



PRESS RELEASE

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New emergency response system speeds care for heart attacks or strokes

Quincy Valley Medical Center is categorized as a Level II Cardiac Center for participation in the new Washington State Emergency Cardiac and Stroke System (ECS System)

OLYMPIA- Reducing the time it takes for people having a heart attack or a stroke to get medical care is the goal of Washington's new Emergency Cardiac and Stroke System (ECS System). The system, being launched in phases across the state, is modeled on our state's trauma system.

"Each minute is critical to get the right treatment for stroke, heart attack, and cardiac arrest," said Secretary of Health Mary Selecky. "The new system speeds up access to life-saving treatment."

The Department of Health is working with Emergency Medical Services (EMS) to identify when each county is ready to use the new system. To be ready, hospitals that want to participate must be designated as stroke and/or cardiac centers, and EMS providers must be trained on new procedures for assessing, treating, and determining the appropriate hospital for their patients. In the past year, 73 of 91 hospitals have been categorized as cardiac centers, stroke centers, or both. Many EMS providers have already been trained on the new procedures, and several counties are now up and running with the new system.

Effective August 1, 2011, Quincy Valley Medical Center was categorized as a Level II Cardiac Center for the participation in the new ECS System. Dr. Fernando Dietsch, Emergency Room Director at QVMC, stated this system should improve the long-term health outcomes for patients in dire need of treatment for heart attacks and strokes. "Quincy should be proud to have a hospital that is part of the State's [ECS] System. Minutes matter in the case of a heart attack or stroke and our Emergency Room staff are trained and prepared to treat patients in these areas."

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People get emergency care for heart problems and stroke in all counties now, but the new system will improve that care by speeding up the process. Patients will be sent directly to the best facility for their condition. Faster treatment can significantly reduce the risk of death and disability. Time is of the essence.

“The goal of the new system is to get the right patient to the right hospital in the right amount of time,” said Dr. Kathleen Jobe, University of Washington Medical Center’s Emergency Department and chair of the state’s Emergency Cardiac and Stroke Technical Advisory Committee. “We need a well-coordinated system to make that happen.”

Together, heart disease and stroke are the leading causes of death in Washington. Many people who have experienced a heart attack, cardiac arrest, or stroke died or became disabled because they didn’t get the appropriate treatment in time. Less than half of all people who have a heart attack receive the most effective heart attack treatment. And, like most of the nation, cardiac arrest survival rates are very low in Washington.

Last year the state passed a law to create a formal cardiac and stroke system to improve our ability to get people to life-saving treatment in time. This new system is especially important to our state’s rural communities. When compared to urban areas they have fewer resources and specialists, such as cardiologists and neurologists. They also have fewer paramedics qualified to do electrocardiograms in the field. Electrocardiograms help paramedics diagnose heart attack before getting to the hospital, so the hospital cardiac team can meet the patient upon arrival in the emergency department.

Without this new system, heart attack and stroke patients are often transported to the closest hospital and often transferred to another hospital with specialized care. With the new system, standard guidelines for EMS call for patients to be taken directly to a hospital that can provide specialized care. If there isn’t one close by, patients will be rapidly assessed by the local hospital and transferred immediately to the treating hospital.

The public can help by being familiar with heart attack and stroke symptoms and calling 9-1-1 immediately when they experience these symptoms. Learning to do CPR (cardiopulmonary resuscitation) can also make a difference.

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