

A Publication of The Dayton Heart Center

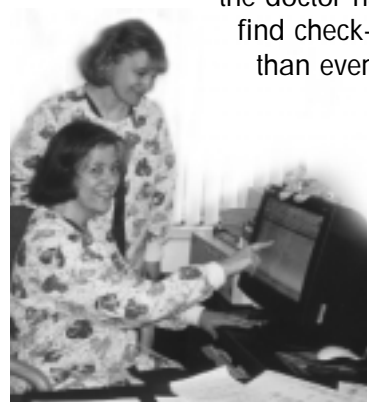
Update On New Patient Records System

In the last issue of *HeartBeats* we told you about The Dayton Heart Center's new electronic patient records system. This new system, specifically designed for cardiology offices like ours, was installed in all five offices in December and allows us to combine all of our activities into one organized, integrated system.

Since December all of the staff and physicians have been working hard to become familiar with this new system and learn all of the features that will benefit you, our patients. The members of our clinical staff, including nurses, medical assistants and medical technologists have been working especially hard, with many additional hours.

As you may remember, here are some of the tasks that are being managed with this new, state-of-the-art computer system:

- Scheduling appointments – Staff members can schedule appointments in any of our offices, for any physician
- Making notes in a patient's record – Doctors and nurses are able to record notes about each visit directly into a handheld computer. This system eliminates shuffling through papers looking for a test result or from notes from the last visit. Everything your doctor or nurse needs is available in an instant.
- Updating a prescription refill order – Prescription information will be up-to-the-minute; that means your refills and other prescription needs will be ready quicker.
- Scheduling tests and other follow-up appointments – By the time you get to check-out, the staff member will already know which tests or appointments the doctor has recommended. You will find check-out to be faster and easier than ever before.



- Submitting claims to your medical insurance company – Less paperwork to sort through means your claims will be submitted to your insurance company quicker and with the highest level of accuracy.

- Maintaining the confidentiality of your medical records – Finally, this system greatly increases our ability to safeguard your private medical information. There are no papers to get misfiled or fall out of a chart. This is the most confidential method of managing patient records available today.



We are all excited about this new system and the way it will allow us to eliminate some of the paperwork that can get in the way of patient care. If you have other questions about our new system or the changes it has made for our staff, please feel free to ask any staff member or physician at your next visit.

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Heart of the Matter

Cardiac Catheterization: An Overview

Heart disease is still the number one cause of death in our country. Many cardiologists may use a test called a coronary angiogram or cardiac catheterization to diagnose blockages in the arteries that supply the heart muscle with blood and oxygen. Currently, cardiac catheterization is considered the "gold standard" in diagnosing the presence and the severity of the blockages in these arteries.

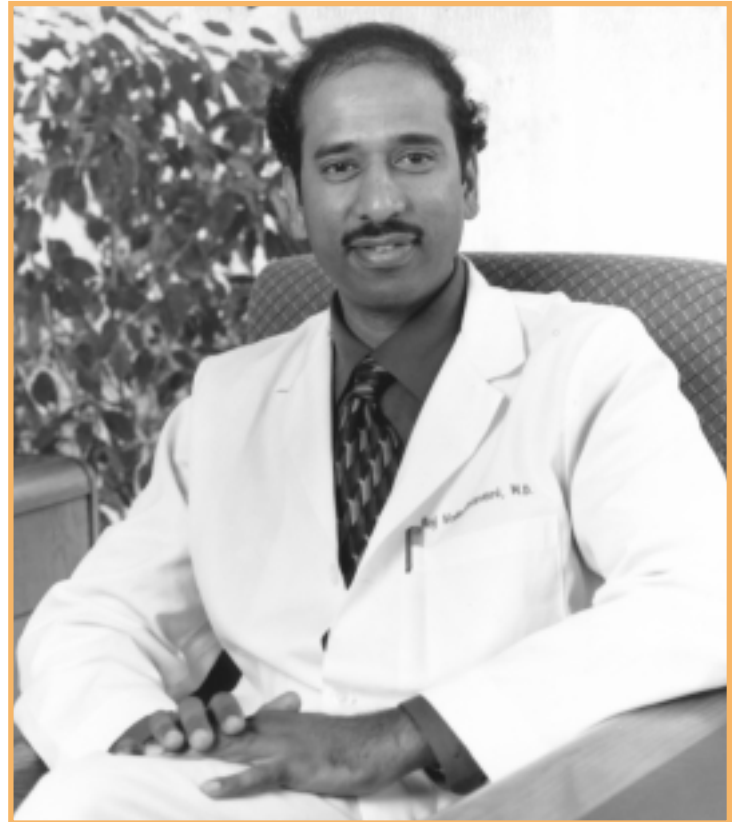
While the way we diagnose and treat blockages in the arteries may change, cardiac catheterization is the main way of locating those blockages. While this procedure is usually performed in a hospital, there is a trend in some states toward doing these procedures in an outpatient, ambulatory care center.

During a cardiac catheterization, a cardiologist will often numb the patient's groin area with a local anesthetic and then place a small tube called a "sheath" into the artery supplying that leg. After

placing the tube into the artery, the doctor will advance long tubes called "catheters" through the main artery towards the arteries supplying the heart. He/she then will take an x-ray that records the flow of the dye in the arteries. After looking at both the left and right coronary arteries, the doctor completes the procedure by removing the catheters and closing the puncture site in the groin with either a suture device (Perclose) or a collagen plug (Angio-Seal or VasoSeal).

Patients are generally up and out of bed within one or two hours and able to go home the same day.

With new technology and the increased use of smaller catheters, the risk of bleeding and infection has significantly decreased since the early 1990's. In spite of these medical advances, however, there are still a few possible complications to catheterization, including bleeding, allergy to the dye, and a small risk of stroke, heart attack or very rarely the possibility of death.



After reviewing the images taken during the catheterization, the doctor will show the patient (either on an X-ray machine or paper) the size and the severity of the blockages and talk with the patient about treatment options, including medication, angioplasty or coronary artery bypass graft surgery (CABG).

If you have more questions about cardiac catheterization, be sure to consult with your cardiologist and nurse. In addition, The Dayton Heart Center has many reference materials, including videotapes, that you can review.

Rajendra P. Vallabhaneni, MD

What You Need To Know About Aspirin Therapy

Take two aspirin and call me in the morning. Well, that's not our advice, of course, but have you and your doctor talked about aspirin use?

For instance, did you know that regular aspirin use in people with heart disease has been shown to reduce the risk of blockage in the arteries and thereby reduce the risk of a heart attack, second heart attack or stroke?

Aspirin works in this way by reducing the tendency of blood platelets to clot, thereby allowing the blood to flow more freely throughout the body and lessening the chances of arteries becoming blocked.

A recent study published by the American Heart Association reported that up to 10,000 more people would survive heart attacks each year if they took one aspirin tablet at the first sign of the attack. Of the 1.25 million Americans per year who have heart attacks, only 60 to 80 percent of them receive aspirin while in cardiac crisis. Aspirin therapy is now a strong preventative ally and can be used by many patients for the following reasons:

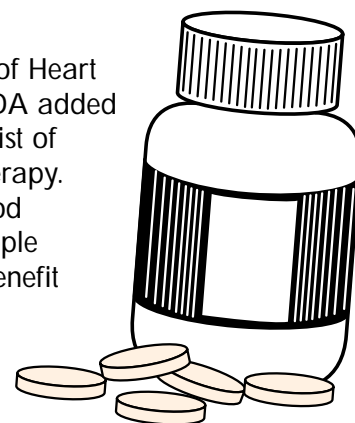
- During A Suspected Heart Attack – Aspirin plays a critical lifesaving role if taken during a suspected heart attack as directed by your doctor. The FDA has concluded that aspirin reduces the risk of vascular death by up to 23 percent if administered when a heart attack is suspected. Additionally, research has shown that if taken within 30 minutes of a suspected heart attack, damage to the heart can be greatly reduced.
- For Recurrent Heart Attack – The Nurse's Health Study at Harvard University is one among many studies that demonstrate that patients who regularly take aspirin may reduce their chance of a second heart attack.
- For Stroke Prevention – Aspirin is approved for patients who have already had a stroke to prevent a recurrent stroke. A joint study by the Chinese Acute Stroke Trial (CAST) and the International Stroke Trial (IST) found that the risk of recurrent stroke is reduced by one-third from just a few weeks of aspirin use. The study also found that the overall benefit in preventing further stroke or death is about nine per 1,000 people within a month.

- For Patients at High Risk of Heart Disease – Recently, the FDA added millions of people to the list of candidates for aspirin therapy. Patients with signs of blood vessel blockages and people with stable angina can benefit from aspirin therapy.

It is important to realize that if your doctor has prescribed aspirin therapy that you consider your aspirin as important as any other medications you might be taking (for instance, medicines to control high blood pressure, cholesterol levels, etc.). You need to be as regular about your aspirin use as you are with any other prescription medicine.

Most people can take aspirin with no additional problems; however, a small percentage of patients may suffer minor stomach upset from aspirin. For those patients there are safety-coated aspirins available. These aspirins bypass the stomach and dissolve in the small intestine.

Although the research and findings are promising about the benefits, aspirin therapy is not right for everyone – ask your doctor to find out if aspirin therapy is the right course of action for you.



THE HEART AT WORK

The following people have joined The Dayton Heart Center since our last issue:

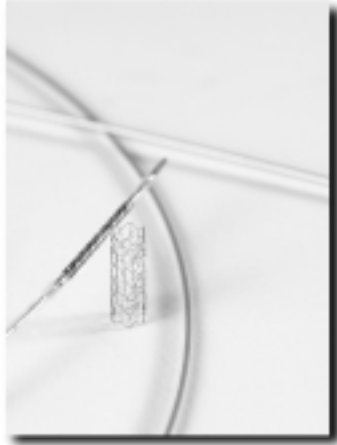
Penny Lorenz, MA – Penny is the latest addition to The Dayton Heart Center/Beavercreek. As a medical assistant, Penny works closely with patients on prescription refills, blood pressure checks, EKG's and assists the physicians during office hours.

Robin Williams, RN – Robin joined our team in late January and works in our nuclear cardiology lab supervising stress tests. Robin comes to us with a strong hospital background and is eager to work one-on-one with our patients.

The Dayton Heart Center Doctors AMONG FIRST IN REGION TO USE Innovative Coronary Stent

The Dayton Heart Center doctors have been successfully using a new stent to treat patients with coronary artery disease.

This new stent, the BiodivYsio™ Added Support Over-the-Wire Stent, is coated with a medicine that reduces the body's response, thus reducing the risk of clot formation within the patient's arteries. Our doctors have been using this new stent in their work at Dayton Heart Hospital



The BiodivYsio stent works because the coating has been designed to mimic the outside surface of a red blood cell thus allowing the patient's body to consider the stent as a natural part of the body.

"What's exciting about this new stent is that its unique coating ability increases our treatment options for patients," said Dr. Gary J. Fishbein. "As the rate of coronary artery disease rises in this country, breakthrough products like this help fulfill an unmet need and enhance our ability to effectively treat our patients."

Every year, Americans undergo more than 1.2 million stenting procedures. Innovations in stenting have made a dramatic impact on physicians' ability to treat coronary artery disease. Stents are small, flexible devices, much like a scaffold, that are used to hold open blocked arteries that have been opened through angioplasty.

If you have questions about this new stent, please ask your doctor at your next visit.

THE DAYTON HEART CENTER EARNS NATIONAL ACCREDITATION FOR NUCLEAR MEDICINE LAB

The staff and physicians are pleased to announce that the Intersocietal Commission for the Accreditation of Nuclear Medicine Laboratories (ICANL) has granted accreditation to The Dayton Heart Center's nuclear medicine laboratory.

The Dayton Heart Center's full-service nuclear cardiology lab is one of the first nuclear cardiology laboratories in the United States, Canada and Puerto Rico to earn this accreditation.

"We're certainly pleased with this most recent recognition," said Rohit Bhaskar, MD, Director of Nuclear Cardiology for The Dayton Heart Center. Dr. Bhaskar added that the accreditation notification comments upon the Center's "commitment to high quality patient care and its provision of quality diagnostic testing."

The Dayton Heart Center has operated a full-time nuclear cardiology lab at its Needmore Road facility since its opening in 1992. This lab can accommodate patients from all of our offices. In addition, doctors throughout the region refer their patients to The Dayton Heart Center for these nuclear cardiology tests.

Nuclear cardiology is a complex imaging technique that uses a small amount of a radioactive dye to illuminate blocked or damaged parts of the heart. More than five million nuclear cardiology studies are performed each year in order to identify and assess damage due to heart or vascular disease.

HeartBeats...Coming to a Computer Near You

Many of our patients are now enjoying e-mail as another method of communication with children, grandchildren and friends. Perhaps you might like to add The Dayton Heart Center to your list of e-mail correspondents?

If you would like to receive future issues of HeartBeats via your work or home e-mail address, please complete the form below and return it to any of our staff at your next visit. Or you can return this form by mail to our main address: The Dayton Heart Center, Suite 300, 1530 Needmore Road, Dayton, Ohio, 45414.

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Nutritional Facts Per Serving
(with 2 tbsp. chutney):
486 calories, 24.9 g total
fat (7.4 g saturated fat),
140 mg cholesterol

The Chefs' Healthy Collection,
1993

Roast Pork Tenderloin with Lemon Pear Chutney

Anyone who remembers Dayton's King Cole restaurant may remember this wonderful pork loin dish. Did you also realize it is a heart healthy recipe? Enjoy!

4 cloves garlic, minced	2 tbsp. fresh grated ginger
5 bay leaves	1 cup sugar
1/2 tsp. Marjoram	1 cup water
1/4 tsp. Thyme	1 cup cider vinegar
salt and coarsely ground black pepper	zest from 2 small lemons
5 tbsp. olive oil	juice from 2 small lemons
2 tbsp. balsamic vinegar	1 cinnamon stick
2 lb pork tenderloin, trimmed of all fat	3 pears, peeled, cored and diced
1/2 cup minced onion	1/2 cup sliced almonds
1/2 cup golden raisins	

In a bowl, combine garlic, 4 bay leaves, marjoram, thyme, salt and pepper. Whisk in balsamic vinegar and 4 tablespoons oil. Pour mixture over pork in shallow container and marinate for 2 hours.

In a large, heavy-bottomed saucepan over medium heat, add remaining 1 tablespoon olive oil, then cook onions just until translucent. Add raisins, ginger, sugar, water, cider vinegar, lemon zest, lemon juice, cinnamon stick, and remaining bay leaf. Simmer for about 30 minutes or until the liquid is syrupy. Add the pears and simmer just until tender. (Ripe pears require only 1 or 2 minutes.) Remove bay leaf and cinnamon stick. Allow to cool, then stir in the almonds.

Preheat oven to 325. In a heavy-bottomed, oven-proof skillet over medium heat, sear the whole pork tenderloin until browned all over. Season with salt and pepper and place in the preheated oven for about 15 minutes, or until an internal temperature of 150 is reached. Slice and serve with chutney.