

MED-INFO

A Health Magazine Connecting Northwest Hospital with Our Community



Inside:

Life-Saving Heart Surgery
For Busy Mom 2

SaebFlex™ A Powerful Tool
in Stroke Recovery 3

Northwest's Report to the
Community 3

Living With Diabetes - Keeping
the Holiday Season Healthy 4

Life-Saving Heart Surgery Gives New Outlook, Energy to Busy Mom Heart Disease in Women Sometimes Misdiagnosed, Left Untreated

To watch Stacy Lindbom striding after her dog Bella on their daily walk or lifting weights during her workout at the gym, you would never imagine that six months ago, she was undergoing cardiac bypass surgery to prevent an imminent heart attack.

Lindbom, 50, is a musician's wife and mother of two teenagers, and has worked full-time in catering for the Shoreline School District for the past 13 years. She is also the primary caregiver for her 80 year-old father, who suffers from a variety of illnesses and lives in a nursing home. Needless to say, Stacy Lindbom leads a very busy – and often stressful – life.

For several years, Lindbom believed she was suffering from serious heartburn. Thinking it just came with age, she sought treatment in over-the-counter remedies. When they no longer seemed effective, she turned to Dr. Richard Tobin, a gastroenterologist at Northwest Hospital & Medical Center. Armed with negative test results and a prescription for reflux medication, Lindbom felt she had the problem under control.

“Everyone at Northwest was so wonderful, respectful and supportive.”

-Stacy Lindbom, patient who had cardiothoracic surgery performed at Northwest Hospital

Then one day at the dog park, Lindbom had a heartburn attack that seemed to travel all the way to her jaw. “I felt so strange,” she says. “My jaw and head hurt, my arms were shaking and I was really stressed and scared.” At a nearby urgent care facility, Lindbom was told her heart was having muscle spasms and was given Valium. Based on this episode, Dr. Tobin

sent Lindbom to Dr. Margaret Hall at Summit Cardiology, a group of specialty cardiologists affiliated with Northwest Hospital.

Dr. Hall recommended a stress echocardiogram, a test in which ultrasound pictures of the heart are taken before and after exercise. When the test results came back abnormal, Dr. Hall scheduled an angiogram, an x-ray dye test of the arteries. The angiogram showed that one of Lindbom's three main arteries was totally blocked, another had a severe blockage and a branch of the third artery also had a severe blockage. Lindbom's heart had been weakened by the impaired blood flow and was functioning at less than half its normal strength.

Dr. Hall immediately referred Lindbom to Dr. Gabriel Aldea, a cardiothoracic surgeon with Northwest Hospital partner UW Cardiothoracic Surgeons. Six days later, Lindbom went in for coronary bypass surgery.

“Stacy had a very complex case,” says Dr. Aldea. “She was a smoker, anemic, had hereditary high cholesterol and a pretty weak heart.” During surgery, Dr. Aldea performed a complicated bypass of Lindbom's blocked arteries, as well as an endarterectomy

(Right) Northwest Hospital & Medical Center cardiac care patient Stacy Lindbom went through the hospital's cardiac rehabilitation program after her bypass surgery. Today she goes to the gym six days a week and takes daily walks with her dog, Bella.



Photo by Nichole DeMent

– essentially a resurfacing of the artery walls to remove the plaque blocking them.

“Dr. Hall made an excellent diagnosis,” says Dr. Aldea. “I believe heart disease in women is somewhat neglected and needs to be examined.” According to Aldea, women often endure more discomfort before they seek treatment and, because of an outdated bias that women don't do as well in surgery, symptoms like fatigue, shortness of breath or reflux may be overlooked as indicators of heart disease. “We need to take these symptoms seriously and not delay treatment,” he says. “Stacy is proof of that. Despite the fact that she had a lot of risk factors and this was complicated surgery, she has done incredibly well.”

Lindbom spent five days in the hospital following her procedure. “Everyone at Northwest was so wonderful, respectful and supportive,” she says. “From the person who drew my blood to my team of doctors, I felt so very taken care of. People were right there for the smallest things. The whole place just feels good – even when you're sick.”

Six months later, Lindbom has completed Northwest's extensive cardiac rehabilitation program and has returned to her life with gusto. Besides her walks with Bella, she works out at the gym six days a week. Not content to sit still in the evenings, she does sit-ups, bounces on her exercise ball and turns on the local oldies station and dances in her living room. And every Thursday, she loads up her car to deliver *Meals on Wheels* to seniors throughout her neighborhood.

She has quit smoking for good and, following post-surgery nutrition counseling, has changed her eating habits and lost weight. A self-proclaimed McDonald's hamburger lover, Lindbom still indulges every once in a while. Only now, she orders a plain hamburger, removes the top bun and has only mustard. “It's a

(Continued on Page 3)

Cardiac Care at Northwest Hospital

(Continued from Page 2)

small price to pay for how healthy I feel today," she says. She's also trying to change her teenagers' habits as well, insisting on wheat bread and brown rice. "They haven't learned the best eating habits from me, but that's changing," she says.

Lindbom says she feels better than she's felt in 20 years. "I'm in the best shape of my life and I have more energy than I've ever had. I want to live to be 100!"

"Surgery doesn't end with just fixing the plumbing," says Dr. Aldea. "It has to do

with an attitude towards life, taking yourself seriously, taking charge of your life and your health and having the attitude that 'I can still turn things around.'"

"As strange as it sounds, having the surgery turned out to be a great experience," says Lindbom. "I'm a happier, stronger person and I realize that I have to take care of myself if I'm going to be around for my kids and my family. I wish I would have realized all that earlier."

Northwest Hospital's Report to the Community

In accordance with Northwest Hospital's Master Plan – a document that provides a long-range planning vision for the hospital – a report to the community is periodically published in the Med-Info Newsletter to update our neighbors about solid waste management, charity care, and other activities that may be of interest to the community.

Traffic Reduction Efforts

Northwest Hospital is committed to the health of the community in more ways than just healthcare. We are avid supporters of King County's Commuter Trip Reduction efforts and the Clean Air Act.

The agreement with King County Metro and North Seattle Community College for the custom Metro Route #345 bus service was renewed, which provides service to our staff and community between the hospital campus, the Outpatient Medical Center, the Northgate Transit Center, and other key points in the area.

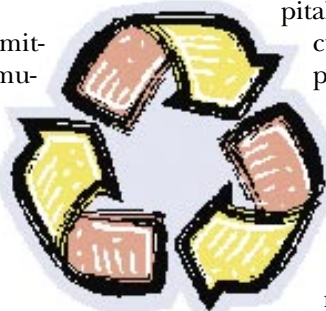
A bus shelter is maintained on site to facilitate the needs of bus riders. We continue to provide our staff with a free annual bus pass that reduces congestion in the neighborhood.

The hospital continues to implement measures to reduce the number of employees commuting to work in single occupancy vehicles. In many cases, the hospital exceeded the requirements of the Traffic

Management Plan elements described in the hospital's Master Use Plan.

Solid Waste Disposal

The hospital reported to the community its waste management statistics for 2005 in the July/August 2006 issue of the Med-Info Community Newsletter.



In the first six months of 2006, the hospital recycled approximately 971 cubic yards of mixed/shredded paper, glass, cans, milk cartons, plant material and plastics from the waste stream.

Northwest Hospital & Medical Center continued to use an outside company for the recycling/disposal of fluorescent lamps, batteries, spent printer cartridges, hazardous waste and kitchen fat.

Northwest Hospital recycled/disposed of 1657 lamps, 1269 pounds of batteries, 279 printer cartridges, 25.3 tons of medical waste, 3572 pounds of chemicals, 247 TV/computer monitors and 5500 pounds of kitchen fat. Also, 331 tons of garbage was sent to the landfill.

Air Quality

Since the medical waste incinerator was shut down in 1999, the hospital has continued to use an outside company for the disposal of the hospital's medical waste. In the first 6 months of 2006, the hospital generated 21.7 tons of combined infectious waste and sharps.

Overcome the effects of a STROKE— one finger at a time.

SaeboFlex™ gives stroke patients the power to regain movement in the arm and hand up to 20 years after a stroke. Designed to help those with limited hand and arm movement, this revolutionary therapy is now available at Northwest Hospital & Medical Center. **Join us for a free seminar and screening** by specially-trained SaeboFlex™ therapists and discussions with Evan Cantini, MD, Medical Director at NWH's Center for Medical Rehabilitation and Henry Hoffman, OTR/L, Founder of Saebo.

THURSDAY, DECEMBER 7TH
2:00 PM UNTIL 5:00 PM

NORTHWEST HOSPITAL & MEDICAL CENTER
TCU AUDITORIUM
1550 N 115TH STREET
SEATTLE, WA 98133

FREE screening by specially-trained SaeboFlex™ therapists.

Space is limited,
call (206)
368-1148 to
register. Please
register by
December 5,
2006.



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To contact us about the newsletter, e-mail newsletters@nwhsea.org or call (206) 368-1645.

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Visit www.nwhospital.org for information and directions.

Living With Diabetes - Keeping the Holiday Season Healthy

November is Diabetes Awareness Month

A diabetes diagnosis doesn't mean you have to stop enjoying life. With the right knowledge and skills, people with diabetes can learn to manage their own disease, maintain good health and prevent complications. Sometimes, it can be as easy as a few lifestyle changes involving diet and exercise and sometimes it may mean adding medicine to your regimen.

The highly skilled staff and ADA-recognized diabetes education program at Northwest Hospital & Medical Center provides patients and their families with a variety of education options, ranging from classes to seminars to one-on-one counseling – all designed to encourage patients to take control of their health.

“Most patients we see with diabetes want to take good care of themselves, but may not know how or where to start,” says Cheryl Cummings, RN, CDE, and clinical coordinator for Diabetes Services and Community Education at Northwest Hospital. “One of the most satisfying parts of my job is working collaboratively with patients, dietitians and physicians to achieve a common goal – a patient’s self-management of his or her diabetes. We try to make our classes and counseling informative, supportive and fun at the same time.”

Cummings says that at this time of year, discussions in her classes often turn to the challenges that holiday parties, treats and eating out present for people with diabetes. “High sugar and fat intake can wreak havoc with blood sugars and lipid levels,” says Northwest Hospital dietician, Tricia Clement. “But there are still lots of ways to enjoy and participate fully in holiday festivities while still successfully managing your diabetes.”

According to Clement, these methods include lightening meals by modifying recipes and portion sizes, choosing alternatives to alcoholic beverages and using healthier foods and flavorings. “We give our patients a lot of suggestions for how to replace the fats, sugars and starches in holiday meals with healthy, diabetes-friendly ingredients that are just as delicious.”

Sources of fat in holiday meals include:

- meats, gravy, sauces, butter
- dips, salad dressings, sour cream, toppings
- cheese, olives, nuts, crackers
- eggnog, cream in coffee, whipped toppings
- cookies, candy, desserts
- eating out more often than usual, especially fast foods

Sources of sugars and starches in holiday meals include:

- sweets: candies, cookies, cakes, pies
- fruit, gelatin salads
- sweetened beverages
- bread, rolls
- stuffing, potatoes, yams, peas

“Substitutions don't have to be difficult or significantly change the flavor of favorite holiday foods,” says Clement. “Simple flavor boosters like sautéing with lemon or wine, using fresh herbs, using salsas, seasoned vinegars or mustards can make dishes healthy and appealing.”



Find more holiday meal planning ideas at the American Diabetes Association at www.diabetes.org/home.jsp.

Food...	Instead of...	Try...
Sweet Potatoes	Butter, Cream, Marshmallows	Margarine, Orange Juice, Chopped Fruit & Nuts
Mashed Potatoes	Butter, Milk, Cream	Light Margarine, Skim Milk, Broth, Stock, Roasted Garlic
Cooked Vegetables	Butter	Flavored Oils, Vinegar, Lemon
Stuffing	Butter, Eggs Cooked Inside the Turkey	Chopped Vegetables, Chicken or Vegetable Broth, Fruit Juice, Dried Fruit, Chopped Nuts Cooked Separately
Pie Crust	Lard, Butter, Shortening Two-Crust Pies	Omit One Crust, Use Cereal or Crushed Low-Fat Cookies for Topping
Salad Dressing	Cheese, Mayonnaise, Creamy Dressings	Oil & Vinegar-based, or Low-Fat Dressings
Gravy	Fatty Meat Drippings	Remove Fat from Drippings or Use Low Fat or Vegetable Broth with Cornstarch to Thicken

For more information about diabetes education and counseling opportunities at Northwest Hospital, visit the Northwest Hospital website at www.nwhospital.org, call (206) 368-1564 or e-mail diabeteseducation@nwhsea.org. Physician referral is required to register for diabetes classes. Diabetes education is covered by most insurance plans.

Community Classes at Northwest Hospital & Medical Center

November 2006 - March 2007

CHILDBIRTH EDUCATION

Childbirth, Parenting, and New Baby classes are offered in conjunction with Gracewinds Perinatal Services. All classes are held on the Northwest Hospital campus. Please call Gracewinds Perinatal Services at (206) 781-9871 or visit www.gracewindsprenatal.com/nwclasses for scheduling and registration information.

Childbirth Prep Classes

A four-session course that is designed to give expectant parents the tools and information needed during childbirth. This course is also available in a condensed weekend format. Cost: \$105 per couple.

Newborn Care Class

This course is an excellent primer for first time parents, grandparents and baby-sitters. Costs: \$35 per couple.

Infant Safety/CPR

A class designed to give new parents, grandparents and baby-sitters the skills to help prevent accidents, to perform infant CPR and to relieve an obstructed airway. This class does not provide a CPR certification card. Cost: \$35 per couple.

Breast-Feeding Basics

This class is designed to educate parents on proper feeding techniques and positioning. Cost: \$35 per couple.

Conscious Fathering

A class for expectant dads. Taught by an experienced father, this popular class addresses topics and issues associated with fathering. Cost: \$35.

All Inclusive Family Education Package

Purchase all five classes and get one class for free. Cost: \$200.



PRENATAL SERVICES

Baby Your Back

Back pain is a frequent complaint of pregnant women and has many causes. *Baby Your Back* is a two-hour class for expectant mothers taught by a licensed physical therapist. It is offered the second Thursday of each month at Northwest Physical Therapy Services, located in Northwest Hospital & Medical Center's Outpatient Medical Center. Cost: \$10. Call (206) 368-6032 to register. Health-care provider referral required.

WEIGHT LOSS SURGERY EDUCATION

Is Weight Loss Surgery Right For You?

Join us for a free informational seminar to learn more about: weight loss surgery options and risks; patient selection criteria; nutritional requirements; and insurance coverage. Question and answer segment to follow each talk.

“Laparoscopic and Open Gastric Bypass and Laparoscopic Band Surgery,” presented by Joseph Chebli, MD from 6:30 to 8:30 p.m. on January 11 and 24; February 7 and 22; March 8 and 24.

All sessions are held on the Northwest Hospital Campus. Call (206) 368-1350 to reserve your space today. Cost: Free.

EMERGENCY SERVICES EDUCATION

CPR Training

Learn lifesaving skills from Medic II personnel. Offered on the third Tuesday of each month, 7-10 p.m. Registration required. Call (206) 368-1564 for more information. Cost: Free.

DIABETES EDUCATION

Living Well with Diabetes

This program has been formally recognized for excellence by the American Diabetes Association. Participants will gain information and skills to manage diabetes in this four-session series offered monthly. Note: Physician referral is required for class. Day and evening classes available. For more information contact your physician, or call (206) 368-1564 to receive a brochure.



Classes, Lectures, Support Groups and Research Studies

November 2006 - March 2007 (Continued)

CANCER LIFELINE CLASSES AT NORTHWEST HOSPITAL & MEDICAL CENTER

Below is a sampling of the Cancer Lifeline Classes offered on the Northwest Hospital campus.

Call Cancer Lifeline at (206) 297-2500, or visit www.cancerlifeline.org on the web for more information and a full class listing.

Beginning Soaring Crain Qigong

Gentle movements and visualization increase focus, energy and well-being. For continuity, students are asked not to drop-in mid-session.

Wednesdays, January 11 - February 28, 2:30-3:45 p.m.

Gentle Yoga

Enjoy easy stretches, postures and guided meditation. Physician's release is required for those in treatment within the last year. Ask for a release to be faxed to your doctor when you register.

Tuesdays, January 9 - February 27, 6-7:30 p.m.

NEW! Belly Dancing

Stretch and tone your entire body while having fun with the ancient art of belly dance. Physician's release is required for those in treatment within the last year. Ask for a release to be faxed to your doctor when you register.

Tuesdays, January 16 - February 20 9:30-10:30 a.m.

Nutrition and Cancer 101 & 102

Good nutrition is important before and after cancer treatment. In the 101 class, learn the key components of good nutrition, and how the Top Ten Super Foods help speed recovery and may prevent recurrence. Learn nutrition strategies to reduce treatment side effects. Come back for the 102 class, and learn how foods can boost the body's own system to protect cells and fortify its detoxifying capabilities.

101 Class: January 18, 6:30-7:30 p.m.

102 Class: February 15, 6:30-7:30 p.m.



Writing Group for Women

Whether you are writer of poetry, prose or undefined snippets, join us! Women who are undergoing treatment or are up to one year out are invited to drop in. Bring lunch. Tuesdays, January 16 - February 27, 9:30-10:30 a.m.

NEW! Drop in Time

Drop in for a cup of tea! Check out our new library! Or, explore your creative side. We will have art supplies available to choose from. Feel free to bring lunch.

Tuesdays, December 5 - February 27, 1-4 p.m. (no drop-in December 26).

Lung Cancer Support Group

Second and fourth Thursdays: December 14 and 28; January 11 and 25; February 8 and 22, 7-8:30 p.m.

Reclaiming Your Life

Wondering where to go after you have finished cancer treatment? Come to this 8-week group for women who are at least three months past completion of treatment. Intake interview required. Call (206) 297-2500. Wednesdays, January 31 - March 21; 6:30-8:30 p.m.

Breast Cancer Support Group

First and third Wednesdays: December 6 and 20; January 3 and 17; February 7 and 21; March 7 and 21, 4:30-6 p.m.

Brain Cancer Support Group

We welcome people with a primary diagnosis of brain cancer as well as those with metastases. Family and friends are also welcome. Drop-ins welcome!

Second Wednesdays of the month: December 13; January 10; February 14; March 14, 4:30-6 p.m.

Colorectal Cancer Support Group

For survivors, family and friends. Drop-ins welcome!

First Wednesdays of the month: December 6; January 3; February 7 (note: February 7 class will meet at Greenlake Cancer Lifeline location); March 7, 7-8:30 p.m.

Cancer Lifeline Programs and Northwest Hospital are located at Northwest Hospital & Medical Center, Professional Building, Suite 3, 1550 N 115th Street, Seattle, WA.

Rapid Response and Medication Reconciliation Increase Patient Safety

To support its mission and vision of providing the highest quality patient care, Northwest Hospital & Medical Center has created an organization-wide culture of performance improvement and patient safety that helps the hospital achieve the best possible outcomes for its patients.

As an active participant in the “Saving 100,000 Lives” campaign from the Institute of Healthcare Improvements (IHI), Northwest has incorporated a wide variety of measures to make care safer and more effective, including two recent programs – the Rapid Response Team and the Medication Reconciliation Program.

RAPID RESPONSE TEAM

The Rapid Response Team (RRT) is a team of nurses, nursing supervisors, respiratory therapists, and physicians (pharmacists when necessary), that respond to patients whose physical conditions show signs of deterioration. The RRT assists with patient assessment, organizes patient information to communicate to the physician, and starts interventions aimed at decreasing adverse clinical outcomes.

The goal of establishing an RRT at Northwest Hospital was to decrease the number of cardiopulmonary and respiratory arrests, decrease admissions to the intensive care unit from non-critical patient care floors and increase patient survival rates after they have been in unstable conditions.



“The RRT is activated when a patient care employee is concerned that a patient’s status is deteriorating and needs assistance with assessment and treatment,” says Christine Laux, a critical care nurse in the ICU and Special Care Unit, who helped spearhead Northwest’s RRT efforts. According to Laux, the team responds within five minutes, assesses the patient and notifies the attending physician for additional action if necessary.

After establishing the RRT process, the medical staff went through a number of drills to make sure they had the process down and could make it work quickly and efficiently. “Part of making the RRT work was taking a look at how we communicate as a team in the event of patient deterioration and making sure that communication was standardized and clear,” says Laux.

The results of the RRT process have been significant. “By using early RRT activation the team feels that patient problems can be identified before serious physiological changes occur. It has made a huge difference,” says Laux. In fact, in the seven months since the program was launched at Northwest, cardiac and respiratory arrests outside the ER and OR have been reduced by a remarkable 33%.

MEDICATION RECONCILIATION

Medication errors are one of the leading causes of injury and adverse outcomes for hospital patients. Experience from hundreds of organizations has shown that poor communication of medical information is responsible for as many as 50% of all medication errors in the hospital and up to 20% of adverse drug events. To help prevent these incidents, the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) has identified “medication reconciliation” as a national patient safety goal for hospitals.

So what does “medication reconciliation” mean? Simply put, it is a process of obtaining the best known list of a patient’s medication, verifying the list with physicians or pharmacies, and having the information available for clinicians when they write orders during a patient’s admission, transfer or discharge while at the hospital.

Northwest Hospital was the first in the region to establish an electronic database of each inpatient’s medications. It gives every member of the patient’s care team access to information about the medications the patient was taking before coming to the hospital and keeps the list up-to-date as medications are added, changed or removed during the patient’s hospital stay.

“Medication reconciliation is an effective process to reduce errors that the loss of medication information can cause as patients transfer through different levels of care,” says Dr. Gregory Schroedl, Vice President of Medical and Chief Quality Officer for Northwest Hospital.

Help Us Take Good Care of You: List Your Medications Now!

- Make a complete list of all the medications you are taking, including the name of each drug, the dosage, and how often you take it.
- In case of an emergency, if you don’t have time to make a list of your medications before you go to the hospital, put all the bottles or packages in a bag and bring them with you.
- Remember that the list of medications the emergency medical technician in the ambulance writes down may not be complete. Bring your own list or your bag of medications with you, regardless.
- Visit the Patient and Visitor Information area on the Northwest Hospital website at www.nwhospital.org and click on “Admissions” for a handy patient medication record form that you can print out and use to make your medication list.

An Ounce of Prevention - Steps to a Flu-Free Winter

Winter is coming and that means it's flu season again. Influenza, or flu, is a contagious disease caused by a virus that spreads from person to person through coughing or sneezing. Common symptoms include fever, cough, sore throat, headache, chills, muscle aches and fatigue, but flu can also develop into pneumonia, which is very dangerous for those with heart or breathing conditions. Each year, influenza takes the lives of more than 36,000 people in the U.S. and hospitalizes 200,000. Protect yourself and your family from flu this season by taking these few simple steps:

- Cover coughs and sneezes with a tissue and immediately put it in the trash.
- Wash your hands with soap and water after you sneeze or cough; after using the bathroom; before you eat; or before you touch your eyes, mouth or nose. Alcohol-based gels and wipes also kill flu germs.
- Get a flu vaccination.

Who should get a flu vaccination?

Vaccinations can be given to people 6 months or older and should be given to those who are at high risk for complications from flu. Anyone who lives with or cares for others who are at high risk should also get vaccinated to help protect those around them, including seniors and young children.

Who is considered high risk?

- People 65 years of age and older.
- Residents of long-term care facilities housing people with chronic medical conditions.
- People with long-term health problems, including heart, lung or kidney disease; certain muscle or nerve disorders;

asthma; anemia or other blood disorders; and metabolic diseases such as diabetes.

- People with weakened immune systems.
- Pregnant women.
- Children 6 months - 5 years of age.

Do I need to talk to a doctor before

I get a flu shot?

Talk to your doctor if you have any severe or life-threatening allergies, or if you have been diagnosed with Guillain-Barre Syndrome. If you are moderately or severely ill, wait until you recover before getting the vaccine.

Are there any risks to the flu vaccine?

You cannot get the flu from a flu vaccine, as the virus has been inactivated. Serious problems from the vaccine are very rare, but it may cause soreness, redness or swelling at the injection site, as well as fever and aches. Contact your doctor immediately if you have a more severe reaction.

When is the best time to get a flu vaccination?

October – December

Where do I go to get a vaccination?

To find a list of clinics, retail stores and other locations that are providing flu shots, call King County Public Health at (206) 296-4600 or visit their website at www.metrokc.gov/health.

Source: The Centers for Disease Control and Prevention



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