



DEFINING CARE

Dear Friend,

A simple comment written into the Ross Memorial’s Annual Report of 1916 led to a defining moment and transformed care for local patients:

“The Medical Staff would appreciate an equipment for X-Ray examinations...”

That statement captured the attention of James Ross, who donated the funds necessary to build the Hospital in 1902, naming it in memory of his parents. It was Ross’ desire that the Hospital be equipped with the best medical tools, and provide the highest standard of care to the community he once called home.

So James Ross donated \$2,550 to purchase an X-Ray machine for the Ross Memorial. It was a landmark acquisition at the time – technology only available at the largest hospitals in the country.

One hundred years later, X-ray technology is still defining care. It is among the most trusted tools physicians count upon to help diagnose injury and illness.

As the Ross Memorial Hospital’s Chief of Radiology, I know that X-ray technology is the modality of choice to diagnose cardiac failure, pneumonia and traumatic injuries such as broken bones.

More than 100 X-Ray examinations occur at the Ross Memorial every single day. X-Ray imaging is so important to our patients’ diagnosis and treatment, it’s available 24/7, 365 days a year.

This is another defining moment for patient care at the Ross Memorial. The Hospital is replacing its aging X-Ray machines with more advanced technology. Work is also underway to improve the layout of the X-Ray department so equipment can easily be repositioned to meet patients’ needs, and to improve accessibility.

[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 am defining care at Ross Memorial with a gift to enhance X-Ray service.

www.rmh.org/foundation \$25 \$50 \$100 Other: \$

Name

Address

City..... Province

Postal Code..... Phone

Enclosed is a cheque made payable to the **Ross Memorial Hospital Foundation**

Place my donation on my credit card:



Cardholder’s Name

Card #/...../..... Exp/.....

Signature

G18S

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

The new technology is more versatile, easier to manoeuvre, and provides crisp detail with a lower dose of radiation. Its advanced features expand the list of procedures that can be performed.

The Foundation has been actively raising funds for this project and still needs to raise \$100,000 to complete X-ray Room #1. You may not realize that the funding we receive from the government doesn't cover needs such as these. That's why I'm asking for your help.

Will you seize this moment and help define care at Ross Memorial Hospital? Your donation will help keep this time tested, life-saving technology available around the clock and touch the lives of patients of all ages.

One hundred years ago, our Hospital's founding donor, James Ross, showed us that one generous gesture can make a profound difference. Today, the generosity of local donors continues to impact patient care.

I hope you will consider making a mark on the community you call home – whether you live here year-round or on a seasonal basis. Together, we are defining care in the City of Kawartha Lakes – and living James Ross' legacy by providing exceptional care.

On behalf of our patients and our team, thank you for your support.



Dr. Paul Wilson
Chief of Radiology, RMH

P.S. For your convenience, the Ross Memorial Hospital Foundation accepts online donations. Please visit our website www.rmh.org/foundation for details.

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; however, we thank you for your patience.

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 1st 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.

Protecting your Privacy

For our complete privacy statement, visit our website, 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