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## Licking Memorial Health Systems

1320 West Main Street  
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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!**  
**Visit us at [www.lmhealth.org](http://www.lmhealth.org)  
Call our Health Line at  
740-348-4YOU.**



**Licking Memorial  
Health Systems**

April 2002  
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**Respiratory  
Care**

measurably  
**different**  
for your  
**health!**



### HEALTH TIPS

If you have asthma, you can help protect yourself from the disease. The American Lung Association offers these tips:

- See your doctor regularly about your asthma. Your symptoms and triggers can change over time, causing your current medication to be ineffective.
- Take your asthma medications as prescribed, even when you feel well.
- Learn what triggers asthma and what you can do to be healthy.

*...a community* **report on patient care quality.**



# Respiratory 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** One hundred percent of respiratory patients who are admitted to LMH receive a consistent, thorough assessment of their condition. To initiate prompt and appropriate care, patient assessments need to be completed in a timely manner. To this end, LMH raised its standard of care by reducing the time in which respiratory assessments must be completed. LMH's goal is that patients receive their assessment within 8 hours of hospital admission.

	LMH 2000 <sup>(1)</sup>	LMH 2001	Benchmark <sup>(2)</sup>
% of respiratory assessments conducted within 8 hours	<b>94%</b>	<b>95%</b>	<b>86.1%</b>

**2** When a patient is suspected of having respiratory failure, an Arterial Blood Gas (ABG) test is performed to see how well the lungs are functioning. The test primarily measures how well the body is taking in oxygen and ridding itself of carbon dioxide.

	LMH 2000	LMH 2001	LMH Goal
Turnaround time for emergency ABGs	<b>12 minutes</b>	<b>11 minutes</b>	<b>&lt;12 minutes</b>

**3** A pulmonary function test is often ordered for respiratory patients to assess the function of the lungs. LMH tracks the wait time from when the test is ordered until the scheduled appointment. Even though the volume of pulmonary function test patients increased from 980 in 2000 to 1150 in 2001, the wait time decreased because another member of the existing respiratory staff was trained mid-year to perform the test.

	LMH 2000 <sup>(3)</sup>	LMH 2001	LMH Goal
Wait time to schedule a pulmonary function test	<b>7.0 days</b>	<b>6.7 days</b>	<b>&lt;7 days</b>

**4** Pulmonary rehabilitation is a comprehensive program that helps people with respiratory problems improve their respiratory health. (See *Rehab Program* inside.) LMH tracks the percentage of program participants who reach their personal goals and increase their activity levels.

Health indicator for Pulmonary Rehabilitation	LMH 6/01-12/01	LMH Goal
% who met their personal goals	<b>95%</b>	<b>100%</b>
% increased exercise tolerance	<b>100%</b>	<b>100%</b>
% increased activities of daily living	<b>100%</b>	<b>100%</b>

**5**

When people with COPD or asthma require hospitalization, treatment programs that recognize their special needs often help shorten their hospital stays. After hospitalization, people should continue therapy in appropriate rehabilitation settings. The average length of stay at the Cleveland Clinic for patients with COPD is 3.6 days. <sup>(6)</sup>

COPD average length of stay		
LMH 2000	LMH 2001	National <sup>(4)</sup>
<b>3.2 days</b>	<b>3.4 days</b>	<b>4.5 days</b>
Asthma average length of stay		
LMH 2000	LMH 2001	National <sup>(4)</sup>
<b>3.5 days</b>	<b>3.0 days</b>	<b>2.9 days</b>

**6**

In Obstructive Sleep Apnea (OSA) breathing stops because the airway collapses and prevents air from getting into the lungs. In severe cases, this condition can be life threatening and can lead to high blood pressure, stroke, heart disease, and fatigue-related motor vehicle and work accidents. Therefore, it is important that sleep apnea is properly diagnosed in people evaluated for sleep disorders.

% of patients seen for sleep disorders who were diagnosed with sleep apnea		
LMH 2000	LMH 2001	National <sup>(5)</sup>
<b>89.4%</b>	<b>55.7%</b>	<b>46%</b>

**Data Footnotes:**

- (1)** Changed standard in May 2000. Based on data from May to December 2000.
- (2)** *Respiratory Care*, May 1999, Vol. 44, No.5.
- (3)** Began measuring in August 2000. Data reflects August through December 2000.
- (4)** Comparative data from January through September 2001 from over 200 hospitals in the Midas comparative database project.
- (5)** National Sleep Foundation's 2000 Omnibus Sleep in America Poll.
- (6)** [www.Clevelandclinic.org/quality](http://www.Clevelandclinic.org/quality)



*After Jim Aldridge was diagnosed with idiopathic pulmonary fibrosis, he began participating in the pulmonary rehabilitation program at Licking Memorial Hospital. Marty Chaney, R.R.T., LMH Director of Cardiopulmonary Services, and her staff have helped Jim improve his health.*

**“They helped me build up and had me walking within a few weeks. I owe a great deal of gratitude to them.”**

# Providing a Source of Strength

## A PATIENT'S STORY

Jim Aldridge had such a difficult time breathing that he couldn't take more than a couple of steps without gasping for air. He was diagnosed with idiopathic pulmonary fibrosis (IPF) by Licking Memorial Health Professionals pulmonologist William Rawlinson, M.D.

Idiopathic pulmonary fibrosis is an inflammatory disease that causes scarring, or fibrosis, of the lungs. Over time, build-up of fibrosis decreases the lungs' ability to provide oxygen to the body's tissues. "Idiopathic" means the cause of this disease is unknown.

Dr. Rawlinson prescribed medication, oxygen and exercise, so Jim began participating in a pulmonary rehabilitation program at Licking Memorial Hospital. "The first time I went to rehab, I couldn't walk on a treadmill; I couldn't walk five steps," Jim said.

But Marty Chaney, R.R.T., LMH Director of Cardiopulmonary Services, and her staff gave Jim the encouragement he needed to improve his health. "They helped build me up and had me walking within a few weeks," Jim said. "I owe a great deal of gratitude to them."

IPF cannot be cured, but lung transplantation is a treatment option for patients in

the final stages of the disease. Being able to walk 600 feet in six minutes was one of the physical requirements Jim had to meet to be accepted as a lung transplant candidate.

Going to rehab at LMH twice weekly helped Jim develop muscles for carrying his oxygen tank, walk short distances without use of the tank, and improve his overall health prior to his lung transplant operation at The Cleveland Clinic.

"My doctors told me that for every muscle I developed, the operation would go so much better for me," he said. ... "I just wanted to get to the operating table. It was up to the Lord then. If I had made it to the operating table, I had met my goal."

Since recovering from surgery, Jim has done very well. He now offers encouragement to fellow Licking Memorial patients, provides phone counseling to Cleveland Clinic patients, and is a registered speaker with Lifeline of Ohio. He also continues to participate in pulmonary rehabilitation at Licking Memorial Hospital. "You couldn't ask for a better group of people," he said. "The fact of the matter is that everyone is there to help. They don't forget their patients."

## Rehab Program Emphasizes Education

The Pulmonary Rehabilitation program at Licking Memorial Hospital combines education and exercise to increase activities of daily living for patients with lung disease.

Pulmonary rehab is recommended for people with COPD, asthma, pulmonary fibrosis, emphysema, sarcoidosis, chronic bronchitis, and those who are candidates for lung transplant or who have had a lung transplant.

Goals of pulmonary rehab are:

- reduce shortness of breath and anxiety;
- increase exercise tolerance;
- improve understanding of lung disease;
- medication education;
- reduce hospital admissions;
- teach proper breathing techniques;
- promote self reliance; and
- motivate home exercise.

Topics covered in the LMH program include:

- anatomy/physiology,
- breathing techniques,
- smoking cessation,
- time/energy conservation,
- preventing infection,
- home care equipment,
- importance of exercise,
- relaxation techniques,
- nutrition, and
- coping with disease.

"Knowledge truly is power when it comes to living with lung disease," said Marty Chaney, LMH Director of Cardiopulmonary Services. "That is why education is a major focus of our pulmonary rehabilitation program."

## Recognizing Asthma Warning Signs

AN ASTHMA ATTACK OCCURS WHEN AN INDIVIDUAL'S BRONCHIAL TUBES – THE MAIN AIR PASSAGES OF THE LUNGS – BECOME INFLAMED AND THE AIRWAYS BECOME NARROW. THE RESULT CAN RANGE FROM MILD WHEEZING TO A LIFE-THREATENING INABILITY TO BREATHE.

Although asthma is a dangerous and sometimes unpredictable disease, it can be treated with medication and self-monitoring.

By learning how to recognize asthma triggers, a person who suffers with the disease can keep attacks from worsening, as well as avoid some attacks completely.

"Awareness of personal asthma triggers can be life-saving knowledge," said Marty Chaney, LMH Director of Cardiopulmonary Services.

Allergens, air pollutants, respiratory infections, physical exertion, cold air, sulfites, certain medications, emotional stress, sinusitis and gastroesophageal reflux disease are examples of possible asthma triggers, she said.

Upon exposure to certain triggers, those who have the disease can experience warning signs of an asthma attack. Asthma warning signs for adults can include the following:

- wheezing or increased shortness of breath;
  - difficulty sleeping as a result of shortness of breath, coughing or wheezing;
  - chest pain or tightness;
  - an increased use of asthma medications used to open airways; and
  - a decrease in lung function, as noted through use of a peak flow meter.
- Asthma warning signs for children can include:
- audible wheezing or whistling when the child exhales;
  - coughing, especially frequently and in spasms;
  - waking at night because of coughing or wheezing;
  - shortness of breath; and

- chest tightness.

Some people have an inherited predisposition for asthma and are sensitive to environmental factors – such as exposure to chemicals and secondhand smoke – and allergens such as pollen and molds. The disease can develop at any age.

Factors that may increase an individual's chances of developing asthma include the following:

- exposure to secondhand smoke;
- exposure to occupational irritants;
- having a parent or both parents with asthma;
- obesity;
- gastroesophageal reflux disease;
- a history of childhood respiratory infections;
- low birth weight; and
- residing in a large urban area where exposure to multiple environmental pollutants can be increased.

"An individual may develop asthma at any age," Chaney said. "The key to living with this or any other lung disease is education."

### Camp Feelin' Fine ...

a day camp for children with asthma, is scheduled for 9 a.m. to 3:30 p.m., Friday, June 14, 2002, at Infirmary Mound Park, on state Route 37, west of Newark. Cost is free!

The Licking Memorial Hospital asthma health care team – including physicians, pharmacists, nurses and respiratory therapists – will provide educational programs, crafts, lunch and recreation throughout the day in a camp setting. To register and for more information, call 740-348-4YOU.