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 healthcare choices.



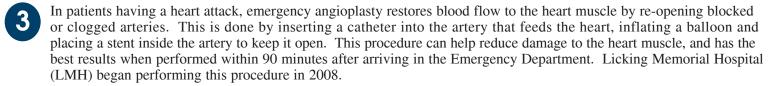
Angiotensin-converting enzyme (ACE) inhibitors reduce the risk for mortality in patients with left ventricular systolic dysfunction (LVSD) after heart attack. LVSD refers to the reduced squeezing ability of the left ventricle that can occur after heart attack. Additionally, the likelihood of the patient having another heart attack can be reduced if an ACE inhibitor is administered.

	LMH 2011	LMH 2012	LMH 2013	National Average(1)	
ACE/ARB at discharge for LVSD	100%	100%	99%	99%	



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

	LMH 2011	LMH 2012	LMH 2013	National Average ⁽²⁾
an time from arrival completion of EKG	2.5 minutes	3.0 minutes	2.0 minutes	7.3 minutes

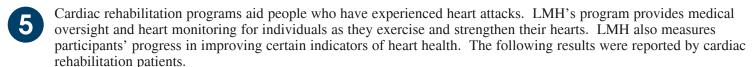


Mean time from arrival until balloon angioplasty performed	LMH 2011 51 minutes	LMH 2012 56 minutes	LMH 2013 54 minutes	LMH Goal less than 62 minutes ⁽²⁾
Time to balloon within 90 minutes	100%	96%	98%	greater than 96% ⁽¹⁾



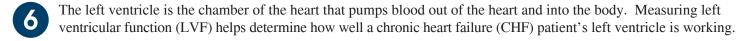
During a heart attack, the heart is severely stressed. Beta blocker medications help decrease this stress by reducing heart rate, blood pressure and the heart's demand for oxygen. Additionally, aspirin has been shown to prevent further blood clotting in heart attack patients.

Aspirin within 24 hours of patient arrival	LMH 2011 99%	LMH 2012 100%	LMH 2013 100%	National Average ⁽²⁾ 100%
Aspirin ordered at hospital discharge	99%	99%	99%	99% (1)
Beta blocker ordered at hospital discharge	100%	99%	100%	100% ⁽²⁾



Health Indicator	LMH 2011	LMH 2012	LMH 2013	Goal ⁽³⁾
Stopped smoking	66%	68%*	75%	greater than 75%
Improved weight	55%	69%*	57%*	greater than 75%
Increased exercise time	100%	100%*	99%	100%

*The cardiac rehabilitation goals are customized for each individual patient. LMH offers nutritional counseling, supervised wellness sessions and an incentive program to reinforce the importance of making healthy lifestyle choices, but it is the individual patient's efforts to attain these goals that achieve the highest rates of success.



		LMH 2011	LMH 2012	LMH 2013	National Average(1)
L'	VF assessment completed	99%	100%	100%	99%

Heart Care – How do we compare? (continued from outside page)



Medications beneficial to many heart failure patients include ACE inhibitors, beta-blockers, and angiotensin-receptor blockers (ARBs). ACE inhibitors and ARBs have been shown to lower mortality and improve functional capacity and quality of life. Beta-blockers can reverse or prevent some of the health effects associated with heart failure. Patients treated with beta-blockers may see significant improvement in heart function after three months.

	LMH 2011	LMH 2012	LMH 2013	National Average(1)
CHF patients on ACE or ARB at discharge	97%	100%	99%	97%



It is vital that heart failure patients be involved in their own care to reduce health complications and improve quality of life. They must monitor their weight, limit their salt intake, and take their medications regularly. Healthcare providers need to give thorough discharge instructions to help these patients effectively manage their condition.

	LMH 2011	LMH 2012	LMH 2013	National Average(1)
All discharge instructions given	92%	98%	98%	94%



Licking Memorial Health Professionals (LMHP) physicians also monitor the usage of antiplatelet drugs, such as aspirin or an antithrombotic drug, in patients with coronary artery disease (CAD). The usage of these medications lowers the risk of myocardial infarction (MI) or death in patients with CAD.

	LMHP 2011	LMHP 2012	LMHP 2013	Goal ⁽³⁾
LMHP CAD patients with aspirin and/or antithrombotic prescribed	93%	93%	93%	greater than 90%



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

	LMHP 2011	LMHP 2012	LMHP 2013	National Average ⁽⁴⁾
LMHP CAD patients with LDL	64%	66%	67%	greater than 50%
less than or equal to 100 mg/dl				

Data Footnotes: (1) Hospitalcompare.hhs.gov national benchmarks. (2) Midas and CPMS Comparative Database, 2011-2012. (3) Benchmark indicates LMHP Goal. (4) National Committee for Quality Assurance, "State of Health Care Quality 2012."

Patient Story - Robert Baggs

Heart attacks do not always occur like the "Hollywood movie" depiction of a heart attack with severe pain in the middle of the chest, but in Robert Baggs' case, it did. Robert, who is a Realtor from Granville, was enjoying 50-year reunion-related activities with former Newark High School classmates in October 2014 at Salt Fork Park near Cambridge, Ohio, when the pain hit.

Robert said, "Earlier in the day, I made a side trip and had a salad with vinaigrette dressing for lunch. I started feeling like I had heartburn, so I stopped eating and had just water. As

I was driving back in my car to rejoin the group at Salt Fork Park, I was sweating heavily although it was not all that warm. Back at the lodge, I sat down to dinner with my classmates, but I still did not feel like eating even though I did not have any pain or discomfort at that time. We were reminiscing and looking at old photos. Then I stood up from the table, and the pain hit in my chest. I still thought it was heartburn, so I went back to my room and took some antacids. After a few minutes, nothing had changed, so I realized that I was having other issues."



Robert Baggs of Granville found "superior" care at LMH after a heart attack last October.

Robert's friends called 911. When the emergency medical technicians (EMTs) arrived, they performed an electrocardiogram (EKG) and quickly determined that Robert was having a cardiac event. Even though his life was in danger, Robert was a little embarrassed about the commotion. "Absolutely no lights or sirens," he insisted through the grip of pain, "and be sure to be quiet in the hallway." As the EMTs rushed Robert to a hospital in Cambridge, they gave him nitroglycerin spray to help with the pain.

"At the hospital in Cambridge, an emergency room doctor said that he could tell my heart was producing cardiac enzymes, which indicated a heart attack,"

Robert explained. "Unfortunately, they did not have an interventional cardiologist at that hospital to perform the procedure that I needed. They gave me options to be transferred to a different hospital with more advanced technology."

Just one week prior to Robert's heart attack, he had attended a Realtor's luncheon that featured Licking Memorial Health Systems President & CEO Rob Montagnese as the speaker. Patient Story – Robert Baggs (continued from previous page)

"Rob Montagnese talked about all the initiatives and improvements at the Health Systems in recent years, including the addition of interventional cardiology. I remembered how impressed I was with the technology being offered at our community hospital, so I asked to be transferred to Licking Memorial Hospital where I could receive the care that I needed and be close to home," Robert said.

Robert's EKG data was transmitted to Licking Memorial Hospital (LMH). Before his arrival, the LMH Cardiology staff was able to diagnose his condition as a type of heart attack known as a non-ST segment elevation myocardial infarction (non-STEMI), which occurs when a coronary artery becomes partially obstructed by a blood clot. Robert's left anterior descending coronary artery was almost totally blocked, and Interventional Cardiologist Hassan Rajjoub, M.D., performed a left heart catheterization and percutaneous coronary intervention (PCI) angioplasty to improve blood flow.

Before the procedure, the staff showed me a short video to help me understand what was going to happen," Robert recalled. "They were very thorough and understanding about answering all my questions. I was given moderate sedation because I am very sensitive to general anesthesia. In the operating room, Dr. Rajjoub told me that he would feed the catheterization lines through my wrist, and I waited for them to begin. Before long, Dr. Rajjoub said, 'We are done now,' and I was not even aware

that they had begun. I had no discomfort at all." Dr. Rajjoub had removed a blood clot from the blocked artery and implanted two drug-eluting stents to promote blood flow to the heart.

After a short stay in the LMH Intensive Care Unit, Robert was dismissed with aftercare instructions that included light activity, a heart-healthy diet, no heavy lifting, and staying home from work for two weeks. "I feel wonderful," Robert said. "I started exercising by walking my yorkie, Luca, several times a day, and am back at work part-time at Berkshire Hathaway Real Estate." In December, Robert enrolled in the LMH Cardiac Rehabilitation Program.

Before moving back to Granville in 2011, Robert retired as Executive Director of the Cleveland Transit System. He said, "I supervised 4,000 employees who operated the buses, trains and trolleys. Customer service was very important to our Transit System, so I was very interested that day at the luncheon when Rob Montagnese spoke about LMHS' customer service initiatives. Everything he said came true. The staff was superior. Everyone kept asking if I needed anything, or if they could do anything to make me more comfortable."

The LMH Cardiology Department is accredited as a Chest Pain Center with PCI from the Society of Chest Pain Centers. LMH is among fewer than 500 hospitals in the U.S. to earn that distinction.

Ultrafiltration Offers Treatment Option for Patients with Heart Failure



Bryce I. Morrice, M.D.

The Centers for Disease Control and Prevention (CDC) reports that more than 5 million Americans currently live with heart failure. The CDC also cites that in 2009, one out of every nine deaths in the U.S. included heart failure as a contributing cause.

Heart failure is a serious chronic condition where the heart muscle is weakened

and cannot pump blood efficiently enough to support the body's organs. Risk factors for developing heart failure include coronary heart disease, high blood pressure, diabetes, smoking tobacco, obesity, a sedentary lifestyle, and a diet that is high in fat, cholesterol and sodium. Symptoms of heart failure include shortness of breath during normal daily activities, difficulty breathing while lying down, fatigue, and swelling in the feet, legs, ankles or stomach.

"Early diagnosis and treatment can make great improvements in many patients with heart failure," explained Cardiologist Bryce I. Morrice, M.D. "First, we advise our patients to make lifestyle improvements by exercising and restricting the amount of fat and sodium in their diets. We also can treat heart failure medicinally with ACE inhibitors and beta blockers to improve blood flow and regulate the heart beat, and diuretic medication to reduce the amount of fluid retention."

For some patients, diuretics and a sodium-restricted diet are not effective in sufficiently reducing the amount of excess fluid in the bloodstream, and the fluid overload increases the strain on the heart. Since 2009, Licking Memorial Hospital (LMH) has offered ultrafiltration, an innovative technology that can help to ease the heart's burden.

Dr. Morrice said, "Ultrafiltration is an inpatient therapy to remove excess sodium and water from patients who did not respond well to diuretics. The ultrafiltration treatment is very safe, predictable and effective. In a short time, it can remove much more excess fluid and sodium than standard diuretic treatments."

During ultrafiltration, the patient receives two catheter lines to redirect blood flow through the Aquadex FlexFlow[™] filters. The cardiologist determines the rate of fluid removal, which typically lasts from 8 to 48 hours, depending on the patient's needs. Ultrafiltration has been shown to reduce the number of hospital readmissions for heart failure patients.



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!

Visit us at www.LMHealth.org.

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Health Tips - Warning Signs of Heart Failure

Swelling

- Feet, legs, or ankles show puffiness.
- Shoes feel too tight.
- Clothes are too tight in the waist.
- Rings are difficult to remove from fingers.

Shortness of Breath

- Breathing is more difficult during normal activities or at rest.
- Sleep is disturbed by shortness of breath or coughing.
- It is necessary to sleep propped up on pillows or sitting in a chair or recliner.

Other Warning Signs Include:

- There may be feelings of weakness, dizziness or fatigue.
- Chest pain or a change in heartbeat may occur.
- Memory difficulties may be a sign of heart failure.
- Some heart failure patients experience a loss of appetite.