

Healthy Living

SPRING/SUMMER 2010

PINELLAS

Edward White Hospital
Largo Medical Center
Northside Hospital
and Tampa Bay
Heart Institute
St. Petersburg
General Hospital

Heart Attack or Stroke Symptoms? Critical Care Begins With a 911 Call

Know the Signs
of Peripheral
Vascular Disease · 3

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in Our Hands · 9



Crispy Oven-Baked Chicken

Substitute this baked chicken for the fried kind.

The taste is similar, and it is much better for heart health.

INGREDIENTS

- ½ cup skim milk or buttermilk
- 1 teaspoon poultry seasoning
- 1 cup cornflakes, crumbled
- 1½ tablespoons onion powder
- 1½ tablespoons garlic powder
- 2 teaspoons black pepper
- 2 teaspoons dried red pepper, crushed
- 1 teaspoon ginger, ground
- 8 pieces chicken, skinless
(4 breasts, 4 drumsticks)
paprika (to taste)
- 1 teaspoon vegetable oil

NUTRITION PER SERVING

Yield:	6 servings
Serving size:	½ breast or 2 small drumsticks
Calories:	256
Total fat:	5g
Saturated fat:	1g
Sodium:	286mg
Total fiber:	1g
Carbohydrates:	22g
Potassium:	339mg

DIRECTIONS

Preheat oven to 350° Fahrenheit. Add ½ teaspoon of poultry seasoning to milk. Combine all other spices with cornflake crumbs and place in plastic bag.

Wash chicken. Dip chicken in milk, shake to remove excess and quickly shake in bag with seasoning and crumbs. Refrigerate for 1 hour, then remove and sprinkle lightly with paprika.

Place chicken on greased baking pan. Cover with aluminum foil and bake for 40 minutes. Remove foil and continue baking for 30 to 40 minutes or until meat easily pulls away from the bone with a fork.

Drumsticks may require less baking time.



dump THE JUNK FOOD

If you indulge that craving for potato chips, you might initially feel satisfied—but not for long.

Replace high-fat snacks with healthy alternatives to feel fuller longer.

“Sweets and high-fat foods increase the total calories, saturated fat, and cholesterol you consume,” says M. Fernando Salazar, MD, cardiologist at Northside Hospital & Tampa Bay Heart Institute, Largo Medical Center, and St. Petersburg General Hospital. “Substitute salads, fruits, and nuts to reduce calories and get the nutritional benefits of vitamins and minerals naturally found in those foods.”

MAKE THE SWITCH

To ease the struggle, find a healthy snack comparable in texture, such as celery or carrot sticks instead of chips.

“Foods high in fat and sodium increase blood pressure, worsen or promote diabetes, and lead to coronary artery disease,” says Dr. Salazar. “After eating healthy food items for a few weeks, cravings for fast food or junk food disappear. Your long-term health will improve.”

*/ To order a complimentary **Heart Healthy Recipes** cookbook, call **Consult-A-Nurse®** at 1-877-4-HCA-DOCS (1-877-442-2362).*

Could You Have Peripheral Vascular Disease?

Peripheral vascular disease (PVD) can cause life-limiting pain in the extremities and increase risk of stroke. Fortunately, PVD is treatable if detected early enough.

The most common type of PVD is peripheral artery disease (PAD), which is caused by plaque buildup in the linings of artery walls and results in restricted blood flow to the kidneys, stomach, arms, legs, and feet. Some risk factors for PAD—such as smoking, physical inactivity, diet, diabetes, and high blood pressure—may be controlled.

“A PAD blockage in the lower leg is often indicated by calf and foot pain during physical activity,” says Stephen Minor, MD, interventional cardiologist at Northside Hospital & Tampa Bay Heart Institute and St. Petersburg General Hospital. “A blockage higher in the leg may cause pain in the buttock or thigh. If blood flow decreases enough, the individual may feel pain even at rest and could develop non-healing ulcers, particularly if the person has diabetes.”

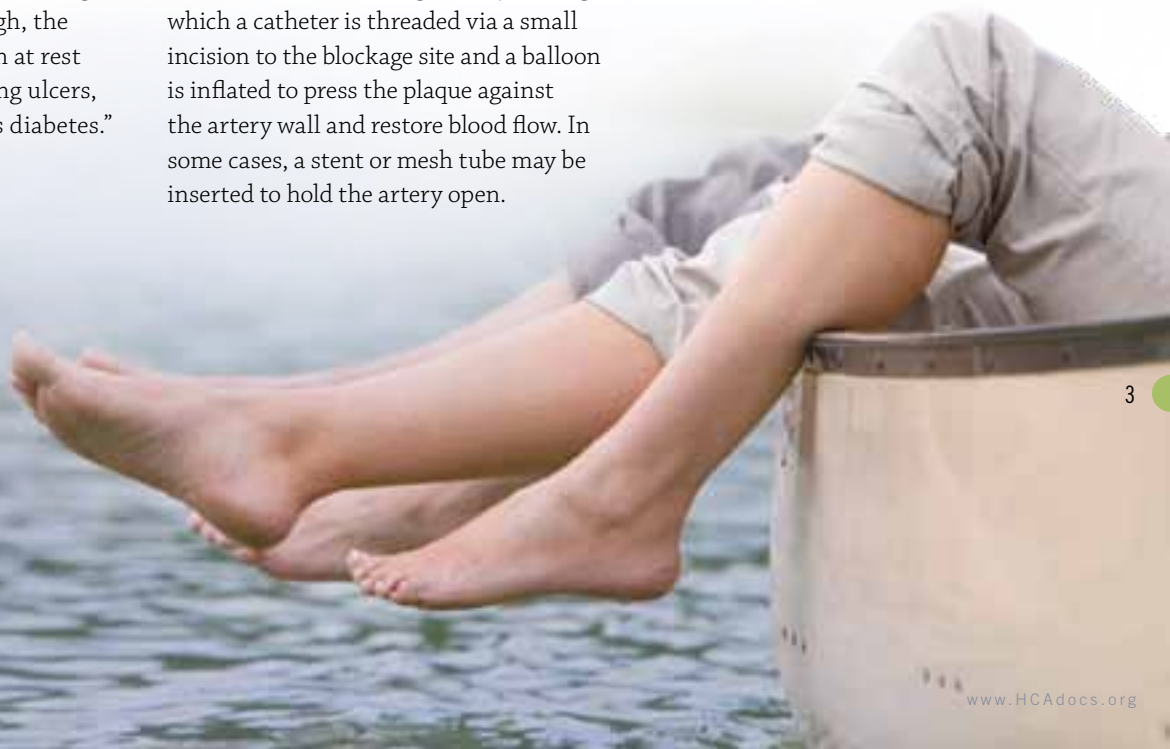
DIAGNOSIS AND TREATMENT: THE EARLIER, THE BETTER

If PAD is suspected, an ankle-brachial index (ABI) test may be recommended. If the screening indicates arterial narrowing, an evaluation by a vascular surgeon is appropriate.

“If intervention is required, the first step is an angiogram—an imaging test to precisely locate the blockage,” says Richard Fansler, MD, general and vascular surgeon at Largo Medical Center. “The kind of intervention performed depends on the patient’s symptoms, as well as the location and extent of the disease.”

A common procedure to alleviate blocked peripheral arteries is angioplasty, during which a catheter is threaded via a small incision to the blockage site and a balloon is inflated to press the plaque against the artery wall and restore blood flow. In some cases, a stent or mesh tube may be inserted to hold the artery open.

To attend a **FREE PVD screening** or receive a **FREE PVD risk assessment card**, please call **Consult-A-Nurse®** at **1-877-4-HCA-DOCS (1-877-442-2362)**.



Understanding

CAROTID ARTERY DISEASE

Carotid arteries provide vital blood to the brain to fuel daily functions such as thinking, moving, and feeling.



Like the arteries of the heart (coronary arteries), carotid arteries can become clogged, resulting in serious consequences. Hardening or thickening of the carotid arteries is known as atherosclerosis. When this buildup becomes too significant, blood flow is slowed or restricted entirely—an occurrence that dramatically increases a person’s risk for stroke, also called a brain attack.

AN OUNCE OF PREVENTION

Age or family history of carotid artery disease cannot be controlled, but lifestyle factors—such as maintaining a healthy diet and refraining from smoking—can reduce risk of developing the disease.

If you suspect you may be at risk for coronary artery disease, ask your physician about whether you would be a good candidate for a carotid ultrasound or computed tomography angiography to check for blockages. Treatment may include medication to help keep these vital arteries open.

Heart Attack + Stroke Triggers

Everyone has heard about a seemingly healthy person who died unexpectedly from a heart attack or stroke, but is that the norm?

“Cardiac and vascular events do not come out of the blue,” says Robert Sanchez, MD, cardiologist at Northside Hospital & Tampa Bay Heart Institute and St. Petersburg General Hospital. “They frequently result from

cholesterol-rich plaques that develop over decades.”

Plaque buildup increases risk of a heart attack or stroke after heavy physical activity, anger, infections, or overeating.

“These can set in motion processes that result in the sudden formation of a blood clot or rupture of a vulnerable plaque,” says Dr. Sanchez. “This can then lead to a sudden heart attack, stroke, or cardiac arrest.”

Regular exercise, yearly physicals, and a healthy diet rich in whole grains, fruits, and vegetables can help. If symptoms of heart attack or stroke occur, get to the hospital immediately.

To find a primary care doctor who can schedule your yearly physical, call Consult-A-Nurse® at 1-877-4-HCA-DOCS (1-877-442-2362) for a FREE physician referral.

“Largo Medical Center works to provide the community with information on stroke screenings in an effort to reduce the rate of stroke and disability.”

JOHN C. DRYGAS, MD, MS, SPINE AND NEUROSURGEON, LARGO MEDICAL CENTER

IDENTIFY Your Stroke Risk



About every four minutes, someone dies of stroke*, which provides a strong incentive to assess and control your risk for a brain attack.

Stroke risk increases with age and the presence of other health conditions. For this reason, it is important to get yearly physical exams to diagnose and treat controllable risk factors. There are many risk factors linked to stroke, but the greatest of these include:

- ✓ cigarette smoking
- ✓ high cholesterol
- ✓ diabetes
- ✓ transient ischemic attacks (TIAs or “mini” strokes)
- ✓ heart disease
- ✓ high blood pressure

For those in a high-risk category, additional tests, such as a carotid artery screening and peripheral vascular disease screening, may help determine the extent of the threat.

Can you lower your risk? Yes, you can! Lifestyle changes, including eating a balanced diet, getting a minimum 30 minutes of moderate exercise at least five days a week, and controlling blood pressure and glucose levels can greatly decrease stroke risk.

/ To register for an educational stroke seminar or for the “STROKE SMART 2010” event at Largo Medical Center, please call Consult-A-Nurse® at 1-877-4-HCA-DOCS (1-877-442-2362).

*“Impact of Stroke” – American Stroke Association



Cardiovascular DRUG INTERACTIONS

If you or someone you love takes prescription medications for cardiovascular-related conditions like high blood pressure, consult your physician and/or pharmacist when adding or removing a prescription or over-the-counter drug from your daily medication routine. This will help you avoid interactions that could increase or decrease the effectiveness of the drugs.

The following cardiovascular drug interactions can cause serious or even potentially fatal side effects:

- angiotensin-converting enzyme (ACE) inhibitors, commonly used to treat hypertension or congenital heart failure, and potassium supplements or diuretics (also known as “water pills”)
- warfarin (also known as Coumadin®), a drug used to help prevent blood clots, and fluoroquinolone or Bactrim™ DS, antibiotics used to treat urinary tract infections (UTI)
- warfarin and miconazole, commonly used to treat fungal infections like athlete’s foot
- warfarin and herbal supplements, such as garlic and ginseng

“Anyone taking more than one medication and/or supplement is at risk for potential drug interactions. Consult your physician or pharmacist to ensure safety.”

KRISTIE WALLACE, PHARM.D, CGP, CLINICAL COORDINATOR AND PHARMACIST ON STAFF AT EDWARD WHITE HOSPITAL

To attend a **FREE** Brown Bag Screening of your medications or to receive a food-and-drug interaction book, please call Consult-A-Nurse® at 1-877-4-HCA-DOCS (1-877-442-2362).



Call 911 for Stroke or Heart Attack

When symptoms of heart attack or stroke occur, call 911 immediately. The reason? When it comes to heart attack and stroke, wasted time means wasted heart muscle and brain cells. When you call 911, lifesaving care begins as soon as emergency medical service (EMS) personnel arrive.

When to Call 911

Most people know that situations involving excessive bleeding or compound (open) fractures warrant a call for help, but the signs of a stroke or heart attack can be much less obvious. Call 911 if you have one or more of these symptoms:

HEART ATTACK

- ➔ pain or tightness in the chest, arm, jaw, shoulders, or upper back
- ➔ shortness of breath
- ➔ weakness, dizziness, nausea, or vomiting
- ➔ unusual onset of fatigue or discomfort in the arms, back, neck, or stomach

STROKE

- ➔ sudden, severe headache and/or sudden changes in vision
- ➔ sudden numbness, weakness, or paralysis, especially on one side of the body
- ➔ confusion, trouble communicating, difficulty walking

IF IT IS A HEART ATTACK

Upon arrival, EMS workers perform an electrocardiogram (EKG) and send the emergency room staff results via a dedicated radio frequency. If the EKG shows abnormalities, a cardiac catheterization team is readied for the patient's arrival in hospitals with percutaneous coronary intervention (PCI) services. En route to the hospital, the patient may be given nitroglycerin and/or aspirin to dilate the arteries, increasing blood flow and easing chest pain.

“Patients may not want to come in because they aren't sure that they are having a heart attack or stroke; but we would much rather have it be nothing than for patients to miss their optimal treatment time.”

JOHN DODSON, MD, EMERGENCY ROOM
PHYSICIAN AT LARGO MEDICAL CENTER

AT THE HOSPITAL

When the patient arrives, physicians are waiting to perform a second EKG to verify the heart attack, which is caused by a build-up of plaque blocking an artery in or leading to the heart.

Once a heart attack is confirmed, thrombolytic drugs are administered to help dissolve the blockage. Specially skilled physicians begin cardiac catheterization—a minimally invasive procedure introducing a thin, flexible tube (catheter) into the arterial

passageway, typically in the groin or arm, to locate the blockage. Through the catheter, physicians perform angioplasty—a type of PCI—to restore blood flow by compressing the blockage to the sides of the artery using a balloon-tipped catheter. If the blood vessel is damaged, a stent (metal mesh tube) can be inserted to give new structure to the artery walls and allow normal blood flow.

Heart disease is the leading cause of death in the United States. If you suspect a heart attack, don't hesitate—call 911.

FOR MORE INFORMATION ABOUT HEART DISEASE OR STROKE, OR TO RECEIVE A **FREE** ICE PACK, PLEASE CALL CONSULT-A-NURSE® AT 1-877-4-HCA-DOCS (1-877-442-2362).

“EMS in Pinellas County is accredited by CAAS, ACE, and CAMTS and is the recipient of the 2009 Florida Governor’s Sterling Award. We are proud to serve Pinellas County, and if you need EMS services, you can rest assured that you are getting the very best care.”

MARK POSTMA, COO FOR SUNSTAR PARAMEDICS



IF IT IS A BRAIN ATTACK

Stroke symptoms can be much more subtle than heart attack symptoms, but timely treatment is just as imperative to preserve brain cells. The only sign may be a sudden severe headache or noticeable weakness on one side of the body. Call 911 immediately if stroke is suspected: take note of when the first symptoms occurred so you can tell emergency services once the ambulance arrives.

EMS personnel will start an IV, alert the hospital that a possible stroke patient is en route, and relay the time of symptom onset.

AT THE HOSPITAL

When the patient arrives, hospital staff rushes him or her for imaging scans to diagnose stroke and determine if the cause is hemorrhagic (due to a ruptured blood vessel) or ischemic (due to a blocked blood vessel).

For hemorrhagic stroke (approximately 20 percent of cases) neurologists work with hospital staff to repair the cause of bleeding, prevent complications, and start rehabilitation therapy.

Ischemic stroke (80 percent of cases) can potentially be treated through a clot-busting drug called tissue plasminogen activator (tPA). A neurologist will determine if tPA is a viable treatment. This thrombolytic drug is only recommended for patients meeting specific medical criteria, including a maximum three-hour lapse of time since symptom onset. Ischemic stroke patients, like hemorrhagic stroke patients, are carefully monitored to prevent complications and begin rehabilitation therapy as soon as possible.

Stroke is the leading cause of disability and the third-leading cause of death in the United States. If you suspect stroke—call 911.

“Everyone needs to become educated about the warning signs for stroke and heart attack. Recognizing the symptoms could not only save your life, but the lives of loved ones as well.”

FADI SABA, MD, INTERNAL MEDICINE
PHYSICIAN AT EDWARD WHITE
HOSPITAL, NORTHSIDE HOSPITAL &
TAMPA BAY HEART INSTITUTE, AND
ST. PETERSBURG GENERAL HOSPITAL

The HCA West Florida hospital network, dedicated to providing quality care, consists of 15 hospitals, 10 of which offer percutaneous coronary intervention (PCI) services. Two of these—Largo Medical Center and Northside Hospital—are in Pinellas County and have earned the SCPC Accredited Chest Pain Center designation. Fourteen hospitals in the network have earned Joint Commission Primary Stroke Center certification.





Faster Care for Medical Emergencies

When you go to the emergency room (ER), the last thing you want to do is wait. Seeing patients quickly is crucial for ensuring their comfort and safety—and that’s exactly what our hospitals aim to do.



ER Wait Time Snapshot

The national average emergency room wait time is one hour, according to the Centers for Disease Control and Prevention. HCA West Florida hospitals strive to beat the national average.

For patients experiencing life-threatening complications, such as heart attack or stroke, long wait times just aren’t an option.

Our goal is to get each patient into a room and seen by medical professionals as quickly as possible. To streamline the patient experience at ERs in HCA West and Central Florida hospitals, patients are triaged (assessed and prioritized based on illness or injury) upon arrival. The skill and expertise of the nursing staffs in our emergency

rooms allow physicians to quickly see patients who are most critically in need of emergency medical attention.

After recognizing a trend of longer ER visits several years ago, our hospitals took measures to trim the wait times. Currently, all 15 HCA West and Central Florida hospitals make average ER wait times available to the public through their websites and text messaging, and some hospitals also post on billboards. The information is updated in 30-minute intervals.

/ Find out average ER wait times in the HCA hospital nearest you by text messaging “ER” to 23000 and respond with a local zip code.

“In some instances, patients may walk in with a non-urgent issue, not realizing that they have a serious medical problem. **Shorter wait times mean we can see the most seriously ill or injured patients quickly and deliver rapid treatment.**”

—MARK CASANTA, MD, EMERGENCY MEDICAL DIRECTOR, EDWARD WHITE HOSPITAL

HCA West and Central Florida hospitals ER Wait Times are an average and provided for informational purposes only. The ER wait time represents the time it takes a patient to see a qualified medical practitioner after arrival. Patients may be assessed by other medical personnel before seeing the qualified medical practitioner. The ER wait time for each hospital is updated approximately every 30 minutes, using an average from the previous four hours.

What Can Tampa Bay Heart Institute

do for you?

Tampa Bay Heart Institute (TBHI) at Northside Hospital and Largo Medical Center provides comprehensive, up-to-date treatment for a variety of cardiac conditions.

“Our dedicated cardiologists, cardiac surgeons, and clinicians come together as a team to work toward the prevention, diagnosis, and treatment of cardiac disease,” says M. Fernando Salazar, MD, FACC, FACP, FSCAI, cardiologist at Northside Hospital & Tampa Bay Heart Institute, Largo Medical Center, and St. Petersburg General Hospital. “We teach patients about prevention and healthy living, perform state-of-the-art procedures, offer technologically advanced imaging services, and strive to improve the lives of people in our community.”



For a free brochure on the Tampa Bay Heart Institute's services, call 1-877-4-HCA-DOCS (1-877-442-2362).

The Tampa Bay Heart Institute provides a full range of cardiac services—including diagnostics, interventions, electrophysiology, angioplasty, heart valve replacement, coronary artery bypass grafting, open-heart surgery, and cardiac and cardiopulmonary rehabilitation at:

- Tampa Bay Heart Institute at Largo Medical Center, 201 14th Street SW in Largo (727-588-5200)
- Tampa Bay Heart Institute at Northside Hospital, 6000 49th Street North in St. Petersburg (727-521-4411)

AVAILABLE TO YOU

TBHI has been recognized for reducing the time required to reopen a clogged artery after a heart attack patient arrives at the hospital. The STEMI or door-to-balloon time is the time from when the patient enters the hospital to the time the cardiologist is able to open up a blocked artery with a balloon and place the stent. The recommendation of the American College of Cardiology and the American Heart Association is that when the artery is opened within 90 minutes, the clinical outcome and survival rate is improved. Both Largo Medical Center and Northside Hospital and Tampa Bay Heart Institute beat the recommended time by 30 minutes.

“We also perform atrial septal defect closures, which is a highly complex procedure not widely available in the county,” says Peter Wassmer, MD, cardiologist at Northside Hospital & Tampa Bay Heart Institute and St. Petersburg General Hospital. “In addition, our 64-slice computed tomography scanner offers advanced technology that delivers impressive image quality of the coronary anatomy.”

THE FUTURE

The long-range goal for the specialists at TBHI is the prevention of heart disease.

“We are reaching out to our community for more teaching opportunities,” says Dr. Salazar. “We continue to spread the word about the prevention of heart disease, healthy living, the latest technology, and the options for treating the cardiac conditions of the patients in our community.”



MINIMALLY INVASIVE Valve Surgery

Mitral valve surgery used to be an invasive procedure with a very long recovery time. Today, many mitral valve surgeries can be performed using minimally invasive techniques, reducing recovery time and possible side effects from surgery.

The mitral valve in the heart carries blood into the heart chambers. The valve opens enough to allow blood flow from one chamber to another and then closes, preventing blood from flowing backwards.

A mitral valve that does not close can allow blood flow to leak back into the atria. Similarly, if the mitral valve does not open properly, blood flow will be restricted. These conditions require surgery, as they can result in severe heart damage over time.

Traditional open surgery to repair the mitral valve involved making a large incision in the chest near the sternum. Surgeons then cut through the muscles in the chest to expose the heart. The large incision came with an increased risk for bleeding and infection, along with scarring.

When they use minimally invasive techniques, such as robotically assisted valve surgery, surgeons make several tiny incisions in the chest instead of one large incision. A laparoscope, inserted into one small incision, provides surgeons with a three-dimensional view of the heart. Surgical tools are placed through the remaining incisions. The surgeon then manipulates these tools using a robotic surgical console.

“Minimally invasive surgery has many benefits, among them allowing patients to return to work and daily activities more quickly than they would following traditional surgery,” says Michael DeFrain, MD, cardiothoracic surgeon at Northside Hospital & Tampa Bay Heart Institute, Edward White Hospital, Largo Medical Center, and St. Petersburg General Hospital. “This presents a huge advantage for patients.”

Other benefits of minimally invasive surgery include smaller incisions, reduced pain, less bleeding, and lowered risk of infection after surgery.

Call Consult-A-Nurse® at 1-877-4-HCA-DOCS (1-877-442-2362) for a FREE physician referral to an HCA Pinellas County physician.

Put *Your Heart* in Our Hands

After a heart attack, open-heart surgery, or diagnosis of heart disease, cardiac rehabilitation can help you get back on your feet.

At Tampa Bay Heart Institute, which has locations at Northside Hospital and Largo Medical Center, a unique three-phase program has been developed for cardiac rehabilitation patients.

“We evaluate each patient’s circumstances and exercise capacity through stress and treadmill tests,” says Octavio Cosme-Montalvo, MD, cardiologist at Northside Hospital & Tampa Bay Heart Institute, Largo Medical Center, and St. Petersburg General Hospital. “This helps us set short- and long-term goals.”

PHASE 1 INPATIENT REHABILITATION

Most patients in Phase One have had open-heart surgery. Their rehabilitation begins with light exercise and educational sessions covering an array of issues related to cardiac health.

“We provide information needed to help prevent future cardiac complications,” says Dr. Cosme-Montalvo. “Our dietitians guide patients toward healthy nutritional strategies. Nurses provide instruction about treatment, medications, and home care. Educators detail methods to combat controllable risk factors for heart disease.”

Phase One may take as few as four to five weeks or as many as three months.

PHASE 2 OUTPATIENT REHABILITATION

Most patients in Phase Two have undergone coronary interventions. During rehabilitation sessions scheduled three times a week for up to 36 weeks, they learn to recognize symptoms of heart disease or heart attack and determine when to seek treatment.

PHASE 3

SUPERVISED EXERCISE MAINTENANCE

After achieving exercise goals during the first two phases, patients enter a supervised exercise maintenance period.

“Adopting healthy behaviors provides the most effective tool for fighting heart disease,” says Dr. Cosme-Montalvo. “We help our patients maintain their function and fitness levels during the critical period following initial rehabilitation.”

Throughout the rehabilitation process, a patient’s primary care physician is kept updated about the progress made and any challenges the patient may face that warrant following up.

➔ For a free brochure on the Tampa Bay Heart Institute’s services, call 1-877-4-HCA-DOCS (1-877-442-2362).





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Bett**ER**, Fast**ER** Emergency Care for Our Patients

Edward White Hospital

Primary Stroke Center ¹
 Chest Pain Center ²



2323 9th Avenue N.
 St. Petersburg, FL 33713
 727-323-1111

Largo Medical Center

Primary Stroke Center ¹
 Chest Pain Center with PCI ²



201 14th Street S.W.
 Largo, FL 33770
 727-588-5200

Largo Medical Center - Indian Rocks

Primary Stroke Center ¹



2025 Indian Rocks Rd.
 Largo, FL 33774
 727-581-9474

Northside Hospital

Primary Stroke Center ¹
 Chest Pain Center with PCI ²



6000 49th Street N.
 St. Petersburg, FL 33709
 727-521-4411

St. Petersburg General Hospital

Primary Stroke Center ¹
 Chest Pain Center ²



6500 38th Avenue N.
 St. Petersburg, FL 33710
 727-384-1414

**Text "ER" to 23000 and respond with a local zip code
 to receive average Emergency Room Wait Times**

When seconds count, our Primary Stroke Centers and
 Accredited Chest Pain Centers Perform at a Higher Standard



**Edward White Hospital
 Largo Medical Center
 Northside Hospital
 St. Petersburg General Hospital**

TOGETHER, PERFORMING AT A HIGHER STANDARD SM

1. Advanced Certification by the Joint Commission
 2. Accredited by Society of Chest Pain Centers