



## Licking Memorial Health Systems

1320 West Main Street  
Newark, OH 43055

Please take a few minutes to read this month's report on **Surgical Care**. You'll soon discover why

Licking Memorial Hospital is measurably different ... for your health!

Visit us at [www.LMHealth.org](http://www.LMHealth.org)

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## Quality Report Card Licking Memorial Health Systems

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### Health Tips

Here is a list of things you should do in preparation for a surgical procedure at Licking Memorial Hospital:

- Carefully follow your physician's instructions about fasting. You should have nothing at all to eat or drink before surgery.
- Bring a complete and current list of all medications you are taking. Please include any over-the-counter medicines and dietary supplements.
- If you use an inhaler, bring it with you.
- Bring a complete list of your allergies.
- Bring your photo identification.
- Do not bring any valuables.
- If you are having a colonoscopy in outpatient surgery, please bring someone to wait with you and drive you home.
- All surgical procedures are now performed in the new John & Mary Alford Pavilion. Please use the Surgery Entrance and check in on the second floor.

# Surgical Care – How do we compare?

At Licking Memorial Health Systems (LMHS), we take pride in the care we provide. To monitor the quality of that care, we track specific quality measures and compare them to benchmark measures. Then, we publish them so you can draw your own conclusions regarding your health care choices.

Check out  
our Quality  
Report Cards online  
at [www.LMHealth.org](http://www.LMHealth.org).

**1** Conscious sedation allows patients to tolerate unpleasant procedures while maintaining adequate breathing and the ability to respond to stimulation. Most of the drugs used in conscious sedation can be reversed fully or partially if necessary. However, careful patient assessment and monitoring reduce the need for reversal agents and improve patient outcomes. Therefore, minimal use of reversal agents is a good indicator of quality in conscious sedation.

	LMH 2005	LMH 2006	LMH 2007	LMH Goal
Use of reversal agent – GI procedures	0.55%	0.70%	0.12%	less than 0.90%

**2** The health care team at Licking Memorial Hospital follows a multiple-step process to prevent wrong-patient, wrong-procedure or wrong-site surgery (e.g., surgery performed on the left foot instead of the right foot). This process includes left or right designation at the time the surgery is scheduled, verification of the site on the day of surgery with the patient and the patient’s current medical record, marking the site, and final verification in the operating room.

	LMH 2005	LMH 2006	LMH 2007	LMH Goal
Number of surgeries	5,444	5,272	6,065	n/a
Wrong-site surgeries	0	0	0	0
Surgical site verification checklist completed	100%	99 %	99%	100%

**3** Receiving the appropriate antibiotic within an hour before surgery reduces a patient’s risk for developing infection. Additionally, discontinuing use of antibiotics within 24 hours after surgery lessens the patient’s risk of developing antibiotic-resistant bacterial infections. Medical studies have shown that the use of certain antibiotics, specific to each surgery type, can be most effective at preventing infections after surgery.

	LMH 2005	LMH 2006	LMH 2007	National <sup>(1)</sup>
Antibiotic received within 1 hour	89%	94%	95%	84%
Antibiotic selection accurate per national recommendations	92%	92%	93%	91%
Antibiotic discontinued within 24 hours	78%	87%	94%	82%

**4** The removal of hair from the site of surgery is an important way to prevent infection. Using a razor to remove hair can cause tiny breaks in the skin which increase the risk of infection after surgery. This measure tracks the percentage of times that patients had hair removal performed by clippers or other means which are less likely to cause infection than razors. In certain instances, clippers may not be the ideal form of hair removal, and razors may be used.

	LMH 2006 <sup>(3)</sup>	LMH 2007	National <sup>(2)</sup>
Appropriate hair removal performed	99.7%	98.7%*	99.5%

\*Out of 463 surgery case reviews, six cases were found not to have used clippers for hair removal. A review of these cases found that they were clinically appropriate.

**5** Medical studies have shown that if patients experience hypothermia (low body temperature) during and after surgery, they have a greater risk of developing complications. Effectively warming patients during surgery can ensure their body temperatures remain in normal range. This measure tracks the percentage of patients at LMH who had a normal body temperature immediately after surgery.

	LMH 2007	LMH 2006	LMH 2007	LMH Goal
Immediate post-operative temperature within normal range	92%	94%	100%	greater than 90%

**6** VTE, or venous thromboembolism, is the medical term for a blood clot that forms in a vein. Surgery increases the risk of VTE, and while most clots can be treated, some can be life-threatening. It is recommended that hospitals use medications and mechanical devices to prevent the formation of blood clots. LMH tracks the percentage of patients who correctly had these interventions used, and whether the interventions were activated within 24 hours of surgery, as recommended.

	LMH 2006 <sup>(3)</sup>	LMH 2007	National <sup>(1)</sup>
VTE prophylaxis ordered	83%	93%	80%
VTE prophylaxis started within 24 hours of surgery	74%	81%	77%

**7** Licking Memorial Hospital patients who have had total joint surgeries, including hip and knee operations, tend to be able to return home to recover more quickly than patients undergoing the same procedures elsewhere. Offering physical therapy on weekends and new medications are two factors that have lessened hospital stays for these patients.

	LMH 2005	LMH 2006	LMH 2007	National <sup>(1)</sup>
Primary total joint patients with length of stay six days or less	97.7%	96.6%	98.7%	94.2%

**Data Footnotes:** (1) Hospitalcompare.hhs.gov national benchmarks. (2) Midas+ Comparative Database with over 440 participating hospitals. (3) National data collection for surgical indicators expanded in 2006 to include these measures.

## Patient Story – Margaret Kirby

A nagging pain in her right breast was a reminder for Margaret Kirby last spring that she was scheduled for a mammogram. Margaret, who is turning 41 years old on November 12, has had annual mammograms for many years because of fibrocystic breast disease and a family history of breast cancer. Her family physician, Talya Greathouse, M.D., of Licking Memorial Family Practice, had previously checked Margaret’s medical records during a routine exam and reminded Margaret that it was time for her annual mammogram.

Dr. Greathouse commended Margaret for paying attention to her body’s warning signs. “Breast pain is not commonly one of the symptoms associated with breast cancer,” she said. “However, it is certainly not a symptom that we disregard. Early-stage breast cancer often has no notice-



Margaret Kirby greets customers with a radiant smile at her desk at Time Warner in Newark.

able symptoms at all. Margaret’s case reinforces the reason we encourage women at high risk for breast cancer to be diligent about regular mammograms. This was a real lifesaver for her.”

After the mammogram showed abnormal results, Dr. Greathouse ordered a stereotactic core needle biopsy. When that test indicated that Margaret had cancer, she was referred to Larry Pasley, M.D., of Licking Memorial Surgical

Services, and Jacqueline Jones, M.D., of Licking Memorial Hematology/Oncology, for an aggressive treatment plan.

“Since Margaret was diligent about having an annual mammogram, we were confident that the malignancy had not been growing for an extended length of time,” Dr. Pasley

*Patient Story – Margaret Kirby (continued on next page)*

explained. “That knowledge allowed us more options in her treatment plan, and the decision was made to start with the least invasive surgery possible for her which was a lumpectomy.”

Margaret had a lumpectomy on June 30. Unfortunately, tissue samples taken during surgery indicated that the cancer cells had begun to spread, so she returned to surgery to have her right breast removed on July 30.

Even before Margaret awoke in the recovery room at LMH, her reconstruction process was underway. James Jeffries III, M.D., of Licking Memorial Reconstructive and Cosmetic Services, worked in conjunction with Dr. Pasley to surgically expand the skin around the surgical site to prepare for an implant.

Although the cancer diagnosis was very distressing, Margaret found that the LMH staff and the new surgery facilities in the John & Mary Alford Pavilion helped to make a difficult situation a little easier. “I had surgery years ago, and this experience was completely different,” she said. “Everybody was really upfront with me, answering my questions and explaining everything they were doing. The anesthesiologist wanted to know what kind of music I like. I can remember hearing some of the music when I was first taken in the operating room. I was not scared or nervous because everybody was really nice and talking to me the whole time.”

## Insurance Coverage Includes Breast Reconstruction for Mastectomy Patients

When a breast cancer patient receives her diagnosis, one of her main concerns is often the fear of disfigurement caused by the removal of one or both breasts. Medical studies have shown that breast reconstruction immediately after mastectomy is usually safe and can have a very positive effect on the patient’s emotional healing. Even patients who had mastectomies several years previously usually have excellent results with reconstruction.

“The word ‘cancer’ is difficult enough for anyone to deal with, but in the case of a breast cancer patient, there is an added element of a damaged self-image,” Plastic Surgeon James Jeffries III, M.D., commented. “A woman can look perfectly healthy and vibrant to everyone else, but if she has an underlying anxiety about her body, it can affect her quality of life. That fear can even deter some women from having the surgery they need.”

To make breast reconstruction more available to patients the

Margaret also found great comfort in being surrounded by family and friends. “My husband, Michael, and our children, Sade, Meyonka and Tremell, were all able to be in the room with me before surgery.” They were also able to visit in the room when Margaret returned from surgery.

Other family members – her mother and father, Margaret and Frank; sister, Marie; and brother, Frankie – were quick to show their loving support. At home, Margaret’s close friend, Tina Persinger, became an important component of her recuperation. “It made a big difference to have the support of my family,” she said. “Tina is a cancer survivor, herself, so she knew what I was going through. She was always there for me, helping me bathe and changing my tubes. The staff at Time Warner where I work also helped a lot. They brought meals and helped in any way they could. It means so much to have that kind of support from friends.”

In early 2009, Margaret will receive a saline implant to complete her breast reconstruction. “I am looking forward to getting everything over with and getting back on track – getting back to normal,” Margaret said. She will take Tamoxifen for five years, but does not need to undergo radiation or chemotherapy treatments. She intends to treat herself soon to a couple of simple indulgences, new clothes and a new hairdo, to celebrate the new year and a new stage of her life.

federal government has mandated that insurance companies provide coverage for the procedure. Under group or individual health plans, medical insurance covers reconstruction on the removed breast(s), as well as coverage for reconstruction on the unaffected breast to produce uniform results.

“This law has been in effect since 1998,” Dr. Jeffries said. “Many women do not know about this law, and the relief is obvious in their expressions when they first hear about it. Some of them had a mental image of having just one breast for the rest of their lives. Having breast reconstruction available to them as soon as possible takes away one more change they have to deal with.”

Dr. Jeffries is accepting new patients at his office, Licking Memorial Reconstructive and Cosmetic Services, located at 1272 W. Main St., Moundbuilders Doctors’ Park, Building Two, in Newark. Appointments can be made by calling (740) 348-7955.