



Licking Memorial Health Systems

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Please take a few minutes to read this month's report on patient care quality. You'll soon discover why Licking Memorial Hospital is measurably different for your health!

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1998, 1999, 2000,
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Heart Care



HEALTH TIP

Getting regular exercise (at least 20 minutes a day, three days per week) is part of a heart-healthy lifestyle. Think you don't have time to work out? Little things add up. Make the following part of your regular routine, and your activity level may increase significantly:

- Park at the far end of the parking lot.
- Take a short stroll on your lunch break.
- Take the stairs instead of the elevator or escalator.
- Sweep the house briskly.
- Walk a dog.



...a community report on patient care quality.

Heart Care: How do we compare?

At Licking Memorial Hospital, 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.

1 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 2002	LMH 2003	LMH 1/04-11/04	National Standard ⁽¹⁾
Median time to EKG	10 minutes	11 minutes	9 minutes	less than 10 minutes

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

	LMH 2002	LMH 2003	LMH 1/04-11/04 ⁽²⁾	National Standard ⁽¹⁾
Median time to drug	25 minutes	16 minutes	26 minutes	less than 30 minutes

3 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 2002	LMH 2003	LMH 1/04-11/04	State Benchmark ⁽⁴⁾
Mortality	0%	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%

4 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 2002	LMH 2003	LMH 1/04-9/04
% who stopped smoking	69%	64%	80%
% who improved weight	54%	48%	73%
% who increased exercise time	100%	100%	100%

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 2002	LMH 2003	LMH 1/04-11/04	National Benchmark ⁽³⁾
Aspirin within 24 hours of patient arrival	99%	97%	96%	95%
Aspirin at hospital discharge	88%	94%	95%	95%
Beta blocker within 24 hours of patient arrival	89%	95%	92%	91%
Beta blocker at hospital discharge	92%	94%	98%	92%

6

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 is administered.

ACE at discharge for LVSD	
LMH 2002	LMH 2003
97%	89%
LMH 1/04-11/04	National Benchmark ⁽³⁾
92%	79%

7

As part of its quality program, LMH measures mortality rate for specific illnesses.

Heart attack inpatient mortality	
LMH 2002	LMH 2003
6.3%	11.1%
LMH 1/04-11/04	National Benchmark ⁽³⁾
11.5%	8.3%

Data Footnotes:

(1) ACC/AHA Guidelines for the Management of Patients with Acute Myocardial Infarction, 1999.

(2) Data includes all heart attack patients.

(3) Comparative data from second quarter 2004 from the Midas clinical database.

(4) Ohio Department of Health, Adult Cardiac Catheterization Reports using 2002 Ohio data for low-risk laboratories.

A PATIENT'S STORY

Learning to **Listen** to her **Body**



*Cathy Williamson
receives exercise tips
from registered nurse
Nancy Snow, R.N., while
Cathy uses a treadmill
as part of the Cardiac
Rehabilitation program
at Licking Memorial
Hospital.*

Cathy Williamson had not been feeling well for more than a week. "I likened the chest pain I was having to the sensation I would get in high school when running 'suicides' for sports practices," she said.

Unlike the temporary pain Cathy recalled from her youth, however, this was not going away. "I thought I might have pneumonia or bronchitis," the 51-year-old Newton Township resident said of her November 2004 ailment. She shared her concern with a friend who has a heart condition. "She told me that women don't have the same heart attack symptoms as men have," Cathy said. Her friend recorded Cathy's blood pressure at a dangerously high 193/107. "She took me to the Hospital, and my husband met us there. I probably would not have gone without my friend's advice," Cathy said.

In the Licking Memorial Hospital (LMH) Emergency Department, Cathy learned that she had suffered a heart attack. Although she has a family history of heart disease, Cathy was surprised to learn of her illness. "I didn't think for a moment that the pain

I was having was related to my heart. It really wasn't what I expected a heart attack to feel like," she said. Cathy was pleased with the high level of care she received at LMH. "Everybody who looked after me did a very good job," she said.

Cathy is now participating in the Cardiac Rehabilitation program at Licking Memorial Hospital. The program involves exercise, lifestyle changes, and goal-setting. "It's going well," she said.

In mid-December 2004, Cathy returned to the LMH Emergency Department with severe chest pain. She and her husband were en route to a holiday celebration when the sudden pain began. "I really thought I was having a heart attack," Cathy said. Fortunately, this time it was not a heart attack. She was treated for the pain and was advised to seek follow-up care from her family physician.

She now encourages everyone – especially women – to "not ignore any kind of symptoms," since you may not know what is going on with your body. "I got to the Hospital in time," Cathy said. "That was a good thing!"

Women Don't Often Have 'Movie Heart Attacks'

After a heated argument with her soon-to-be ex-husband, "Audra" throws the crystal photo frame he had given her on their twenty-fifth wedding anniversary against the wall of the bedroom they once shared. As the frame shatters, Audra clutches her heart and collapses to the floor. While this type of "movie heart attack" may be popular on the big screen, it is not necessarily true to life – especially for women.

"Women often have different warning signs of a heart attack than men do," warns Licking Memorial Hospital Cardiac Nurse Practitioner and Chest Pain Center Coordinator Patty Merrick, C.N.P.

Common warning signs include uncomfortable pressure, fullness, squeezing or pain in the center of the chest lasting more than a few minutes; pain that spreads to the shoulders, neck or arms; chest discomfort with lightheadedness, fainting, sweating, nausea or shortness of breath.

According to the American Heart Association, less common signs of heart attack are atypical pain in the chest, stomach or abdomen; nausea or dizziness; shortness of breath and difficulty breathing; unexplained anxiety, weakness or fatigue; palpitations, cold sweat or paleness.

"Women who are having a heart attack oftentimes dismiss burning or other chest discomfort as indigestion," Merrick said. "That can be a deadly mistake." She encourages anyone experiencing common or atypical warning signs of a heart attack to seek immediate medical attention.

LMH Chest Pain Center is Accredited

IN LATE NOVEMBER 2004, THE INTERNATIONAL SOCIETY OF CHEST PAIN CENTERS GRANTED THE DESIGNATION OF ACCREDITED CHEST PAIN CENTER TO LICKING MEMORIAL HOSPITAL (LMH), MAKING IT THE ELEVENTH SUCH ACCREDITED CHEST PAIN CENTER IN OHIO AND THE EIGHTY-SECOND IN THE NATION.

LMH Cardiac Nurse Practitioner and Chest Pain Center Coordinator Patty Merrick, C.N.P., said heart patients are assessed immediately and treated based on best practice guidelines by the American Heart Association and American College of Cardiology. She stressed the importance of receiving immediate medical care when symptoms of heart problems present. "If patients arrive soon enough, we may be able to avoid unnecessary loss of heart muscle and associated problems – such as death or chronic heart failure," Patty said.

LMH Chief of Staff and cardiologist Debra Heldman, M.D., reiterated Merrick's point. "Time is heart muscle," Dr. Heldman said. "The sooner the patient places a call that he or she is having chest pain, the quicker the appropriate treatment plan can be activated. Every minute that treatment is delayed, more damage is done to the heart."

Heart attacks are the leading cause of death in the United States, with 600,000 deaths from heart disease each year. Annually, more than 5 million Americans with chest pain visit hospitals. The goal of the Society of Chest Pain Centers is to reduce significantly the mortality rate of these patients by teaching the public to recognize and react to the early symptoms of a possible heart attack, reduce the time that it takes to receive treatment, and increase the accuracy and effectiveness of treatment.

To receive its accreditation, Licking Memorial Hospital Chest Pain Center has met or exceeded stringent criteria and completed on-site evaluations by a review team from the Society of Chest Pain Centers. Key areas in which a Chest Pain Center must demonstrate expertise include:

- Integrating the emergency department with the local emergency medical system
- Assessing, diagnosing, and treating patients quickly
- Effectively treating patients with low risk for acute coronary syndrome and no assignable cause for their symptoms
- Having a functional design that promotes optimal patient care
- Ensuring Chest Pain Center personnel competency and training
- Maintaining organizational structure and commitment
- Continually seeking to improve processes and procedures
- Supporting community outreach programs that educate the public to promptly seek medical care if they display symptoms of a possible heart attack

"Patient safety is our number one priority at Licking Memorial," said Bill Andrews, Licking Memorial Hospital President. "We constantly strive to provide a safe environment and protect our patients. This accreditation is one more piece of evidence that we are providing the best possible care for the community. We are pleased with the quality and talents of the staff and their dedication to the patients and the institution."

Established in 1998, the Columbus-based Society of Chest Pain Centers is dedicated to patient advocacy and focusing on ischemic heart disease. Central to its mission is the question, "What is right for the patient?" In answer, the Society promotes protocol-based medicine, often delivered through a Chest Pain Center model to address the diagnosis and treatment of acute coronary syndromes, heart failure, and to promote the adoption of process improvement science by health care providers.

Green Light Performance

In addition to received Chest Pain Center Accreditation in 2004, the LMH clinical staff earned recognition from VHA, Inc. for achieving "green light" performance on selected parameters related to the treatment of acute myocardial infarction (heart attack).

VHA, Inc. is a national organization that works with hospital teams to achieve green light performance on selected and reportable parameters. "Hospitals that achieve those goals demonstrate success of evidence-based clinical improvement efforts," Merrick said.

LMH received green light status in July 2004 for data regarding heart attack patients. This represents success in each of five performance measures, with LMH achieving a goal of 90 percent or better for all the parameters. Measures include: aspirin upon arrival, beta blocker upon arrival, aspirin upon discharge, beta blocker upon discharge, ACE inhibitor for patients with systolic dysfunction.

LMH also reached 100 percent compliance with smoking cessation education upon discharge.

"At Licking Memorial Hospital, we are proud of the level of care we provide to all patients," Merrick said. "Recent accreditation of the Chest Pain Center and green light status for heart care are two examples of why Licking Memorial is measurably different."