soft tissues. Our CT scanner allows my colleagues and I to confidently diagnose disease and injuries, to provide precise direction for surgeries, and to guide cancer treatments.

At the Ross, our CT team performs more than 12,000 scans every year. The scanner is in almost constant use. After ten years, however, the CT scanner is reaching the end of its useful life.

**It's imperative that we replace it immediately.**

That's why I'm writing to you today. The Ross is counting on our community to help in this time of need.

I know these past months have been challenging with the world in a state of constant change.

[Please turn over >](#)

10 Angeline Street North, Lindsay, Ontario K9V 4M8 • Telephone: 705-328-6146 • Fax: 705-328-6147



ROSS MEMORIAL  
HOSPITAL  
Foundation

Yes, I want to make a gift and help  
RMH give patients brighter tomorrows.

[www.rmh.org/foundation](http://www.rmh.org/foundation)

\$25     \$50     \$100     Other: \$.....

Name .....

Address .....

City..... Province .....

Postal Code ..... Phone .....

Email my receipt  
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Enclosed is a cheque for the RMH Foundation

Place my donation on my credit card:

VISA     MasterCard

G20X

Use the enclosed envelope or mail to: 10 Angeline St. N., Lindsay, ON K9V 4M8  
Please see other side for information on making monthly donations. All  
donations are tax creditable however, tax receipts will not be issued for  
donations under \$10, unless requested.

Charitable Business Number: 11912 4121 RR0001

Cardholder's Name .....

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Signature .....

**What hasn't changed is your need for timely health care.** Every kind of care: to locate internal bleeding, to map blood flow to the brain, to diagnose blood clots. These patients need careful medical treatment to give them their best chance at recovery – and they need access to precision CT imaging.

**Will you please consider making a donation to the Ross Memorial Hospital Foundation to help fund a new CT Scanner for our community?** 2020 has seen some dark days, but together, we can ensure there are brighter tomorrows.

Together, we will replace our community's aging CT scanner with new technology that can produce high quality images and more accurate data – *faster and with a lower dose of radiation.*

The world will continue to change, but you can always have confidence in the care you receive at the Ross. That's a sentiment shared by a local cottager who wrote a thank you letter to the RMH team following a CT scan in October:

*I was born and raised in Toronto. I have been blessed to travel to many countries. I have seen my share of hospitals, both in Canada and abroad. From the initial phone call from Angela (and my 5 calls in between, thanks Angela) to the final 'good evening' from Cathy, my experience at RMH was truly outstanding!*

*Times are tough everywhere. How reassuring to know that if I have a medical concern, Ross Memorial Hospital and the staff will be here to help.*

*Sincerely, Alex Christianopoulos*

On behalf of the RMH team, our patients like Alex, and those who will count on our care in the months and years ahead, **I wish you health, happiness, and brighter tomorrows!**



Dr. Mario Voros,  
RMH Chief of Radiology

P.S. For your convenience, the Ross Memorial Hospital Foundation accepts online donations at [www.rmh.org/foundation](http://www.rmh.org/foundation). Or you may find it more convenient to make your gift in smaller, monthly contributions using the tear-off form below. Please note that it may take a little longer to receive your donation receipt as the pandemic impacts regular office processes and delivery. We appreciate your support – and your patience!

P.P.S. Should you receive another appeal delivered to your home in the near future, I would like to ask for your understanding. We are delivering unaddressed appeals in many areas so that we can give local residents the opportunity to show their support for Ross Memorial. Despite our best efforts, this process occasionally delivers more than one letter per household.

**Monthly giving is convenient and makes it easy to lend your support.**

I wish to make a monthly gift of:

\$25     \$50     \$100    or     \$ ..... per month for ..... months.

Deduct it from my bank account:

I've enclosed a cheque marked VOID. Bank deductions will be made on the 15th of each month.

Signature .....

Charge it to my credit card:     **VISA**     

Cardholder's Name .....    Card Number .....

Expiry Date ...../.....    Signature .....

**Create a Legacy**

Please send me information on how I can include Ross Memorial Hospital Foundation in my Will.

I would like to receive the Foundation Gratitude Report. Here is my email address:

**Protecting your Privacy**

For our complete privacy statement, visit our website, [www.rmh.org/foundation](http://www.rmh.org/foundation).

*I understand that this agreement may be adjusted or cancelled at any time, subject to 10 business days' notice prior to the next processing date, by contacting Ross Memorial Hospital Foundation at 705.328.6146. I have the right to receive reimbursement for any debit that is not authorized. To obtain a sample cancellation form, or for more information on my rights to cancel a PAD Agreement, I may contact my financial institution or visit [www.cdnpay.ca](http://www.cdnpay.ca)*