

amputee
coalition

Reaching for new horizons



2011
Annual Report

LEADERSHIP MESSAGE

Thank you for all your support in 2011. Because of your help, the Amputee Coalition has many accomplishments to share from that year.

We couldn't achieve this level of progress without the support from the many donors, sponsors and volunteers who make our programs and services successful. During 2011, we realized that many of our constituents truly don't understand what the Amputee Coalition is and that we need to do a better job of telling our story of who we are and what we are doing to make a difference.

Throughout this annual report you will learn about critical programs made possible through philanthropy, as well as strategic partnerships that support many mission projects. We need your continued support and look forward to working with you in 2012 to help this work continue to make a difference in the lives of amputees across the country.



Marshall J. Cohen
Chair of the Board



Kendra Calhoun
President & CEO



2011: A Year in Review

Special thanks go to our National Sponsor Partners who provide support to a myriad of programs and services of the Amputee Coalition and to our strategic partners.

National Sponsors

Platinum

Hanger Orthopedic Group
Otto Bock HealthCare, Inc.

Gold

Össur Americas

Silver

Thorlos
WillowWood

Bronze

American Board for Certification in Orthotics, Prosthetics & Pedorthics, Inc. (ABC)
Board of Certification/Accreditation, International (BOC)
Institute for Preventive Foot Health
Purdue Pharma, LP

Strategic Partners

American Academy of Orthotists & Prosthetists
American Orthotic & Prosthetic Association (AOPA)
Centers for Disease Control & Prevention (CDC)
Challenged Athletes Foundation
Clear Channel
Consortium for Citizens with Disabilities
Disability and Rehabilitation Research Coalition
National Association for the Advancement of Orthotics & Prosthetics (NAAOP)
National Health Council
Olympic Fund
Orthotic and Prosthetic Activities Foundation
Veterans Administration (VA)
Wounded Warrior Project

New Amputee Coalition Brand: You can see our beautiful new logo here, but our brand change is much more in-depth. Our new brand position is more proactive and more focused on impact.



Open Community: Our board of directors made a transformative decision to move our organization to an open community model, doing away with individual membership dues. This change was met with widespread approval, and we saw our constituent friends grow to more than 65,000. On average, we are gaining almost 700 new constituents each month!

Database: While this is an internal accomplishment, our new database will allow us to better serve our constituents. As with any database conversion, it was trying. But we now have much deeper customer relationship capabilities and a database that's not held together with duct tape!

Limb Loss Awareness Month: We named April National Limb Loss Awareness Month and ushered in a brand new way to raise awareness about living with limb loss and about limb loss prevention. We were successful in gaining 35 state gubernatorial proclamations and had more than 1 million media impressions. We will build on this success for 2012.



100 Campers: For the second time, we were able to bring 100 campers to camp – thanks to the many donors who make this program successful. What a wonderful accomplishment to replicate.

Media Success: We more than doubled our media placements in 2011, with more than 600 local and national news placements (radio, television and print).

Bridge to Ability Fund: We were able to bring 22 Bridge Scholars to the National Conference in 2011, thanks to our gracious donors, Hanger Orthopedic Group and ABC. We were also very excited to name the fund in memory of Kathy Spozio, who was a Coalition board member. The fund is now the Kathy

Spozio Bridge to Ability Fund. The National Conference again saw 800+ participants, but the addition of this scholarship program was a significant accomplishment.

National Peer Program: The Veterans Administration (VA) cares for more than 45,000 amputees, most due to dysvascular conditions. In 2011, we focused our Amputee Resilience Program work in the VA's Amputation System of Care. Our work with the VA resulted in the certification of 51 peer visitor trainers, over 80 peer visitors, 11 Promoting Amputee Life Skills (PALS) trainers and 11 caregiver peer visitor trainers. In addition to the VA, we also trained peer visitors for the Wounded Warrior Project and conducted training at our National Conference.



2011 Peer Visitor Certification Trainings were held in the following cities:

Saddle Brook, NJ	Dayton, OH	Downey, CA
Tavares, FL	Pittsburgh, PA	Denver, CO
Kansas City, MO	Bay Shore, NY	San Diego, CA
Mechanicsburg, PA	Wyomissing, PA	Greensboro, NC
Orlando, FL	Garden City, NY	Knoxville, TN (Parent Peer Visitor Training)

Government Relations: Thanks to the hard work of our amputee advocates and friends in Delaware, it became the 20th state to pass the prosthetic and orthotic fair insurance law. Our coalition efforts with AOPA, NAAOP and our industry friends continued as we advocated for prosthetic inclusion in the definition of “habilitative and rehabilitative” language in the essential health benefits in the Affordable Care Act (ACA); more work is needed to define that language. We submitted comments to the Department of Health & Human Services and met with Secretary of Health and Human Services Kathleen Sebelius. Additionally, we launched a Coalition effort to prevent the director of the CDC from consolidating funding lines and eliminating support for disability populations, such as limb loss.

inMotion Magazine went electronic and free in 2011, with the option of a paid subscription for those who prefer print issues. This was previously a membership benefit that cost \$35. Going electronic made the magazine easily sharable and we also offered a print subscription at \$24, which is an \$11 savings! Additionally, in 2011 we established an Editorial Board for the magazine that is already having a positive impact with an exciting 2012 editorial calendar and the introduction of a new look for the new year.

Education Webinar: Thanks to our friends at Otto Bock, we held our first webinar and look forward to using this medium to do more education outreach in 2012.

Well-Being Initiative: We received a grant from Össur Americas to develop a program to assist prosthetists in advancing mental wellness for their patients. This program will launch pilots in early 2012. Working with Johns Hopkins University, we will use this data to build a program to help ensure that amputees who need mental health connections in their communities receive the help they need when they need it.

Native Americans: We began an initiative working with Minot State University to develop a culturally appropriate peer support program for Native Americans living with limb loss. This initiative will continue in 2012.

Website Refresh: We are working our way through our Web site to increase ease of navigation and to increase interactive areas. We are at least 30 percent complete and will continue our refresh work in 2012.

Fall Campaign Success: We exceeded our fall fundraising goal of \$100,000. In fact, we saw a 125 percent increase in donations in 2011, with most success occurring in late 2011. We also saw a 300 percent increase in the number of individual donors. We look forward to increasing our friends and supporters in 2012 – only with their help can we continue to grow our programs, services and outreach.

What Do You Mean, the Amputee Coalition Is NOT a Government Entity!

An interview with the Amputee Coalition Board Chair Marshall Cohen and President & CEO Kendra Calhoun

“We have learned that there is a misperception of the Amputee Coalition – that we are some sort of a government entity.....NOT TRUE,” says Marshall J. Cohen, chair of the board. “Perhaps this fallacy emerged due to the grant the organization has received from the CDC, but it could not be further from the fact.”

The reality is that the Amputee Coalition is a 501(c)3 nonprofit voluntary health organization (like the American Heart Association or the American Diabetes Association). The following is an interview with Mr. Cohen and Kendra Calhoun, president & CEO of the Amputee Coalition. We hope this information sheds more accurate light on the organization. [Editorial Staff]

Why is philanthropy so high-profile for the Amputee Coalition? We see requests for donations on a regular basis.

MC: We have a huge job ahead of us – to reach every amputee in this country. There’s not enough time to do it and not enough resources. Our past way of existing on federal funding as our core resource no longer makes sense. Too much jeopardy in that. We must rely on resources that can grow and be used to meet the needs that we identify with our constituents and not just support projects required by government agencies.

Doesn’t the Amputee Coalition get significant grants, and isn’t that enough?

KC: Historically, the perception has been that the Coalition gets all of its funding from the government, specifically the CDC. This has never been the case and is becoming less so every day as federal agencies cut funding to grantees. While the Coalition has had a long relationship with the CDC, the grant has remained at the same level for more than seven years, which means that each year inflation has eaten away at the resources available for programs and services, leaving no room for growth or advancement. In 2012, the CDC will significantly reduce its grants to all disability groups, including the Coalition. Our CDC grant will be cut \$600,000 – which is significant for our small nonprofit organization.

MC: The CDC grant has been a wonderful source over the years for core funding of our information center but, as Kendra says, this funding does not cover all of the costs of running the organization, nor does it provide for expansion of our services. Depending on federal funding in this economy is not wise, and the work the Coalition does is too important to rely on just that resource.

What impact will the CDC grant reduction have on the Amputee Coalition?

MC: We stepped up our efforts to increase fundraising. The work that the Coalition does is important to people in real ways. We believe people want to support us and that they will if we ask. We don't want to eliminate programs or services. However, we will reduce office space and downsize staff and we are exploring technologies that will allow us to further reduce costs.

KC: Marshall is correct and because we will be working with a much smaller staff, we will not be as fast to implement programs. The Limb Loss Education Days are a good example. We had hoped to launch those early in 2012, but we are having to take more time to plan. The trade-off has been keeping our programs and services versus speed of delivery.

What is the most important need right now?

KC: Increased philanthropy. Every gift, no matter the size, is extremely important. Because the CDC grant continues to be a core source of funding for many of our mission programs and services, we are concerned about the budget reductions under discussion in Congress – current discussions indicate the possibility of another 8 to 10 percent reduction in the CDC budget.

MC: Philanthropy is critical to our sustainability and to plans for growing programs and services. Even when the federal funding was at a higher level, the Coalition was not reaching enough amputees with our services. Simply put, we can do more with more.

How is the philanthropy program doing?

MC: In 2011, we had great success in growing our fundraising efforts. We surpassed our goals. But the continued economic troubles and the fact that 2012 is a presidential election year will impact our fundraising. We have, however, been successful in raising funds for specific projects.

KC: We need more donations for our general fund, although many of our designated fundraising projects, such as our youth camp, are doing well. In fact, our Paddy Rossbach Youth Camp fundraising has grown significantly over the past three years and has a great base of support. The camp is a great example of how donor support can advance a program or service. Four years ago, we charged for camp attendance and averaged around 50 to 60 campers. Because of the great outpouring of donations, we have been able to offer the camp at no cost and also pay the transportation costs of the kids. We are now hosting 100 campers from all over the country every summer.

What are your ideas for use of donor dollars if fundraising increases?

MC: We want to ensure that every new amputee receives peer support. We would integrate our peer support into all rehabilitation centers and hospitals, where most amputations occur across the country. Additionally, we would implement a strategy to get peer support covered through insurance reimbursement.

KC: I would add that the Coalition plays a critical role in moving medical and technological advancements into reach for all amputees. Right now, the Department of Defense is making significant investments in new procedures such as osseointegration and limb transplants as well as prosthetic technology, but that will likely dry up as the current international conflicts diminish. We have a sincere concern that if the Coalition does not step into the gap to build support to continue this important investment, not only will new advancements stifle, but the ideas currently on the table could evaporate.

Why does the Coalition ask amputees for support?

MC: Amputees and their families are our reason for being. We know they support the work we do and want to see our programs and services grow and reach more amputees. In addition, philanthropy is part of our cultural DNA, and I mean at every level, from the collection box at churches to the pledge of monthly support to any charity. We have more than 2 million amputees in the United States and that number is expected to grow significantly in the next 10 to 20 years. Who better than caring family members and successful professionals who have some connection to the limb loss community should the Coalition reach out to in order to sustain the programs that directly impact the lives of this community? America has always thrived on philanthropy, and so should the Amputee Coalition.

KC: I have never been involved with a community of people who wanted so much to “give back.” It’s impressive and humbling to be a part of an organization where so many put their trust. And, it’s about more than money. It’s about the giving of time and passion for the limb loss cause. It would be a huge oversight not to offer amputees the chance to be a part of the bigger picture.

Doesn’t the Amputee Coalition get a lot of support from the orthotic and prosthetic industry?

KC: We have great and growing relationships with the industry. We value our industry partnerships and support. O&P companies and organizations support the Coalition in many ways – through sponsorships, corporate gifts and advertising in our *inMotion* magazine. We are interested in how we can grow current relationships and build new ones. We believe we offer much in the way of return on investment – every dollar spent with the Coalition goes back into supporting the limb loss community. But I also think that our partners need to see us in a new way to be able to really maximize our partnership.

MC: I think what Kendra is saying is that we are not the Amputee Coalition we were 10 years ago, although many potential industry partners still see us as just a community outreach effort. The organization has grown to be much more than that. We have some work to do with our industry partners to tell our story more effectively.

Does the Amputee Coalition tell its story?

KC: Not very well, but we are getting better at it. I think the lack of good communications is a real reason people don’t better understand why we ask for

money through a structured program around fundraising. In the past, the Coalition has not been viewed as a nonprofit needing donor support, and we need to do a better job of making that case to change that perception.

MC: We have taken for granted that people understood we are a nonprofit organization, understood the work we are doing, and understood the difference the work is making. That was a mistake. We need donations. We are a nonprofit that will survive and thrive with donor support. I hope this interview and this annual report begins a robust conversation with our constituents that increases their trust and commitment to the organization.

Possibilities Made Realities Through Philanthropy

Well-Being Initiative

Approximately 2 million people in the United States are currently living with limb loss. It is estimated that an additional 185,000 undergo amputation yearly, and the rate has increased over the past decade. Limb loss is associated with depressive symptomology and clinical depression, which adversely affects the rehabilitation process and outcomes in other chronic conditions.

“Effective programs to improve emotional well-being for people with limb loss are not widely available,” says George Gondo, research and analytics/special grants manager at the Amputee Coalition. “Traditionally, the mental health needs of people with limb loss were seen as the responsibility of psychologists, social workers or the primary physician. We believe comprehensive care of the individual is a team responsibility, including prosthetists who have ongoing relationships with amputees and are well-positioned to educate patients regarding the signs of psychosocial distress and provide information on resources for patients to seek appropriate care.”

Based on this concept, the Amputee Coalition worked with Johns Hopkins University to develop the Improving Well-Being Program (IWBP). This innovative educational program for prosthetists to take a more active role to enhance the mental health and resilience of their patients was developed with support from an educational grant from Össur Americas.



“The project is divided into three phases and will span several years, from development and piloting to full implementation,” says Gondo, who is working with Stephen Wegener, PhD, associate professor and director, Division of Rehabilitation Psychology & Neuropsychology at Johns Hopkins University.

“The long-term goal of the project,” Wegener explains, “is to improve the well-being of people with limb loss by developing scientific data and educational materials to support broad implementation of this pioneering program within the O&P community and incorporating training on programs that improve the emotional well-being of people with limb loss into the curriculum of nationally recognized prosthetic programs.”

Pilot Phase Results

Amputees think of their prosthetist as a source of support and a resource in dealing with their emotional well-being. The feasibility study and feedback from users provided solid data to support:

- Dissemination of program materials and training of prosthetists
- Broader dissemination and demonstration of program efficacy that will facilitate widespread utilization and sustainability.

Next Steps

The Amputee Coalition is seeking funding to go to the implementation phase, which will include:

- Providing prosthetists with training on how to manage conversations with patients about feedback and referral
- Developing education for patients on understanding the feedback, normalization of responses and resource options
- Developing curriculum for a student component to be included in prosthetic degree programs
- Providing a resource to prosthetic offices for identifying local referral options.

Össur Americas has agreed to provide matching funds up to \$100,000 to continue this program.

Participating Pilot Sites

Dankmeyer, Inc., in Linthicum, MD

Wright & Filippis, Inc., in Rochester Hills, MI

Next Step Orthotics & Prosthetics in Manchester, NH

Maryland Orthotics & Prosthetics in Baltimore, MD

Bulow Biotech in Nashville, TN

Amputee Coalition Paddy Rossbach Youth Camp

The 12th annual Amputee Coalition Paddy Rossbach Youth Camp was a huge success, with 101 campers in 2011. We saw an 18 percent increase in camper applications and received a total of 121 applications for the 2011 camp. The camp was full by the application deadline of March 15. This is the first time the camp has filled up by the application deadline. Due to space limitations, we accepted 101 campers, leaving 20 campers on a waiting list for the 2012 camp.

We hosted campers from 33 different states, and had our first camper from Louisiana, making that the 45th state that has sent a child to our camp. There were 42 new campers and 55 returning campers in attendance.

Bianca Kajlich, a star on CBS's *Rules of Engagement*, attended camp and offered her theater program for a second year. We were also excited to host Landon Donovan, Olympian, World Cup player and Los Angeles Galaxy soccer star. Landon taught a soccer session and also participated in other camp activities with the campers. We gained a variety of media coverage, including two TV stations covering campers from Knoxville, Tennessee. More than 17 different news outlets covered this year's camp program.

"The camp began as an adjunct activity to our National Conference," says Kim Henshaw, Amputee Coalition youth programs coordinator. "Now, camp is a stand-alone core program of the Coalition, and it's a joy to coordinate it."

Planning for each camp begins directly following the conclusion of the current camp. "While the campers are home unpacking, we are already working on the next camp," says Henshaw. The Amputee Coalition covers the costs of the camp and the travel for the campers to get to camp and back home.

"We couldn't do camp if it weren't for the generosity of our donors," Henshaw adds. "Each year, our costs for camp are between \$190,000 and \$200,000, and we cover those costs through donations. We and our campers really appreciate all the support we get for this exceptional program."



Evaluation Results

- 98 percent of campers said they felt good about themselves at camp.
- 76 percent of campers said they learned more about their limb loss/difference at camp.
- 92 percent of campers said they had a staff role model at camp.
- 88 percent of campers reported that they learned to take better care of themselves at camp.
- 90 percent of campers said they learned a new skill at camp.

Kathy Spozio Bridge to Ability Fund



Kathy would be proud.

Kathy Spozio was a longtime board member of the Amputee Coalition. She lost her battle with cancer in 2011, leaving a huge hole in the hearts of those she touched over her years of working with the Coalition. One of Kathy's big loves was the Amputee Coalition National Conference. She would have been proud to know that a fund was created to give new amputees who otherwise could not afford to be there the opportunity to attend the National Conference. In 2011, the Amputee Coalition Board of Directors named this fund in her honor.

The Kathy Spozio Bridge to Ability Fund is solely supported through generous contributions from Kathy's family and several corporate gifts from Hanger Orthopedic Group, ABC and others.

In 2011, 20 scholars were selected and attended the National Conference. The scholarship includes a full conference registration, travel and lodging expenses.

Take a moment to listen to two of the scholars who attended the 2011 National Conference:

Sara

Jessica





Socio-Economic/Cost-Effectiveness of Care Study

The Socio-Economic/Cost-Effectiveness of Care Study will help determine the financial benefit to government and private payers when a person with limb loss or limb impairment achieves restored mobility by getting orthotic and prosthetic (O&P) services. The benefit will be determined based on the total healthcare utilization and costs for those beneficiaries who received O&P services, compared with costs for clinically similar beneficiaries who, for whatever reason, did not receive these services.

“The study expands on the findings of a study done in Colorado by examining Medicare claims data at the patient level across settings of care,” says Dan Ignaszewski, Amputee Coalition government relations manager. “This data will be very useful for our continued efforts at the state and federal levels to pass our fair insurance bill.”

Unlike the Colorado study, the proposed study design will be able to show the healthcare expenses that can accrue when an individual does not receive appropriate O&P services, controlling for differences such as age. While there have been studies in different state Medicaid programs, the advantage to a study using Medicare claims is that a single nationwide estimate is possible in the context of a single nationwide benefit. The study is being conducted by Dobson DaVanzo & Associates, LLC, a health economics and policy consulting firm based in the Washington, D.C., metropolitan area.

“With healthcare reform writ large,” says Ignaszewski, “most state legislatures chose not to hear health-related bills in 2011. However, thanks to the hard work of our amputee advocates and friends in Delaware, it became the 20th state to pass our prosthetic and orthotic fair insurance law.”

In 2011, the Amputee Coalition government relations team and volunteer advocates worked with AOPA and NAAOP to advocate for prosthetic inclusion in the definition of “habilitative and rehabilitative” language in the essential health benefits in the Affordable Care Act (ACA). The Coalition also submitted comments to the Department of Health & Human Services and met with Secretary Kathleen Sebelius. Work continues to define the language.

“Having good, solid data that shows cost benefits for amputees having prosthetic care is going to significantly help make our arguments for fair insurance even more compelling,” says Ignaszewski.

This study is made possible by a gift from AOPA.



Strategic Partnerships That Support Critical Programs

Amputee Resilience Program

Through the Amputee Coalition's Resilience Program, the VA is working to improve and enhance the recovery and readjustment of the more than 41,000 Veterans living with limb loss across the country. Training began in 2011 and implementation has begun throughout the VA's Amputation System of Care (ASoC).

"Losing a limb can be emotionally devastating," says Cindy Poorman, rehabilitation planning specialist with the VA and the VA lead on this initiative. "New amputees often feel overwhelmed and isolated and wonder what the future holds. This program offers them and their families support, information and education that can empower them to move forward, regain hope and live well with limb loss."

The Amputee Coalition's program also has been integrated into the Department of Defense's support for wounded warriors, and the Coalition has provided its program to the Wounded Warrior Project.

"We feel a deep commitment to our returning soldiers with limb loss and to our many Veterans who lose limbs, largely due to diabetes," says Kendra Calhoun, president & CEO of the Coalition. "This is a small way of appreciating the service these men and women have given our country."

In 2010, the VA and the Amputee Coalition began the journey of integrating the Amputee Resilience Program into the ASoC. The program also includes training for the families of Veterans living with limb loss.

"Often, family members are unsung heroes caring for their loved ones," says Calhoun. "The support of the family caregiver is vital to the recovery of the amputee and cannot be stressed enough. Through our work with the VA, we created a new program focusing on connecting the family caregiver with other caregivers who can share their learning and help them cope through a very difficult time. We hope to roll out this program to the civilian sector in 2013."

Today, the VA is able to train and provide certified amputee peer visitors and caregiver peer visitors to Veterans who experience limb loss. Additionally, through this program, according to Poorman, the VA will launch a self-management program called Promoting Amputee Life Skills (PALS), designed to speed readjustment and management of issues such as pain for the new amputee.

"Our goal is to ensure that every amputee in the VA system and his or her caregiver has the opportunity to receive a visit from a certified peer visitor and has access to a range of recovery services," says Poorman. "The key to this program is hope – hope through the interaction of new amputees with amputee mentors who can tell them and show them there is life after limb loss."

National Limb Loss Resource Center

Without information, those affected by limb loss can be at a disadvantage. Through a cooperative agreement with the CDC that began in 1997, the Amputee Coalition developed and now manages the National Limb Loss Resource Center (NLLRC). The patient education materials, information packets and resources available through the NLLRC are available at no cost to amputees and their families.

In 2011, more than 3,500 constituents were served through phone calls and emails for information and resources. We fulfilled over 4,000 requests for information and resources.

Our Web site (amputee-coalition.org) received nearly 500,000 visits, including over 194,000 international visits in 2011. In addition, our Web site received 375,000 unique visitors.

National Conference

Thanks to our continued partnership with the CDC, the Amputee Coalition held its 2011 National Conference in June in Kansas City, Missouri, with approximately 800 people attending. Individuals came from 42 states and seven countries (U.S., UK, Australia, Brazil, Canada, Mexico and Turkey).

The conference featured 50 sessions focusing on issues related to limb loss, including 20 sessions, clinics and workshops promoting healthy living for people with limb loss. Among these were a rock climbing wall, a stand-up basketball exhibition, a hand cycle clinic, First Tennis, First Swim, yoga, the Amputee Sport and Performance Enhancement Clinic, and a gait analysis workshop.

The event was a success! In their evaluations, people with limb loss reported that after attending the conference:

- 62 percent improved their confidence in their ability to be physically active as a person with limb loss
- 45 percent improved their confidence in their ability to participate in social activities
- 51 percent said that they will lead a healthier lifestyle as a result of attending the conference
- 81 percent improved their knowledge about assistive devices and prosthetics they need to lead a full and productive life.

In addition, 73 percent of the caregivers reported they felt better equipped to handle the stress of being a caregiver to a person with limb loss. Also, 90 percent of the healthcare providers said they learned something that will help them as a healthcare provider who works with people with limb loss.

One attendee commented: "I came away from this conference feeling very empowered to help myself and to help other amputees." Another wrote: "I went into my amputation two days later with so much more confidence and felt really good about the decision I was making."



A Word From Our Treasurer

Despite a time of weak economic growth, I am proud to report that the Amputee Coalition has remained diligent in its fiscal stewardship and met our responsibility to spend within our means and generate net income during 2011.

In 2011, revenue increased 14.9 percent to \$3.32 million from \$2.89 million in 2010. We saw significant increases in grants, donations, sponsorships and advertising, with total revenue from these four sources climbing to \$2.8 million from \$2.3 million. These contributions allowed us to sustain and grow our mission programs with total spending of \$3.2 million.

Despite the success of our 2011 results, we know that in the coming years, as federal agencies continue to cut funding to grantees, we must look to philanthropy to play a bigger role in funding our mission. Every amputee should have peer support, and we are striving to make that happen. Not a week goes by that we don't receive thanks from our constituents for the work that we are doing. However, we want to do more and are up for the challenge, but we need the funding.

My thanks to those who have supported us through these difficult economic times and my appreciation to those who join us in our goal of ensuring that no amputee goes through the journey of recovery and readjustment alone.

Jeffrey Lutz, CPO
Treasurer



Financial Highlights 2011

STATEMENT OF ACTIVITIES

SUPPORT AND OTHER REVENUE

Donations & Sponsorships	589,130
Grants Receipts	1,962,270
Publication Advertising.....	264,245
Memberships	227,766
Sales of Education Materials	33,980
National Conference.....	239,402

TOTAL SUPPORT AND OTHER REVENUE..... 3,316,793

Expenses

Program Services.....	2,427,628
Management & General.....	345,082
Fundraising.....	405,083

TOTAL EXPENSES 3,177,793

BALANCE SHEET

ASSETS

Cash & Equivalents.....	543,820
Accounts Receivable (net)	220,265
Contributions Receivable	142,744
Grants Receivable.....	66,363
Fixed Assets (net)	10,744
Other Assets.....	137,970

TOTAL ASSETS..... 1,121,906

LIABILITIES

Accounts Payable & Accrued Liabilities.....	262,601
Deferred Revenue.....	71,395

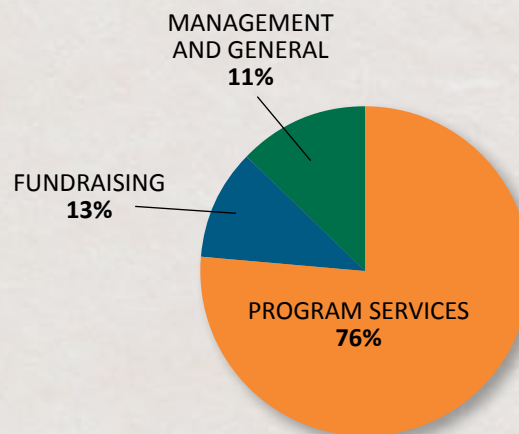
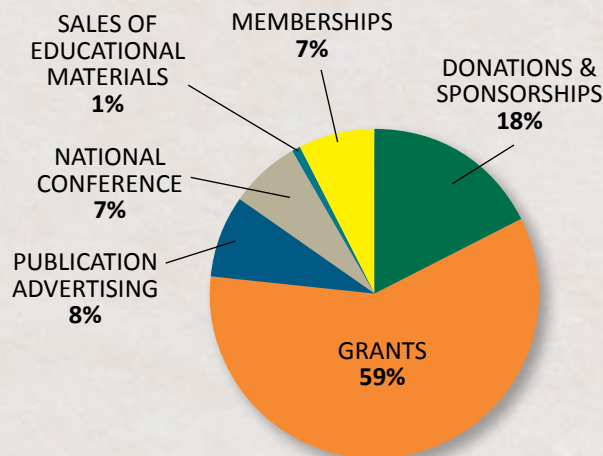
TOTAL LIABILITIES..... 333,996

NET ASSETS

Unrestricted Net Assets.....	332,235
Temporarily Restricted Net Assets.....	455,675

TOTAL NET ASSETS 787,910

TOTAL LIABILITIES AND NET ASSETS..... 1,121,906



Special Thanks to Our National Sponsors

We recognize our National Sponsors, whose commitment and generosity helps the Amputee Coalition reach out to an increasing number of people in the United States living with limb loss and limb difference and those at risk.

Platinum

Hanger Orthopedic Group
Otto Bock HealthCare, Inc.

Gold

Össur Americas

Silver

Thorlos
WillowWood

Bronze

American Board for Certification in Orthotics, Prosthetics & Pedorthics, Inc. (ABC)
Board of Certification/Accreditation, International (BOC)
Institute for Preventive Foot Health
Purdue Pharma, LP

Leadership

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Pat Chelf, Vice-Chair
Dennis Strickland, Vice-Chair
Tami Stanley, Secretary
Jeffrey Lutz, Treasurer
Jeffrey Cain
David McGill
Richard Myers, Jr.
Leslie Pitt Schneider
Terrence Sheehan, MD
Charles Steele
Scott Stevens, MD

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Roberta Cone, PsyD
David Crandell, MD
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Rachel Evans, Lt. Col., PT
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Bob Gailey, PhD, PT
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Terrence Sheehan, MD, Medical Director
Christina Skoski, MD
Charlie Steele
Kendra Calhoun, MS
Pat Isenberg, MS
George Gondo, MA

Committees & Chairs

Education & Conference Committee –
Jack Richmond

Editorial Board

Executive Committee – **Marshall J. Cohen**

Finance Committee – **Jeffrey Lutz**

Government Relations Committee – **Leslie Pitt
Schneider**

Nominations Committee – **Dennis Strickland**

Scientific & Medical Advisory Committee (SciMAC) –

Stephen Wegener, PhD, ABPP

Upper-Limb Advisory Committee – **Open**

Staff Leadership

Kendra Calhoun – President & CEO

Sue Stout – Chief Communications & Policy Officer

Patricia Isenberg – Chief Operating Officer

Tracee McFarland – Comptroller

Vicki Foster – Marketing Director

Thank You to Pat Isenberg

The Amputee Coalition would like to thank Patricia Isenberg, chief operating officer, for her years of service. Isenberg, who joined the Coalition in 2000 and was named COO in 2002, retired at the end of 2011.

When Isenberg came onboard, the Coalition gained an innovator who created new programs for the organization and enhanced established ones. She developed the Limb Loss Education and Awareness Program (LLEAP), a program for schoolchildren focusing on disability awareness and specifically on the needs of children with limb loss. At the same time, she worked with members of the Medical Advisory Committee to educate healthcare providers about the psychosocial, physical and rehabilitation needs of people with limb loss.

Isenberg saw the need to overhaul and revise the Coalition's peer visitor program. At the time, training was not standardized, with no national certification for trainers or peer visitors. With help from both staff and volunteers, she developed the program materials and created the standardized training protocol. The first train-the-trainer seminar was presented in 2002. Fortunately for the Coalition, Isenberg is continuing her work for us with the peer visitor program training.



Pat Isenberg and members of the Wounded Warrior Project.

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To reach out to and empower people affected by limb loss to achieve their full potential through education, support and advocacy, and to promote limb loss prevention.

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