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MILLARD MARTIN
EMS PROFILE

DON'T IGNORE THE 3
SYMPTOMS

COMMUNICATION
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STAY CALM...
TAKE CONTROL

EMERGENCY 4
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CATH LAB PROFILE
HEART ATTACK SIGNS
IN WOMEN



WHAT WOULD YOU DO?

When to call 911

Heart attack and stroke are on the rise nationwide with heart attack leading as the main cause of death in the United States. To combat this problem on a local level, The Medical Center has achieved the Society of Chest Pain Center's designation as a Chest Pain Center with PCI and The Joint Commission's certification as a Primary Stroke Center.

The standards set in place by these accreditations allow The Medical Center to ensure the consistency and quality of care provided to patients.

Each department connected to these accreditations continuously seeks improvement to processes and procedures. They

work hard to develop a functional design and organizational structure that promote optimal patient care. This special edition of the *CHC Intercomm* stresses the need to call 911 in a medical emergency and showcases just a few of the employees connected to this important process.

One Man's Story: Millard Martin



(Left to right): Rodney Brumett, EMT; Shannon Hudnall, EMT-P; Millard and Sue Martin; Victoria LaRue, Communication Specialist; and Robert Doughty, Communication Specialist.

Not all heart attacks exhibit the same symptoms. On October 14, 2010, Millard Martin began to feel unusually weak, short of breath, and nauseous. He has diabetes, but his blood sugar levels were fine. Most heart attack victims will feel discomfort in their chest or upper body, but not Martin. "I had no aches, no pains; I just began to get sick," he said. His wife knew something was wrong, and when he began to feel dizzy, she suspected a heart attack. She called 911 immediately, and an ambulance arrived only minutes later. Martin was given aspirin and a nitroglycerin spray.

Millard's care began the moment his wife dialed 911. He was closely monitored by EMS until they arrived at The Medical Center seven minutes later. The Cath Lab staff were already preparing for his procedure. Time is so valuable during a heart attack, and involving EMS shortened the amount of time between his heart attack and the excellent cardiac care he received from the staff at The Medical Center.

A few days later, Martin had quintuple-bypass surgery. He had not known that he was living with two large blockages and three smaller ones in his heart. Today, Martin is able to perform at the same capacity as he always has. Martin's story is miraculous, but it is not inconceivable. His wife's assertiveness and his trust in emergency care kept him alive that October afternoon. "I have to give credit to my wife and the ambulance service for knowing what to do," says Martin, who is grateful for his health today. "They have gone way beyond their duty."



Millard and Sue Martin.

Jim Berry: EMS



Medical Center EMS is a busy and exciting environment every day. Jim Berry, Operations Manager, can attest to that. To ensure the department's ongoing efficiency, EMS leadership utilizes a unique combination of both operations and clinical expertise. Jim is a Six Sigma Brown Belt and Lean Belt as well as a paramedic. He draws from these multiple roles to help his team provide the highest quality emergency care for this community.

More specifically, Jim is involved in vehicle fleet maintenance, supervision of the communication center, and various quality improvement initiatives. He also monitors the team's adherence to established emergency protocols through analysis of daily run reports. Jim has been a paramedic for over 30 years. He made the transition to the operational side of business about 15 years ago. His experience in performance improvement and emergency care has led to his involvement with The Medical Center's STEMI project, a mission to improve door-to-balloon times for heart attack patients. Many physicians and staff throughout The Medical Center have worked diligently to meet and exceed the national goal of 90 minutes or less.

Jim is complimentary of his excellent team. Each employee at Medical Center EMS realizes the importance of efficiency and constant improvement when dealing with a patient's most frightening and life-threatening moments. "We are constantly working to improve the services for our community," Jim says. "Our team works very hard to take care of their patients. I'm proud of all of them."

Don't ignore the symptoms of heart attack or stroke

If you or someone around you experiences any of the symptoms below, dial 911 immediately. Your call will start a process that brings treatment to you during the critical early stages of a heart attack or stroke — when treatments are most effective.

Heart Attack

- Discomfort, pain, heaviness, squeezing, fullness or tightness in your chest
- Discomfort or pain in your jaw, neck, arms or back
- Lightheadedness or passing out
- Difficulty breathing
- Nausea and vomiting
- Cold sweats and pale skin
- Severe weakness

Stroke

- Sudden numbness or weakness of the face, arm or leg, especially on one side of the body
- Sudden confusion, trouble speaking or understanding
- Sudden trouble seeing in one or both eyes
- Sudden trouble walking, dizziness, loss of balance or coordination
- Sudden, severe headache with no known cause

Victoria LaRue: *Communication Specialist*

Most people will call 911 at some point in their lives. Most people also feel scared and panicked during the emergency they are experiencing. At that moment, comfort likely comes from the person they are speaking to over the phone. If you call 911 in Warren County, you might speak to Victoria LaRue, Communication Specialist II with Medical Center EMS.

Victoria has been with Medical Center EMS for nearly four years, and her position required one year's experience as a dispatcher and a licensed EMT. Communication Specialists are required to complete a course with the National Academy EMD Protocol Medical Priority Dispatch System, which collects and standardizes information to help them determine different levels of emergencies and the type of care needed. After completing this course, they must learn the CAD (Computer Aided Dispatch) System.

"First responder" is a term used for the first emergency personnel who arrive on the scene of a crisis—such as firefighters, police, or EMTs. Communication specialists, however, are the first first responders. They stay on the line with the caller as long as needed and can give life-saving instructions before support arrives at the scene. In most instances, several factors are confirmed before disconnecting with a caller, including controlled bleeding, an

open airway, and consciousness.

A large percent of incoming calls are for falls, stroke, and chest pain. If a person with chest pain experiences a heart attack, the communication specialist can give instructions on how to administer aspirin to reduce damage to the heart. In the case of cardiac or respiratory arrest, they can give CPR instructions over the phone.

At Medical Center EMS, there are nine full-time and two part-time communication specialists, as well as four PRNs. At any given time, there must be at least two on duty. While on duty, communication specialists must remain on premises at all times to ensure proper coverage for our community's needs. "Emergencies don't wait," Victoria said. "Personal interests have to wait."

No one wants to be in an emergency. But if you must call 911 in Warren County, you can rest assured that the person you talk to is ready and able to assist you with outstanding knowledge and experience.



Stay Calm...Take Control

It's not normal to see an adult suddenly collapse; but if you do, their survival depends on you. **Immediately call 9-1-1 and begin Hands-Only CPR** by placing one hand on top of the other in the middle of the chest and pushing hard and fast. Don't be afraid of doing something wrong or making things worse. Your actions can only help. You can more than double a person's chance of survival by providing Hands-Only CPR.

For more information

On the web: visit www.handsonlycpr.org for resources, FAQ pages, and a video demonstration.

Locally: contact Angie Drexler, American Heart Association Training Center Coordinator, at (270) 745-3762.

Jan Dickison, RN: *Emergency Department*



Jan Dickison, RN, works quickly under pressure. She is no stranger to emergencies. As an Emergency Department nurse, she quickly assesses her patients, collaborates with physicians, and administers rapid treatment to patients with conditions that require immediate care. In the ED, she has the opportunity to see patients with all sorts of illnesses and injuries. "You can quickly go from a stroke patient to a patient in cardiac arrest in a matter of minutes," she says. She has been an ED nurse for 36 years.

The Medical Center is a Joint Commission certified Primary Stroke Center. ED nurses, as well as other hospital

staff and physicians, complete on-going training and education to maintain status as a Primary Stroke Center and improve outcomes for stroke patients. "I see stroke symptoms daily. They might not always be acute, but I see them often," says Jan. When she does encounter a patient with acute stroke symptoms, she works as quickly as possible to assess and start treatment. When she calls a Code CVA (cerebral vascular accident) in the ED, a team of nurses, physicians, and radiology and laboratory technicians mobilize for rapid assessment and intervention. For ischemic strokes caused by a blood clot in the brain, IV-tPA, also known as "clot busters," must be started on the patient within three hours of symptom onset to be effective in restoring blood flow and improving the chance of a good outcome.

Jan strongly encourages anyone experiencing the signs and symptoms of stroke to call 911 immediately to reduce the risk of possible long-term effects. "It is so important to not ignore your symptoms and call 911 right away," she says. **Early assessment and treatment can save lives and limit long-term disability.**

Not all women experience typical signs of a heart attack. Women often experience these additional symptoms, sometimes as early as a month before suffering a heart attack:

- Shortness of breath
- Unexplained fatigue
- Sleep disturbance
- Indigestion
- Anxiety



Kristin Smith, RN: *Cardiac Cath Lab*



The Cardiac Catheterization Lab is a natural fit for Kristin Smith, RN, BSN. She has 15 years of nursing experience in areas from the Emergency Department to Open Heart Recovery and several others in between. "Cardiac nursing is my favorite specialty," she says. "The Cath Lab was a good way to bridge the gap between my ED and open heart experience."

Her role in the Cath Lab involves prepping patients who come in for procedures, identifying and addressing potential problems, monitoring patient comfort levels, and maintaining patient stability during and after procedures.

Kristin was asked to sit on The Medical Center's Chest Pain Committee due to her diverse cardiac care background. Her responsibility on the committee is to track the door-to-balloon times. She analyzes data collected from the time the patient enters our hospital for any defects in the system. If a delay were to occur, Kristin would investigate the cause and take steps to correct the issue. This added role gives her an opportunity to apply her skills in a different capacity. She enjoys using statistics and graphs, as well as collaborating with other participating departments like EMS, ED, and Marketing. Kristin says, "It's something I'm very passionate about. To have Primary PCI is something that sets us above other hospitals in the area. In order for it to function properly, you have to follow up on the process to make sure it works."