



# Licking Memorial Health Systems

1320 West Main Street  
Newark, Ohio 43055

Please take a few minutes to read this month's report on **Emergency Care**.

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

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

The Quality Report Card is a publication of the LMHS Public Relations Department.

Please contact the Public Relations Department at (740) 348-1572 to receive future mailings.

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## Quality Report Card Licking Memorial Health Systems

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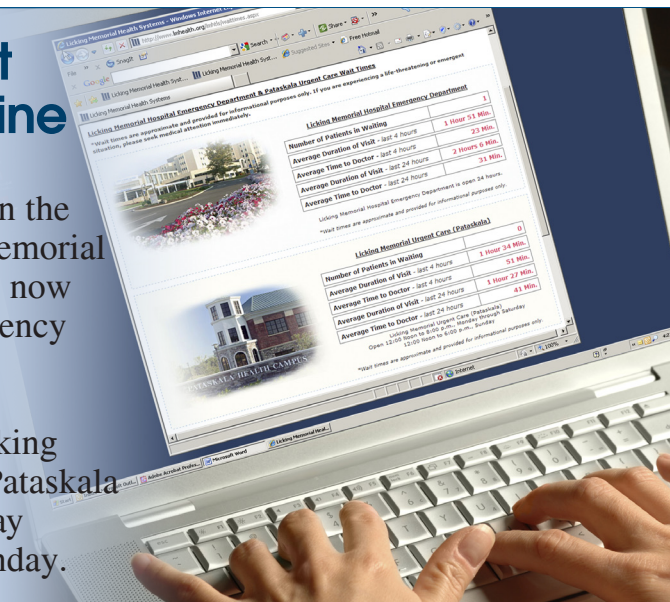
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### Health Tip – Emergency Department Wait Information Now Available Online

Patients who are in need of immediate, non-emergency medical attention, but may be unsure about the wait time in the Emergency Department, are invited to visit the Licking Memorial Health Systems Web site at [www.LMHealth.org](http://www.LMHealth.org). The site now provides current wait time information for both the Emergency Department and Licking Memorial Urgent Care.

If your condition is not life-threatening, you may visit Licking Memorial Urgent Care, located on State Route 16, at the Pataskala Health Campus, open from 12:00 Noon to 8:00 p.m., Monday through Saturday, and from 12:00 Noon to 6:00 p.m., on Sunday.



# Emergency 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** During 2009, there were 58,311 visits to the Licking Memorial Hospital (LMH) Emergency Department (ED).

	LMH 2007	LMH 2008	LMH 2009	Goal
Average length of stay in the ED	3 hrs. 11 min.	2 hrs. 55 min.	2 hrs. 53 min.	less than 3 hrs. 18 min. <sup>(1)</sup>
Average length of stay in the ED before being admitted	4 hrs. 30 min.	4 hrs. 6 min.	3 hrs. 55 min.	less than 4 hrs.
Patients in the ED for more than 6 hours	6.2%	4.1%	3.1%	less than 6%
Average arrival-to-physician time	1 hr. 19 min.	1 hr. 11 min.	1 hr. 10 min.	less than 56 min. <sup>(1)</sup>

**2** Emergency angioplasty restores blood flow in a blocked heart artery by inserting a catheter into the artery to implant a stent. The procedure has been proven to save lives during a heart attack, and it is most effective when performed within 90 minutes of the patient’s arrival to the Emergency Department to minimize irreversible damage from the heart attack. Licking Memorial Hospital (LMH) began to perform this procedure in 2008.

	LMH 2008	LMH 2009	National	Goal
Average time to balloon	74 min.	67 min.	73 min. <sup>(2)</sup>	less than 90 min. <sup>(3)</sup>
Time to balloon within 90 minutes	92%	94%	77% <sup>(4)</sup>	greater than 90%

**3** For patients presenting with pneumonia, timing is critical for effective treatment. LMH tracks the time it takes to deliver antibiotics.

	LMH 2007	LMH 2008	LMH 2009	National <sup>(4)</sup>
Pneumonia patients receiving antibiotic dose within 6 hours	96%	98%	97%	94%

**4** Unscheduled returns to the ED may signal a problem in patient care, such as inadequate diagnosis or treatment during the initial visit, a patient’s inability to understand or follow discharge instructions, lack of access to care in the community or other factors. Identifying patients at risk of an unscheduled return can reduce costs, minimize misuse of ED services, and allow for better care of those who need it.

	LMH 2007	LMH 2008	LMH 2009	Goal
ED patients who return to the ED within 24 hours of discharge	1.2%	1.3%	1.4%	less than 2%

**5** An unscheduled admission to the Hospital within 72 hours after a visit to the ED, may signal a problem in patient care, such as inadequate diagnosis or treatment during the initial visit, patient non-compliance with discharge instructions or a patient’s inability to understand or follow discharge instructions. Careful review of the data can help identify ways to improve care, and to work with community agencies and resources to reduce unnecessary use of ED services.

	LMH 2007	LMH 2008	LMH 2009	Goal
Patients admitted to the Hospital within 72 hours of ED visit	0.76%	0.77%	0.74%	less than 1%

**6** A study published in the New England Journal of Medicine reported that patients are safer and less likely to experience serious complications when they are treated in hospitals with more registered nurses on staff. LMH recruits experienced nurses and clinical graduates from area nursing schools for open positions at the Hospital. A vacancy rate shows how many registered nurse (R.N.) positions need to be filled.

	LMH 2007	LMH 2008	LMH 2009	Goal
R.N. vacancy rate in the ED	8%	4%	3%	less than 5%

**7** Individuals sometimes leave the ED before seeing a physician or completion of treatment.

	LMH 2007	LMH 2008	LMH 2009	Goal
ED patients who left before treatment was complete	5.6%	3.4%	4.0%	less than 3%

**8** Pain is sometimes called the “fifth vital sign.” Patients who visit the ED will be asked at triage to rate their level of pain. This will be completed by using the “faces” pain scale for children or the traditional range of 0 to 10 for adults. Both scales are excellent tools for communicating an individual’s level of pain.

	LMH 2007	LMH 2008	LMH 2009	Goal
Assessment of pain completed	94%	95%	97%	greater than 95%

**Data Footnotes:** (1) National Hospital Ambulatory Medical Care Survey: 2005 Emergency Department Summary. Number 386. (2) Comparative data from the Midas Comparative Database. (3) ACC/AHA Guidelines for the Management of Patients with ST-Elevation Myocardial Infarction, Antman et al. 2004. (4) Hospitalcompare.hhs.gov national benchmarks.

## Patient Story – Nathan Stanson

Every year around Arbor Day, the six-member Stanson family plants oak tree seedlings on their 43-acre timber farm, located in Fallsburg, Ohio. However, in late April 2009, the annual planting weekend became anything but routine. While working near the densely tree-lined perimeter, 10-year-old Nathan Stanson fell onto a stick and injured his left eye. The Stansons quickly transported their son to a local urgent care facility for treatment. After his examination, the Stansons were informed that Nathan would require more advanced analysis and treatment. The family then decided to visit the Licking Memorial Hospital (LMH) Emergency Department to obtain specialized medical care for Nathan.

During an examination at the LMH Emergency Department, Elliot Davidoff, M.D., an ophthalmologist with the Center for Sight in Newark, reviewed Nathan’s condition, and determined that surgery would be required due to the precarious location of the foreign body.

“Dr. Davidoff told us that the splinter was a fraction of a millimeter from perforating my son’s cornea,” said Darin. “He explained the details of the procedure and its inherent risks.”

When the surgery concluded at 4:00 a.m., Dr. Davidoff informed the Stansons that the surgery had been a success. “LMH’s state-of-the-art equipment supports the delicate procedures that we perform to treat eye injuries such as Nathan’s,” he said.



Nathan Stanson obtained medical care from Elliot Davidoff, M.D., at Licking Memorial Hospital, for an eye injury he received last year. Nathan’s vision has since returned to 20/20, and he continues to enjoy spending time outdoors.

Nathan was provided with a patch to protect his healing eye, as well as drops to be administered hourly for several days to prevent infection. His mother, Sue, a certified teacher who provides home schooling for the Stanson children, made minor adjustments to Nathan’s lessons to accommodate his decreased vision. “It was remarkable following the surgery, Nathan’s vision was tested and determined to be 20/200. As time went on, his vision gradually improved. During his final follow-up visit, his vision returned to 20/20,” said Sue.

Today, the family takes extra precautions to protect their eyes. Darin credits the LMH staff for the excellent care that his son received. “The staff treated Nathan like family, and kept us informed at every stage of the process,” said Darin. “Based upon our experience, I would highly recommend LMH to others.”

The LMH Emergency Department is open 24 hours every day, and is available for patients with critical illnesses, injuries and symptoms that require emergency care. For more information about the LMH Emergency Department, please call (740) 348-4000, or visit online at [www.LMHealth.org](http://www.LMHealth.org).

# Caring for Chronic Conditions May Prevent Need for Emergency Room Visits

The Emergency Department (ED) at Licking Memorial Hospital (LMH) is open 24 hours a day, and staffed by physicians specially trained in Emergency Medicine. The state-of-the-art facility was designed to ensure life-saving equipment and procedures are available to patients as quickly as possible. In recent years, the LMH ED experienced a 39.5 percent increase in volume, ranging from 41,509 patient visits in 1998 to 57,900 patient visits in 2008.

“We are constantly re-evaluating our results to find areas that can be improved,” said May-Lee Robertson, D.O., Medical Director of the Emergency Department at LMH. “One major step we took in 2009 was to open Licking Memorial Urgent Care at the Pataskala Health Campus. The new facility helps to ensure that patients with non-emergency conditions receive the proper level of care they need. For example, patients who have strep throat on a weekend could receive excellent care at Urgent Care, where the wait times are usually shorter and the costs are lower than the Emergency Department. Of course, we urge anyone with an emergency – such as a serious accident or a possible life-threatening illness – to come to the Emergency Department immediately for care.”

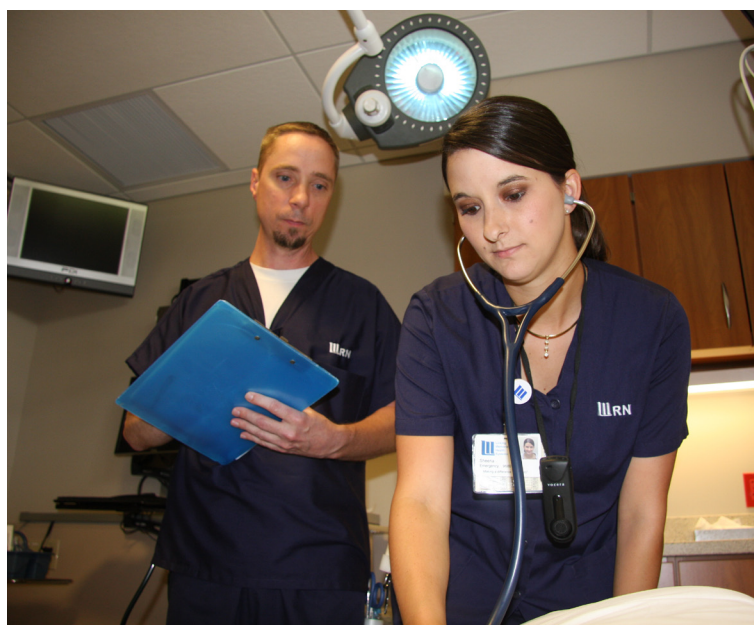
Dr. Robertson added, “However, there are many times that a chronic, or long-term, illness could acutely develop into an emergency situation. Many of the cases we see on a daily basis result from chronic illnesses, such as asthma, cardiovascular disease, hypertension, chronic pulmonary disease, and diabetes, which might develop health crises quickly. If those illnesses are not managed closely by a primary care physician and if the patient is not compliant in his or her own personal care, these emergencies can arise more frequently and have the potential of increased severity.” Dr. Robertson explained, “Nothing can replace regular visits with a primary care physician for managing chronic diseases. It is important to manage chronic illness closely with your primary care physician and not just when the disease reaches a critical state.”

“Another condition that indirectly often leads to Emergency Department visits is obesity.” Dr. Robertson said. “That statement may be surprising, but the fact is that obesity is on the rise and is known to be the cause of many chronic illnesses, such as heart disease, diabetes, hypertension, back and joint pain, and etc.”

Many Emergency Department visits could be avoided if patients followed their primary care physicians’ advice and devoted time each day to care for themselves. Some self-care tips include:

- Take your prescribed medications
- See your physician regularly
- If you have diabetes, check your blood sugar regularly and manage your diet well
- If you have hypertension, check your blood pressure regularly
- Exercise daily
- Maintain a healthy diet
- Update your immunizations, such as tetanus, pneumonia, and influenza
- Do not smoke

The Licking Memorial Hospital Active Medical Staff includes physicians from many specialties to provide excellent continuity of patient care. Physician referrals are available by calling the Physician Referral Service at (740) 348-4014.



Patients who are proactive in their health may lower their risk experiencing medical emergencies.