

**Licking Memorial
Health Systems**

1320 West Main Street
Newark, Ohio 43055

Return Service Requested

*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

*Call our Health Line at
740-348-4YOU.*



**Licking Memorial
Health Systems**

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**Pneumonia
Care**

measurably different for your health!



Since pneumonia often follows ordinary respiratory infections, increasing your resistance to respiratory illness offers protection against pneumonia. The American Lung Association offers these tips:

- Be alert to any symptoms of respiratory trouble that linger more than a few days.
- Follow good health habits related to proper diet, personal hygiene, rest and regular exercise.
- Ask your doctor if you should get a flu shot and pneumococcal pneumonia vaccine.

...a community report on patient care quality.



Pneumonia 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 National pneumonia treatment guidelines ⁽¹⁾ recommend that one dose of an antibiotic be given to pneumonia patients within eight hours of arrival at the hospital. This "door-to-antibiotic time" includes diagnostic testing. Licking Memorial Hospital (LMH) participates in the Ohio Pneumonia Project, which measures door-to-antibiotic times for hospitals throughout the state.

	LMH 2001	LMH 1/02-7/02	State ⁽²⁾
% of patients receiving antibiotic dose within 8 hours	95.2%	100%	85%

- 2 Health care quality experts are encouraging hospitals to reduce their door-to-antibiotic time for pneumonia patients from eight hours to within two to four hours of patient arrival. ⁽³⁾

	LMH 2001	LMH 1/02-7/02	LMH Goal	National Goal ⁽¹⁾
Average door-to-antibiotic time	2.6	1.7	<2 hours	<8 hours

- 3 According to the national pneumonia treatment guidelines ⁽¹⁾, a blood culture should be collected before any antibiotics are given to a pneumonia patient to more accurately determine what microorganism is causing the pneumonia.

	LMH 2001	LMH 1/02-7/02	State ⁽²⁾
% of patients receiving blood cultures prior to antibiotics	78.2%	69.9%	80.6%

- 4 According to the national pneumonia treatment guidelines ⁽¹⁾, hospitalized patients with a condition that puts them at risk for developing complications from the flu or pneumonia should be screened for a vaccine while in the hospital and receive a vaccine if appropriate.

	LMH 2001	LMH 1/02-7/02	State ⁽²⁾
% of high-risk patients screened for flu vaccine	95.8%	96.6%	29.7%
% of high-risk patients screened for pneumonia vaccine	97.2%	97.6%	25.1%

In July 2002, LMH also began tracking how many patients received a vaccine after the screening indicated that they should.

5

Those with chronic illnesses are at high risk for pneumonia. LMH community case managers monitor the health of more than 550 individuals with chronic medical conditions. As part of their health watch, they track the number of their patients who develop community-acquired pneumonia.

Average # of case-managed patients per month developing community-acquired pneumonia

LMH 2001	LMH 1/02-7/02	LMH Goal
2	2	3 or less

6

Pneumonia is a serious illness and represents a major cause of mortality in our country. A common quality indicator that is measured for all diseases is mortality rate.

% of mortalities for pneumonia patients

LMH 2001	LMH 1/02-7/02	National Benchmark ⁽⁴⁾
2.7%	3.6%	4.6

7

Use of standard orders – in which physicians follow the same protocols for treating all patients with a particular diagnosis – indicates that patients are receiving consistent care.

% of pneumonia patients with standard orders used

LMH 2001	LMH 1/02-7/02	LMH Goal
76.7%	91.1%	100%

Data Footnotes:

(1) National goal based on guidelines from the Ohio Pneumonia Project based on the consensus of an expert panel.

(2) Ohio KePRO Annual Report 2002. Study period was October through December 2000.

(3) Clinical Resource Management, Volume 1, Number 3, March 2000, published by National Health Information.

(4) Benchmark obtained from the MIDAS comparative database from first quarter 2002 data comparing 193 health care organizations.



Last winter, pneumonia and a secondary respiratory infection kept Marcia Whitney Pratt from meeting regularly with her piano and voice students. After receiving treatment through LMHS, Marcia has returned to a regular teaching schedule.

// I'm most thankful for God, Dr. Rawlinson, and my husband, Charles. Otherwise, I would not be here. //

Gaining strength after **Pneumonia**

A PATIENT'S STORY

As a performer and private voice and piano teacher, Marcia Whitney Pratt's voice is her livelihood. But for several weeks last winter, she couldn't make a sound. "My students basically had 12 weeks off," the 51-year-old Granville resident said.

She realized she had more than a bad cold shortly after her ailment began. "It started out as a sore throat on November 15. By November 17, I had full-blown bronchitis. The next day, I was diagnosed with pneumonia," Marcia said. "I was out of it until the beginning of April."

In November, she went to the Emergency Department of Licking Memorial Hospital because she was having difficulty breathing. "It came on really fast," Marcia said. After receiving treatment in the ED, she saw her primary care physician, who then referred her to Licking Memorial Health Professional William Rawlinson, M.D., a pulmonologist.

While being treated for pneumonia, a secondary infection developed. In mid-February, Dr. Rawlinson ordered a CAT scan, which revealed a staph infection between Marcia's weakened lung and her rib cage. "It was about golf-ball size," she said. Despite treatment that included a variety of antibiotics, the infection remained.

Marcia was then admitted to LMH to have the pocket drained and to receive intra-

venous antibiotics. Treatment was provided by radiologists Yoon S. Kim, M.D., and Owen Lee, M.D. "They were professional, personable, and willing to answer all my questions," Marcia said. "They and their staffs were pleasant and reassuring."

After a couple of days, she was released from the hospital but continued to receive IV antibiotics through a home care service. She was prescribed additional antibiotics over the next couple of months. "By the end of April, I was doing well," she said. Her students then treated her to "one whale of a recital." "Not only was I supported by the students, but also by their families," Marcia said. "I was only able to see my students once in a while during my illness, but they hung in there with me."

Marcia had never had pneumonia before and prays to never have it again. "The fatigue that went with it was nothing I've ever experienced before," she said. "I'm most thankful for God, Dr. Rawlinson, and my husband, Charles," Marcia said. "Otherwise, I would not be here. My faith in God was very strong, but it was strengthened."

Marcia has since returned to performing and teaching, as well as walking, biking, exercising and using a rowing machine to continue to increase her strength and improve her health.

LMHS' Flu Clinic

Fight the flu this season by coming to Licking Memorial Health Systems' 2002 Flu Clinic at 1873 Tamarack Road. Cost is \$15, or present a Medicare, Medicaid or DirectCare America card.

Until the vaccine is more plentiful, participation is limited to those who are at least 65 years old or meet at least one of the Centers for Disease Control high-risk criteria. Those at high risk include:

- people with chronic health conditions, including heart disease, diabetes, kidney disease, asthma, cancer, and HIV/AIDS.
- pregnant women who will be in their second or third trimester during flu season,
- and health care workers.

Licking Memorial will notify the public when the clinic is open to the general population. The flu clinic is open through Thursday, December 12. Hours are 8 a.m. to 4 p.m. Tuesdays and Thursdays. The clinic will be closed Thursday, November 28, for Thanksgiving, but it will be open from 8 a.m. to noon Saturday, November 30.

Smoking Cessation

Developed by the American Lung Association, Freedom From Smoking is a five-session smoking cessation program offering tools and techniques to help smokers kick the habit for good. Sessions begin at 7 p.m. and are scheduled for November 4, 11, 18, 21 and 25 in Conference Rooms A&B of Licking Memorial Hospital. Cost is \$30. For more information, or to register, call 348-4YOU (4968).



Answering Questions about Pneumonia

with William Rawlinson, M.D.

PNEUMONIA IS A SERIOUS INFECTION OF ONE OR BOTH LUNGS IN WHICH INFECTED FLUID FILLS THE AIR CHAMBERS (ALVEOLI), MAKING IT DIFFICULT FOR OXYGEN TO ENTER THE BLOODSTREAM FROM THE LUNGS.

Licking Memorial pulmonologist William Rawlinson, M.D., is often asked numerous pneumonia-related questions this time of year. Following are some of the most commonly asked questions, as well as his answers. If you have questions about pneumonia that are not answered here, contact your physician, or call the Licking Memorial Health Line at 348-4YOU.

Q: Can a person catch pneumonia by going outside in the cold with wet hair?

A: No. There are numerous causes of pneumonia, but wet hair is not one of them. Pneumonia is caused by infectious agents including:

- bacteria;
- mycoplasma;
- viruses;
- other infectious agents, fungi or tuberculosis.

If your lungs are already irritated and/or inflamed as the result of a cold or influenza virus, pneumonia-causing bacteria can more readily attack.

Q: What are the symptoms of pneumonia?

A: Symptoms of pneumonia vary according to the cause and severity. However, the following are all possible symptoms of the illness:

- a cough with rust-colored or greenish mucus; or coughing attacks in which sparse whitish mucus is produced; or a dry cough;
- flu symptoms – including fever, headache, muscle pain and weakness;
- nausea;
- vomiting;
- shaking chills;
- chattering teeth;
- severe chest pain;
- bluish tint to lips and nails because of lack of oxygen; and
- confused mental state.

Q: When should I call my doctor?

A: Immediately contact a physician if you or a loved one has any symptoms of pneumonia. This is a very serious illness that can be fatal; early diagnosis and treatment are vital.

Q: If I am feeling better, can I stop taking my antibiotics?

A: No. Although you might feel better, it is important to take your medication for as long as your physician prescribes. Doing so can help prevent relapse and recurrence of the illness.

Q: Should I get a pneumonia shot?

A: Ask your physician if a pneumococcal pneumonia vaccination is right for you. The vaccine is generally recommended for people who are age 65 or older. Those at increased risk of pneumonia at younger ages should also receive this vaccination. This includes those living in nursing homes or other chronic care facilities; those with a chronic illness such as asthma, emphysema, COPD, diabetes, chronic heart disease or chronic renal failure; and those without a functioning spleen. This vaccination reduces the risk of pneumococcal pneumonia, the most common cause of bacterial pneumonia in the United States.

Q: Can a flu shot help prevent pneumonia?

A: Since pneumonia is a common complication of the flu, getting vaccinated against influenza does offer protection. Increasing your resistance to respiratory illness in general is the best defense against pneumonia. Following healthy habits – including getting adequate rest, eating a healthy diet, frequent hand washing and getting regular exercise – can lessen your chance of developing a respiratory illness and can help your body more easily fight off illness if it should occur. Avoiding exposure to those with the common cold can also help decrease the risk of pneumonia, especially in those with chronic lung diseases.