



Licking Memorial Health Systems

1320 West Main Street
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Please take a few minutes to read this month's report on **Heart Care**.

You'll soon discover why Licking Memorial Hospital is measurably different ... for your health!

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Quality Report Card

Licking Memorial Health Systems

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Health tips – Heart Attack

Dial 9-1-1 fast – Heart attacks are life-and-death emergencies – every second counts. If you see or have any of the listed symptoms, immediately call 9-1-1. Not all these signs occur in every heart attack or stroke. Sometimes they go away and return. If some occur, get help fast!

Know the warning signs of a heart attack

- Most heart attacks start slowly, with mild pain or discomfort. Often people who are affected are not sure what is wrong and wait too long before getting help.
- Chest discomfort. Most heart attacks involve discomfort in the center of the chest that lasts more than a few minutes, or that goes away and comes back. It can feel like uncomfortable pressure, squeezing, fullness or pain.
- Discomfort in other areas of the upper body. Symptoms can include pain or discomfort in one or both arms, the back, neck, jaw or stomach.
- Shortness of breath. It may occur with or without chest discomfort.
- Other signs. These may include breaking out in a cold sweat, nausea or lightheadedness.

Do not wait

If you or someone you are with has chest discomfort, especially with one or more of the other signs, do not wait longer than a few minutes (no more than five minutes) before calling for help. Call 9-1-1 and get to a hospital right away.

Heart 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.

- 1** ACE inhibitors reduce the risk for mortality in patients with LVSD after heart attack. LVSD refers to the reduced squeezing ability of the left ventricle that can occur after heart attack. Additionally, the likelihood of the patients having another heart attack can be reduced if an ACE inhibitor is administered.

	LMH 2005	LMH 2006	LMH 2007	National ⁽¹⁾
ACE/ARB at discharge for LVSD	100%	100%	100%	88%

- 2** The first step in heart attack treatment is to confirm that the patient is truly experiencing the symptoms of an attack. An electrocardiogram, or EKG, measures the electrical activity of the heart and can determine if a heart attack is occurring.

	LMH 2005	LMH 2006	LMH 2007	Goal ⁽²⁾
Median time to EKG	7 minutes	9 minutes	5 minutes	less than 10 minutes

- 3** Thrombolytic, or “clot-busting,” medications can stop a heart attack in progress which helps to prevent heart damage and to save lives. Therefore, the sooner a patient arrives at the hospital and receives the drug, the more effective the treatment will be.

	LMH 2005	LMH 2006	LMH 2007	National ⁽³⁾	Goal ⁽²⁾
Median time to drug	30 minutes	45 minutes	35 minutes	35 minutes	less than 30 minutes

- 4** LMH’s cardiac catheterization lab performs low-risk diagnostic testing on patients suspected of having blockage in their arteries. A measure of quality during the procedure is the rate of unexpected events.

Unexpected Event	LMH 2005	LMH 2006	LMH 2007	State ⁽⁴⁾
Mortality	0.97%*	0%	0%	0.10%
Heart attack	0%	0%	0%	0.03%
Cardiac arrest	0%	0%	0%	0.10%
Stroke	0%	0%	0%	0.01%
Vascular complications	0%	0%	0%	0.23%

*Percent reflects one patient of 103 tests.

- 5** During a heart attack, the heart tries to compensate for its weakened pumping action by beating faster which puts more strain on it. Beta blockers reduce the heart’s tendency to beat faster. Additionally, aspirin has been shown to prevent further blood clotting in heart attack patients.

	LMH 2005	LMH 2006	LMH 2007	National ⁽¹⁾
Aspirin within 24 hours of patient arrival	91%	89%	100%	94%
Aspirin at hospital discharge	97%	91%	100%	91%
Beta blocker within 24 hours of patient arrival	92%	88%	94%	89%
Beta blocker at hospital discharge	100%	100%	100%	92%

6 Cardiac rehabilitation programs aid people who have experienced heart attacks. LMH’s program provides medical oversight and heart monitoring for individuals as they exercise and strengthen their hearts. LMH also measures participants’ progress in improving certain indicators of heart health.

Health Indicator	LMH 2005	LMH 2006	LMH 2007	Goal
Stopped smoking	71%	70%	66%**	greater than 75%
Improved weight	60%	62%	44%**	greater than 75%
Increased exercise time	98%	100%	100%	100%

**The cardiac rehabilitation goals are customized for each individual patient. LMH recently implemented an incentive program to reinforce the importance of making healthy lifestyle choices.

7 Licking Memorial Health Professionals (LMHP) physicians monitor the cholesterol levels, specifically the LDL (bad cholesterol) levels of their patients with diagnoses of coronary artery disease (CAD). Elevated LDL cholesterol level is a risk factor for myocardial infarction (MI), but is reversible through medication, diet and exercise.

	LMHP 2006	LMHP 2007	National Goal ⁽⁵⁾
LMHP coronary artery disease patients with LDL less than or equal to 100 mg/dl	60%	67%	50%

8 LMHS physicians also monitor the usage of antiplatelet drugs such as aspirin or Plavix in patients with CAD. The usage of these medications lowers the risk of MI or death in patients with CAD.

	LMHP 2006	LMHP 2007	Goal
LMHP coronary artery disease patients with aspirin and/or Plavix prescribed	93%	93%	greater than 80%

Data Footnotes: (1) Hospitalcompare.hhs.gov national benchmarks.(2) ACC/AHA Guidelines for the Management of Patients with Acute Myocardial Infarction, 1999. (3) Comparative data from the Midas Comparative Database.(4) Ohio Department of Health, Adult Cardiac Catheterization Reports using 2002 Ohio data for low risk laboratories. (5) National Goal – Heart/Stroke Recognition Program (National Committee for Quality Assurance/ American Heart Association/ American Stroke Association.

Patient Story – Christine Cline



Christine Cline

Last summer, 53-year-old Christine Cline was settled on the couch for a relaxing evening of television with her husband, Rick, in their Newark home. At one point, she stretched out her arm, as she had done thousands of times before, and felt a sudden “catch” under her left rib. “It hurt terribly,” Christine remembered. “I had trouble breathing, and my left arm began to go numb.”

After 10 or 15 minutes, the pain had not subsided, so Rick called the emergency medical squad. The emergency medical technicians gave Christine some nitroglycerin tablets and transported her immediately to the Emergency Department at Licking Memorial Hospital (LMH).

It was determined that Christine had suffered a myocardial infarction, commonly known as a heart attack. She was admitted to LMH, and two days later, Interventional Cardiologist Imtiaz Ahmed, M.D., inserted a stent to repair the arterial blockage.

“I had a few surgeries before, but this one was completely different,” Christine said. “I was under conscious sedation and could hear the staff talking in the operating room.” Although, Christine said she was not in

pain during the procedure, she could feel pressure occasionally. During those times, staff members reassured her by explaining what they were doing.

Christine recovered from the surgery quickly. It was performed on Thursday, August 21, and she was up and walking to the lounge by Friday, August 22. A country-born and independent woman originally from the “Chickenville Hill” area in Hanover Township, Christine was determined to get back on her feet and return to her home on Donn Road. She accomplished that on Saturday, August 23.

“At first I didn’t feel different,” Christine recalled about her first days back at home. “But then I was so tired I had to have a long nap every day.” However, she felt strong enough to begin a new job on August 29 as a school bus aide for a special needs student.

Christine has visited the LMH Heart Center for her follow-up care and has completed her prescribed six-to-eight weeks of cardiac rehabilitation. “The staff members are so special. They treat you like you’re precious. They are always in there checking on you,” she said. She intends to follow up with the recommended monitored exercise program at the Licking Memorial Wellness Center where, coincidentally, her daughter, Darcy Nethers, is the program

Patient Story – Christine Cline (continued on next page)

coordinator. “She doesn’t push me about exercising. She just tells me to come in,” Christine said.

Christine also has a grown son, George, and three grandchildren. Her days are filled with many of the normal grown-up activities, such as house cleaning and

Time Is Muscle

For many years, physicians have urged their patients to seek immediate help if they suspect they may be having a heart attack. The American Heart Association emphasizes that anyone who has chest pain or other symptoms of a heart attack (see inset) should call 9-1-1 immediately, especially if the symptoms have continued for five minutes.

“In cardiology, we have a saying that ‘Time is muscle,’” said Patty Merrick, C.N.P., Director of Cardiac Services at Licking Memorial Hospital (LMH). “More irreversible damage is done to the heart muscle every minute that a heart attack continues, so it is crucial to seek help immediately. The sooner we can stop the attack, the better the chances are for a good outcome.”

Because every minute matters in a life-or-death situation such as a heart attack, LMH Emergency and Cardiology staff members have choreographed procedures with area Emergency Medical Services (EMS) personnel to make sure no time is wasted. In 2007, LMH donated 12-Lead EKG equipment to Licking County’s EMS departments so that heart attack patients’ care can begin even before they arrive at LMH’s Emergency Department (ED).

LMH’s plan of care for cardiac patients in Licking County is called into action on a daily basis. One example was demonstrated last fall when John, a 65-year-old retired factory laborer, was working on the roof of his Newark home and began having chest pains, weakness, shortness of breath and heavy perspiration. John has a history of coronary artery disease and had stents implanted several years ago. His true experience illustrates how efficiently the emergency and hospital staffs work together to save patients’ lives.

Friday, October 10, 2008

- 1:14 p.m. – John’s wife calls 9-1-1. John takes two aspirins.
- 1:23 p.m. – Newark EMS arrives at John’s residence. Newark EMS begins an IV.
- 1:36 p.m. – An emergency medical technician (EMT) gives John more aspirin and nitroglycerin.
- 1:40 p.m. – EMTs place 12-Lead EKG electrodes on John’s chest to see if he is having a heart attack and to monitor John during his transport to the ED.
- 1:43 p.m. – The 12-Lead EKG results are transmitted to the LMH ED and to Dr. Ahmed’s handheld Blackberry device.



Licking Memorial Hospital’s donation of 12 Lead EKG equipment allows physicians to begin planning cardiac patients’ care even before the emergency squads arrive at the Emergency Department.

laundry, but she is making more time now for walking and other exercise to strengthen her heart. Some days, she indulges the “kid side” of her personality with a jigsaw puzzle or a rousing game of Mario Brothers – favorite relaxation activities that do her heart a great deal of good, too.

- 1:46 p.m. – EMS arrives at LMH where an emergency bed is ready.
- 1:53 p.m. – An ED nurse alerts the “STEMI” team using voice-activated Vocera paging system and transfers John to a cardiac monitor in the ED.
- 1:57 p.m. – An ED medic starts an IV, and blood work is drawn to send to the Laboratory.
- 2:03 p.m. – John still has severe pain. He is alert and able to answer questions.
- 2:04 p.m. – ED Physician Mary Jane Scott, M.D., makes diagnosis of acute anterior wall myocardial infarction (heart attack).
- 2:05 p.m. – Dr. Scott and Interventional Cardiologist Imtiaz Ahmed, M.D., discuss the risks and benefits of angioplasty with John, and he agrees to the procedure.
- 2:09 p.m. – John is taken to the LMH Catheterization Lab (Cath Lab), accompanied by Dr. Scott and an ED nurse.
- 2:12 p.m. – The Cath Lab staff prepares John for the procedure that will open John’s artery.
- 2:22 p.m. – Dr. Ahmed begins the angioplasty procedure, inserting the catheter in John’s groin.
- 2:25 p.m. – An angiogram shows the left anterior chamber of John’s heart is totally blocked.
- 2:34 p.m. – The angioplasty balloon is inflated.
- 2:42 p.m. – A thrombectomy catheter is inserted.
- 2:44 p.m. – Under conscious sedation, John reports he has no chest pain or any other discomfort.
- 3:31 p.m. – The angioplasty balloon is inflated again.
- 3:38 p.m. – The catheter is removed.
- 3:55 p.m. – Dr. Ahmed reviews computerized images.
- 4:02 p.m. – The catheterization procedure is complete.
- 4:02 p.m. – John reports he has no chest pain or other discomfort.
- 4:04 p.m. – John is taken to the Intensive Care Unit for recovery.

Monday, October 13, 2008

- 11:40 a.m. – John is discharged with instructions to see Dr. Ahmed for a follow-up visit.

“John’s story shows very clearly how quickly we can stop a heart attack in its tracks,” Patty explained. “We are so fortunate to have state-of-the-art interventional cardiac services right here at Licking Memorial. This allows us to receive cardiac patients much sooner, and we can use that saved time to begin treating their heart attacks instead of having that precious time wasted in a long commute to Columbus.”

In 2007, LMH expanded heart care services to include primary and elective balloon angioplasty and stent insertion. LMH contracted with OhioHealth’s Riverside Methodist Hospital in Columbus to provide program development to offer expanded services locally for Licking County residents.