An Update for Lourdes Health System Board Members

June 21, 2015

<u>Special Edition – New York Times Highlights Lourdes Cardiology</u>

Today, *The New York Times* is featuring a story that highlights Lourdes Cardiology and the hard work of our team in saving the lives of heart attack patients.

The story focuses on a specific type of heart attack, called a ST segment elevation myocardial infarction, or STEMI. This type accounts for one-third of all heart attacks and mostly strikes those aged 40-55. It is caused by a prolonged blockage of blood supply in the heart. STEMIs carry a substantial risk of death and disability and require a quick response from all members of the medical team, from first responders in the community to cardiologists at the hospital.



Time is muscle. For years, the healthcare community has realized that reducing the amount of time it takes to get blood flowing to the heart can mean the difference between life and death. *The Times'* story zeroes-in on how hospitals are working to reduce treatment times, and in particular, "door-to-balloon time." This measures how quickly a patient moves from the emergency room to the catheterization lab.

Studies have established door-to-balloon time as a national benchmark. The current goal for hospital performance is 90 minutes or less, according to the American Heart Association and the American College of Cardiology's national guidelines.

Reducing and sustaining a low door-to-balloon time can be challenging. A patient's chance of survival depends on the hospital having a well-coordinated, efficient process.

That's why I am proud to say, at Our Lady of Lourdes Medical Center, our door-to-balloon time is 49 minutes. In 2010, it was 71 minutes.

Our numbers caught the attention of *New York Times* medical reporter Gina Kolata. *The Times'* has an international readership, and this article demonstrates how Lourdes' care of STEMI patients exceeds national standards and serves as a model for others.

The drop in our numbers is a reflection of the hard work of our teams – including all members of Lourdes Cardiology, CT surgery, Emergency Department, EMS, Cath Lab, PCU, and Radiology.

Carol Lynn Daly, Director of Marketing did a tremendous job guiding the reporter and the process. I'd also like to thank Security, Patient Access, and Environmental Services. *The Times* contacted Lourdes in March and Ms. Kolata was working on the story up until this past week. Each of these departments made sure to give Ms. Kolata and *The Times'* photographers the best Lourdes has to offer, as well as the



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access needed to write an article and get photos that aptly illustrate how we care for our STEMI patients.

A very special thanks goes to Lourdes Cardiology's Dr. Reginald Blaber and Dr. Thierry Momplasir, as well as the ED's Dr. Al Sacchetti, who were all interviewed for the story. A number of Dr. Momplasir's patients were photographed and interviewed as well, including a woman named Yvette Samuels. Dr. Blaber went out of his way to provide access to the reporter.

Ms. Samuels shared with *The Times* writer that she was told by paramedics that her best chance of survival was to be brought to Lourdes for treatment. Ms. Samuel's story is so impactful that it seems she will lead *The Times* article.



At Lourdes, we know we have a strong team, working day in and day out to provide outstanding care to our patients. But to have our patients speak to that outstanding care, and to have *The New York Times* recognize not only what the data says, but the compassionate care for which our hospital is built upon, lends credibility and puts Lourdes Cardiology on the map – where it deserves to be.

The Sunday NY Times paper version is read by 2.1 million people nationwide. The on-line version has 54 million unique visitors monthly. The advertising value of one page in the New York Times is \$200,000. The front page value is to be determined, but will be unprecedented. For the on-line version of the article, go to:

http://www.nytimes.com/2015/06/21/health/saving-heart-attack-victims-stat.html? r=1

The timing of the article is very fortuitous for Lourdes. This week Lourdes is fighting legislation, known as S-2980/A-4526, which was released by the Senate committee by a 5-3 margin, with one abstention, would fundamentally focus on Camden, where Cooper University Health Care could get authority over advanced life support (ALS), or paramedic, services. The proposed bill would extricate these services from Virtua, the health system that has provided ALS coverage in Camden for almost four decades. Our position is that there is no need to change the current system for advanced life support in the City of Camden. Residents are getting nationally renowned cardiac care at Lourdes, and most of the time sensitive transports in the City are for cardiac care and stroke. Moreover, our cost of care is the lowest in the region (see attached report card). In addition, Virtua is providing the service at no cost to the tax payers and they operate the service at a \$1.5 M loss in the City.

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