Heart Care Plus+
WakeMed & Duke Health Collaborate

Code STEMI
Why WakeMed Is the Best Place for Heart Attack Care
Spider veins? Varicose veins? Peripheral vascular disease? WakeMed Cary Hospital now offers the expertise and technology to treat vascular disease – blockages in the veins and arteries mostly in the lower extremities. According to the National Heart, Lung and Blood Institute, peripheral artery disease (PAD) – where arteries are blocked by fatty build-up in the inner artery walls – affects one in 20 Americans over the age of 50 and increases the risk for heart attack or stroke. Having the resources to effectively diagnose and treat PAD and other peripheral vascular diseases at Cary Hospital greatly enhances the health of citizens in our community. For information about the vascular services available at WakeMed Cary Hospital, please visit our website at www.wakemed.org/hearts.
Welcome New Cardiologist to WakeMed Heart Center

Dr. Madeeha Saeed Joins Cary Cardiology

Madeeha Saeed, MD, FACC, recently joined Cary Cardiology PA. She is certified by the American Board of Internal Medicine in Internal Medicine and Cardiovascular Diseases, the National Board of Echocardiography, the American Society of Nuclear Cardiology and the American Registry for Diagnostic Medical Sonography for Vascular Interpretation. She specializes in all aspects of cardiovascular disease including coronary artery disease, peripheral vascular disease and interventional cardiology.

She earned her medical degree from Texas A&M Health Sciences Center College of Medicine and completed her internal medicine residency at the Baylor College of Medicine. In addition, Dr. Saeed completed a fellowship in cardiovascular diseases at Albert Einstein Beth Israel Medical Center and an interventional cardiology fellowship at Mount Sinai Beth Israel Medical Center in Manhattan. Dr. Saeed welcomes new patients at the Cary and Fuquay-Varina offices of Cary Cardiology, PA.

WakeMed Heart & Vascular Physicians Welcomes Dr. Solomon

Dr. Hemant Solomon joined WakeMed Heart & Vascular Physicians and sees patients in their new Apex office. Dr. Solomon is an invasive cardiologist with special interests in vascular and venous disease diagnosis and management. He performs diagnostic cardiac and peripheral catheterizations, implants pacemakers, defibrillators and biventricular pacemakers; conducts nuclear stress tests and transthoracic and transesophageal echocardiography.

Originally from England, Dr. Solomon attended medical school at King’s College Hospital, University of London, UK. He is certified by the American Board of Internal Medicine, the American College of Cardiology, the American Society of Nuclear Cardiology, and he is a Registered Physician of Vascular Interpretation. He also holds Educational Commission for Foreign Medical Graduates certification.

He is married, has three boys and lives in Cary, NC. In his spare time, he enjoys flying, swimming, running and cycling.

WakeMed Heart & Vascular Physicians Opens New Office In Apex

Dr. Hemant Solomon and Dr. Richard Daw of WakeMed Heart & Vascular Physicians have a new office to see their patients in Apex, NC. The new WakeMed Heart & Vascular Physicians – Apex office opened in February and is located on the second floor of the WakeMed Apex Healthplex at 120 Healthplex Way, Suite 210 (located at the corner of NC Hwy 55 and Apex Peakway). Phone number for the office is 919-232-0322. The Apex office is the second location in western Wake County as WMH&V Physicians’ have an office in Cary at 600 New Waverly Place, Suite 201. For more information about these offices or other office locations, please visit www.wakemed.org/hearts.
WakeMed Health & Hospitals and Duke Health have signed a joint operating agreement to work together to deliver highly-coordinated cardiovascular care with a broader scope of services that is a greater value and affordable for patients.

Beginning March 1, the combined services for heart and vascular care will be known as Heart Care Plus+. Teams from both WakeMed and Duke are working together to create a transition plan and identify opportunities to improve services and processes to better serve heart patients.

This collaboration is not a merger between the two organizations. Duke Health and WakeMed will continue to operate independently apart from the collaboration and maintain their own identities.

As the trusted, provider of heart care in Wake County for more than 50 years, WakeMed will continue to offer high-quality services to patients at the WakeMed Heart Center, WakeMed Cary Hospital and its network of convenient physician practice locations. The WakeMed Heart Center staff you have known and had care for you will continue to be employed as WakeMed employees. Current WakeMed cardiology patients will not experience any immediate changes in the way they access their cardiologist or practice staff. If you need an appointment, please call your cardiologist’s office and request to see your physician.

With the addition of Duke, an even broader scope of care with additional specialty and sub-specialty services can be offered in Wake County. Duke University Hospital in Durham will be available should a patient need highly complex surgical interventions (i.e. transplantation) that require its advanced surgical technologies and capabilities.

Duke and WakeMed announced in June 2014 an agreed-upon framework to explore and evaluate potential opportunities for clinical collaboration while each maintaining their independence. Over time, the health systems determined that collaborating in hearts, and cancer care, would enhance the scope, quality and value of care in ways that neither Duke nor WakeMed could achieve alone, and without the need for costly new construction or infrastructure.

“As this is a very exciting and important development that we believe will further enhance patient care in Wake County,” explains Donald Gintzig, WakeMed president & CEO. “As health systems continue to focus on improving the care and value we deliver to our patients, working together can help us all achieve greater coordination of care and clinical quality. As leaders in our respective areas of expertise, both Duke and WakeMed have the opportunity to learn a great deal from one another – all in the best interest of our patients and the care we deliver together.”
When a hospital has ‘door-to-treatment’ times better than state and national averages, you know you are at the right place when a heart attack strikes. In the Triangle, that hospital is WakeMed and current statistics prove it:

**Median Time from Arrival at the Hospital to Primary Percutaneous Coronary Intervention (PPCI – a treatment for heart attack)**

**3RD QUARTER, 2016**

**WakeMed Average**

41.5 minutes

**State Average**

44 minutes

**National Average**

55 minutes

“Exceptional people and an exceptional Code STEMI protocol are the major reasons why the WakeMed Heart Center is the best place to go for heart attack,” says John Sinden, MD, a long-time interventional cardiologist with WakeMed. STEMI stands for ST-elevation myocardial infarction, which is a type of heart attack. Code STEMI is the emergency protocol that is activated when a person is having a heart attack.

It’s ‘all hands on deck’ when the Code STEMI call goes out. Madeeha Saeed, MD, an interventional cardiologist with Cary Cardiology, PA, who is new to WakeMed’s Code STEMI team, is impressed with our protocol and response. "It is great to be part of a well oiled machine that handles STEMIs in an efficient manner here at WakeMed. When all members of the team do what they are supposed to do, it helps eliminate delays in every aspect of a STEMI, from recognition to revascularization. The review committee identifies any delays and feedback is provided to the appropriate party. The final product is truly the sum of all its parts."

While Dr. Saeed is a newcomer to the WakeMed brand of heart attack response, the Code STEMI protocol has been a part of WakeMed’s DNA for more than a decade.

“We pioneered the Code STEMI emergency response for heart attack patients to ensure people in our community get the critical treatment they need as fast as possible,” says Dr. Sinden. “Speed is critical for heart attack patients,” explains John Kelley, MD, one of Dr. Sinden’s colleagues in interventional cardiology with WakeMed Heart & Vascular Physicians and the WakeMed Heart Center. “The faster we can open a blocked artery and restore blood flow, the less damage there is to the heart.”

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**The critical role of EMS in saving heart attack patients**

Call 911. It is the right thing to do if you or someone you are with is having heart attack symptoms. Emergency medical services (EMS) providers in the Wake County and surrounding area are among the best in the nation. When called, they arrive quickly and perform an electrocardiogram (EKG) within 10 minutes. If they recognize a heart attack, they transmit the patient’s EKG data to WakeMed, activating the hospital’s Code STEMI team to prepare the catheterization lab where the procedure to open the patient’s blocked artery will take place.

“Our program continues to stay strong because of our team and teamwork,” says Jeannie Moore, MSL, CCRN, NE-BC, director, WakeMed Heart Center operations. “The collaboration between EMS and our hospital has been tremendous with everyone focused on providing timely, guidelines-based care to the patients we serve.”
My! How times change. Back in the 1930s, patients who suffered a heart attack were put on six weeks of bed rest to recuperate. Throughout the years, research has proven that cardiac rehabilitation – a structured program of physical activity and education – is an effective way to get patients who have had heart attacks and heart procedures, as well as those who suffer from angina and heart failure, back on their feet and living life.

This year, WakeMed Cardiac Rehabilitation celebrates 30 years of helping heart patients restore their health. The growth of the program is a testament to its positive impact. “When we began the program in 1987, we had one class of 24 patients that met three times a week for 12 weeks,” recalls Terry Davis, MSN, RN, WakeMed Cardiac Rehabilitation. “Now, we have four classes and see about 60 patients a day. For the majority of patients who have never exercised regularly, they are amazed at how good they feel after 12 weeks of consistent exercise. Often, they will comment that they haven’t felt this good in 10 years.”

After the first WakeMed Cardiac Rehabilitation class “graduated” from the program, many participants asked, “What’s next?”. They wanted to continue to exercise in a structured environment with the friends they had made in cardiac rehab. The WakeMed Cardiac Rehab team then created Safeway to Fitness. Like cardiac rehab, Safeway to Fitness is structured. Classes meet three times a week for an hour. There is a group warm up and then participants exercise on their own, with the comfort of knowing that they are being monitored by exercise physiologists. “Safeway to Fitness also allows patients’ spouses to exercise along with them,” adds Davis.

It’s important to note that WakeMed Cardiac Rehab and Safeway to Fitness continue to offer patients benefits beyond heart health. “The camaraderie that builds among participants is priceless,” says Davis. “They develop lifelong friendships and support each other through life’s crises. I love being a part of it.”

Congratulations to the WakeMed Cardiac Rehabilitation team for 30 years of excellence!
23 Years and Counting...

“I was there to support my husband.” It was the early 1990s when Helene Fragnito joined her husband, Edward, as a member of the then-new WakeMed Cardiac Rehabilitation program. Helen and Edward used to enjoy walking but they had to stop. “Edward started to get chest pains when we were walking,” explains Helene. Edward was diagnosed with a cardiac issue and cardiac rehab was recommended for him.

Like some of the other patients’ spouses, Helene joined WakeMed’s Safeway to Fitness program as a way to support her husband’s heart-healthy efforts. Once he graduated from WakeMed Cardiac Rehab, Edward joined Safeway to Fitness as well and the couple remained dedicated to the program.

Though Edward passed away in 2012, Helene continued to venture to the WakeMed Raleigh Campus three times a week to exercise with her Safeway to Fitness friends and enjoy social time with them afterwards.

Today, at age 96, Helene is still a dedicated WakeMed Safeway to Fitness member. She also bowls once a week with a league and enjoys her many grandchildren and great grandchildren. Helene credits exercise for her ability to stay active. “It keeps me young,” she says.

HEART TO HEART

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Code STEMI Activation

“The Code STEMI protocol is very much a community-wide effort,” says Chantal Howard, MSN, RN, CEN, director, WakeMed Emergency Services. “In fact, EMS involvement is crucial.” Code STEMI often begins “in the field” – at a person’s home, the mall, the grocery store – anywhere in the community. Or it may begin in the Emergency Department when a person who is experiencing heart attack symptoms is brought in by a friend or family member.

As soon as WakeMed receives word that a person is experiencing a heart attack, all Code STEMI team members are alerted with a single call. “Code STEMI” and the estimated time of the patient’s arrival are also announced overhead throughout the hospital. In addition to EMS providers from the community, Code STEMI team members include an ED physician, an interventional cardiologist, ED and Critical Care nurses, a cardiology physician assistant, a respiratory therapist, a clinical administrator and the team in the catheterization lab. “Each team member has a specific role and mobilizes when they receive the Code STEMI call,” says Howard. Some are charged with analyzing EKG results sent to the WakeMed ED by EMS, some prepare the catheterization lab, and others await the patient’s arrival to continue life-saving care.

Treatment to open the blocked arteries – the cause of the heart attack – occurs in the catheterization lab. “The fact that WakeMed has a cath lab team onsite 24 hours a day, seven days a week is a major contributor to our success in treating heart attack patients,” says Brian Go, MD, an interventional cardiologist with WakeMed Heart & Vascular Physicians.

WakeMed is the only hospital in the Triangle that has a cath lab team standing at the ready 24/7 to treat heart attack patients. In fact, there is only one other hospital in the state that has a cath lab team onsite all day, every day.

The technique used by interventional cardiologists to perform angioplasty – the procedure most often used to open blocked cardiac arteries – has also changed over the years, to the benefit of patients.

“We can now reach a blockage through the radial artery in the wrist rather than the femoral artery in the groin,” explains Dr. Kelley. According to a study in the Journal of the American College of Cardiology, “In patients undergoing angioplasty…transradial treatment is associated with decreased 2-year mortality (death) rates and a reduction in the need for vascular surgery and/or blood transfusion compared with transfemoral intervention.”

Saving lives. Prolonging lives. Many thanks to Code STEMI team members at WakeMed and to our EMS partners throughout the community for their steadfast commitment to caring for heart attack patients. It’s a comfort knowing that heart care excellence is available in our community.

*Information obtained from Q3 2016 NCDR™ ACTION Registry®-GWTG™ Mission Lifeline Receiving Center report.
Exceptional people. Exceptional care. For every heart.