



MRMC



Munroe Heart

Munroe Regional
Medical Center

2010

R E P O R T



Welcome

In February of 1988, Munroe Regional Medical Center launched the first heart and vascular program in the region. Twenty three years later, the medical center's Munroe Heart program is the leading provider of heart care in our region and is recognized nationally as one of the premier heart and vascular programs in the country. The depths of services offered through the Munroe Heart program include general cardiology, interventional cardiology, cardiac electrophysiology, cardiovascular surgery and pulmonary care, all supported by a comprehensive cardiac rehabilitation and wellness program. Having these comprehensive services available to our region allows residents to receive world class care close to home.

Munroe Heart's commitment to excellence has resulted in the medical center receiving numerous national accolades and awards, which are highlighted on the back cover of this publication. One reason why Munroe Heart has been so successful is because our renowned heart and vascular surgeons, interventional cardiologists, cardiac electrophysiologist, cardiovascular anesthesiologists and care team of 275 highly-skilled, compassionate associates work exclusively at Munroe Regional.

They have worked together so well, for so long, which means that they can focus on the most important member of the team — you.

In addition to our own team, Munroe Heart is privileged to work in partnership with 28 dedicated community cardiologists. We would like to applaud both our Munroe Heart team and our community cardiologists as we recognize February as American Heart Month.

Thank you for taking the time to learn more about Munroe Regional's distinguished Munroe Heart program.

To your good health,



Stephen A. Purves, FACHE
President & CEO
Munroe Regional Medical Center



Pamela W. Michell, R.N.
Vice President, Chief Nursing Officer
Munroe Regional Medical Center



Meet the Munroe Heart team

Munroe Heart's team of cardiothoracic surgeons, interventional cardiologists, cardiac anesthesiologists and cardiac electrophysiologist have demonstrated success in providing the highest quality heart and vascular care to our region, in a compassionate and caring manner.

Munroe Heart's physicians and surgeons work closely with community cardiologists so that patients receive the best options for their care. No technology or advanced procedure can replace experience and training.

However, combining the latest technology and innovation with the region's most experienced physicians and surgeons has resulted in Munroe Heart being nationally recognized for medical excellence in cardiac care.

Cardiothoracic Surgeons



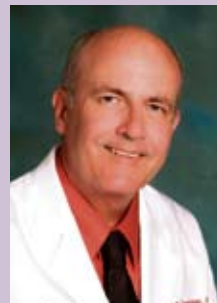
Dr. Craig Kuykendall
Cardiothoracic Surgeon



Dr. Peter Chung
Cardiothoracic Surgeon



Dr. John Galat
Cardiothoracic Surgeon



Dr. David Lammermeier
Cardiothoracic Surgeon

Cardiac Electrophysiologist



Dr. Celso Acevedo
Cardiac Electrophysiologist

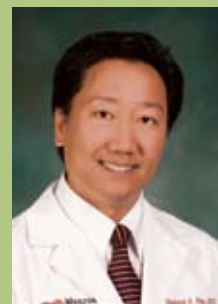
Interventional Cardiologists



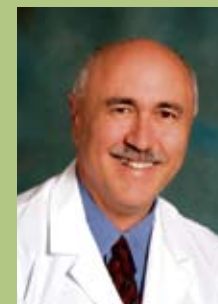
Dr. Robert Feldman
Interventional Cardiologist



Dr. John Bittl
Interventional Cardiologist



Dr. Richard Han
Interventional Cardiologist



Dr. Edward Santoian
Interventional Cardiologist



Dr. Gregory von Mering
Interventional Cardiologist

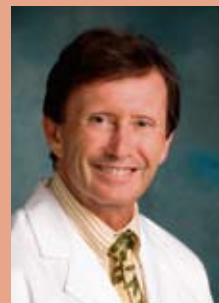
Cardiac Anesthesiologists



Dr. Lawrence Harrison
Cardiac Anesthesiologist



Dr. Vincent Palmire
Cardiac Anesthesiologist



Dr. Paul Robertie
Cardiac Anesthesiologist



Dr. S. Michael Mikowski
Cardiac Anesthesiologist



Dr. Tyson Ulmer
Cardiac Anesthesiologist



Dr. Mikhail Deputat
Cardiac Anesthesiologist

Interventional Cardiology



Dr. Gregory von Mering



Dr. Richard Han

Munroe Heart's five experienced interventional cardiologists work in four dedicated cardiac catheterization labs, including two new labs, which opened in July 2009 and January 2011 respectively. Each interventional cardiologist is board certified in interventional cardiology and brings a unique specialization to the Munroe Heart team. These specializations allow Munroe to stay on the cutting edge of technology and innovation, allowing Munroe Heart to bring new procedures, medications, and treatments to the region.

Munroe Heart participating in National Coronary Clinical Device Trial

Munroe Heart was one of 14 hospitals in the United States, and one of only two in Florida, approved to participate in a national clinical trial of a device that sands away calcified coronary artery plaque. Known as the ORBIT II Trial, it is an Investigational Device Exemption (IDE) clinical trial to evaluate the safety and effectiveness of the Diamondback 360° Coronary System in treating calcified coronary arteries.



Coronary artery disease (CAD) is the most common form of heart disease in the U.S., affecting more than 16 million people. Patients with severely calcified CAD may benefit from treatment with the Diamondback 360°. Removing the hardened plaque may make it safer and easier for the physician to place a stent and thus restore blood flow to the heart. In some patients, this treatment may take the place of heart bypass surgery, or an open-heart procedure.



Dr. Robert Feldman

Coronary Intravascular Ultrasound (IVUS)

Munroe Heart's interventional cardiologists are using coronary intravascular ultrasound (IVUS) as another diagnostic tool to diagnose blockage in the heart vessels. The primary benefit of IVUS is that it offers a tomographic, 360° view of the arterial wall from the inside, which allows for a more complete and accurate assessment of the blood vessels in the heart. By combining technology through angioplasty and IVUS, Munroe Heart's interventional cardiologists can more accurately diagnose and treat patients with heart and vascular disease.

Fractional Flow Reserve

Another innovative procedure being performed in Munroe Heart's cardiac catheterization labs is fractional flow reserve (FFR). FFR, is a guide wire-based procedure that can accurately measure blood pressure and flow through a specific part of the coronary artery. The measurement of FFR is useful in determining whether or not to perform an angioplasty or insert a stent on intermediate blockages.

Vascular Care

Munroe Heart's team of interventional cardiologists use the latest technology and most advanced care techniques when treating vascular disease. The Munroe Heart team can help patients with aneurysms, complications of diabetes, renal artery disease, peripheral vascular disease and other vascular problems. Using a hybrid approach in treating patients with endovascular abdominal aortic aneurysms, Munroe Heart combines the talents and expertise of their interventional cardiologists and cardiothoracic surgeons in the operating room. The ultimate purpose of the hybrid approach is to provide the best and safest care to our patients with complex vascular conditions, while minimizing the total number of procedures or interventions they may require.

Dr. Robert Feldman: *On cardiac catheterization*

“With a cardiac catheterization, we insert a small, hollow tube (called a catheter), into an artery or vein, and then guide it into the heart. We next inject a special dye (called a contrast) through the catheter to outline the arteries and to show any blockages or narrowing. Cardiac catheterization is an incredibly useful tool in helping your doctor discover whether you have Coronary Artery Disease so that he can then help you decide on a treatment plan. Bottom line: Cardiac Catheterization can be a real lifesaver.”

— ROBERT FELDMAN, M.D., CARDIAC CATHETERIZATION LABORATORY MEDICAL DIRECTOR, MUNROE HEART



Cardiothoracic Surgery

Munroe Heart's four cardiothoracic surgeons have over 100 years of combined experience and have performed over 25,000 open-heart procedures. These surgeons have spent over 20 years in Ocala, Marion County and were the founding members of the Ocala Heart Institute.

Incorporating technology and innovation into the four cardiothoracic operating rooms at Munroe Heart means that patients can now benefit from less invasive surgery and highly accurate imaging procedures, which means better outcomes and a quicker recovery. Some examples of new technology in cardiothoracic surgery include:

3-D Echocardiography

Every surgical patient at Munroe Heart has a 3-D electrocardiogram performed prior to surgery. Also known as a cardiac ultrasound, the electrocardiogram uses ultrasound techniques to produce 3-D images of the heart in real-time, which allows surgeons to assess the valves of the heart and diagnose any abnormal functions or leakage of blood into the valves. If the assessment reveals an abnormality the valve can be repaired at the same time, which means a patient would not have to have an open procedure immediately following the regularly scheduled surgery.

Video-Assisted Thoracoscopic Surgery

Video-Assisted Thoracoscopic Surgery (VATS) is a minimally invasive surgical technique used to diagnose and treat problems in a patient's chest. Much less invasive than traditional approaches, during surgery, a tiny camera and

surgical instruments are inserted in the chest through small incisions. The camera transmits images of the inside of the chest to a video monitor, guiding the surgeon during the procedure. VATS can be used for multiple purposes during surgery, which include: biopsy, the removal of tumors or entire lobes of the lung. This innovative, minimally invasive surgical technique can also be more accurate than traditional options and can result in a faster recovery for patients.

Endovascular Vein Harvesting

The goal of heart bypass surgery is to detour blood around a blockage in a coronary artery. To create the detour, the cardiothoracic surgeon must use a segment of a blood vessel that is taken from another part of the body. The segment is usually taken either from the Internal Mammary Artery from the chest, or the saphenous vein from the leg.

At Munroe Heart, the cardiothoracic surgeon uses endovascular vein harvesting when taking a segment from the saphenous vein. Before this procedure was available the surgeon would have to create a long incision down the leg of the patient to obtain the segment. Endovascular vein harvesting does not require a long incision down the length of the leg in order to remove the saphenous vein. Instead, it only requires only a few small incisions in the leg to remove the vein, with the aid of a special endoscope. Patients undergoing this minimally invasive technique not only avoid a long scar along their leg, but they are also significantly less likely to experience wound complications, swelling, leg pain or another surgery – events that can lengthen hospital stay or require re-admission. This is particularly true for patients at otherwise greater risk for leg wound complications, such as those having diabetes or peripheral vascular disease. Patients can therefore have a shorter recovery time and be back on their feet sooner than with traditional vein harvesting.



Dr. Peter Chung



Dr. Craig Kuykendall: *On Cardiac Surgery*

“At Munroe Heart, we utilize the most up-to-date technology, technique and experience to help many people live longer, more fulfilling lives. What was not possible even ten years ago is now commonplace. There is no substitute for experience, though. We’re able to deliver heart outcomes that rival the best in the nation because we are devoted to a practice method called ‘quality through evidence-based care’—developing care models based on the best available research and proven practice methods. The results speak for themselves, and our patients are much better off.”

—CRAIG KUYKENDALL, M.D., CARDIOTHORACIC SURGEON, MUNROE HEART



Dr. Gregory von Mering



Chest Pain Accreditation



**Gwen Howard, R.N.
and Jiena Deeb, R.N.**

In March 2010, Munroe Regional received Chest Pain Center Accreditation with PCI (percutaneous coronary intervention) from the Society of Chest Pain Centers. Munroe Regional was the first hospital in Marion, Lake, Sumter and Citrus Counties to have received this distinction.

Munroe Regional's Chest Pain Center provides state-of-the-art heart care by working seamlessly with local emergency services personnel, the emergency department and emergency room physicians, cardiac catheterization labs and interventional cardiologists, as well as other hospital departments to ensure that patients get the necessary treatments in a timely and efficient manner during the critical early stages of a heart attack.

The Chest Pain Center's protocol driven and systematic approach to patient management allows physicians to reduce time to treatment during the critical early stages of a heart attack, when treatments are most effective, and to better monitor patients when it is not clear whether they are having a coronary event. Such observation helps ensure that a patient is neither sent home too early nor needlessly admitted.

"Receiving Chest Pain Accreditation was a tremendous accomplishment for Munroe Regional and a great benefit to the communities and patients we serve," said Pam Michell, Vice President and Chief Nursing Officer at Munroe Regional.

"This distinguished recognition is a result of the hard work of many individuals and departments throughout our organization, as well as our partnerships with our local emergency services personnel. Everyone joined together to implement the necessary protocols to ensure our patients receive the best care available, in a timely manner."



**Kaelen Templeton, R.N.
and Melissa Lozano, R.N.**

Dr. John Bittl: *On door-to-balloon times*

"Minutes always matter when it's a heart attack. In a STEMI, which is a type of heart attack, the coronary artery is completely blocked by a blood clot, and the heart muscle supplied by the affected artery begins to die. The faster the blocked artery can be re-opened, the better. That time, from when a patient arrives at the emergency room to when the blocked artery is re-opened, is called 'door-to-balloon time,' and faster is better."

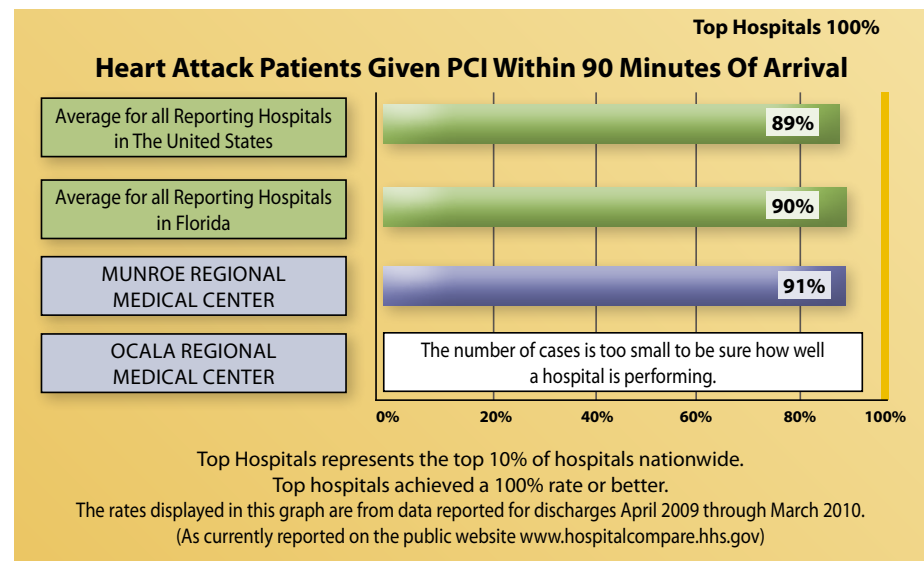
—JOHN BITTL, M.D., INTERVENTIONAL CARDIOLOGIST, MUNROE HEART, MEMBER OF THE AMERICAN HEART ASSOCIATION AND AMERICAN COLLEGE OF CARDIOLOGY'S WRITING COMMITTEE FOR PERCUTANEOUS CORONARY INTERVENTION (PCI) AND CORONARY ARTERY BYPASS GRAFT SURGERY (CABG) GUIDELINES

The Chest Pain Center at Munroe Regional has demonstrated its expertise and commitment to quality patient care by meeting or exceeding a wide set of stringent criteria and completing on-site evaluations by a review team from the Society of Chest Pain Centers. Key areas in which a Chest Pain Center must demonstrate expertise include:

- Integrating the emergency department with the local emergency medical system.
- Assessing, diagnosing, and treating patients quickly.
- Effectively treating patients with low risk for acute coronary syndrome and no assignable cause for their symptoms.
- Continually seeking to improve processes and procedures.
- Ensuring Chest Pain Center personnel competency and training.
- Maintaining organizational structure and commitment.
- Having a functional design that promotes optimal patient care.
- Supporting community outreach programs that educate the public to promptly seek medical care if they display symptoms of a possible heart attack.

The most current data as reported in the National Cardiovascular Data Registry, published on October 13, 2010, show that 97% of patients at Munroe Regional with a heart attack are treated within the recommended 90 minutes of arrival guideline, whereas the national average is 88% of patients. Munroe Regional's current average time to treatment is 48 minutes and the fastest door-to-balloon time to date is 20 minutes.

"What this means to our community is that Munroe Regional has been officially recognized as a best practice hospital that is truly dedicated to providing our patients with the best heart care treatment available in our nation today," said Steve Purves, President & CEO at Munroe Regional. "And, when it comes to a heart attack, this accreditation tells our community that they can trust us to provide reduced time to treatment, a timely accurate diagnosis, better treatment and a better outcome that ultimately leads to a better quality of life for our patients."



MY STORY: DAVID MCCLAIN

"I told EMS, Take me to Munroe Regional."

— DAVID MC CLAIN, SERGEANT, MARION COUNTY SHERIFF'S DEPARTMENT, OCALA, FL

David McClain didn't know it was a heart attack—and a major one, at that. He just knew that something wasn't right after his regular workout. As a sergeant with the Marion County Sheriff's Department, though, David knew to call 911 and to get to Munroe Regional. ASAP. And that's what saved his life.



Munroe Regional has been rated one of the top 100 hospitals in the nation, top 10% in the nation, top 10% in the state and #1 in our market for medical excellence and patient safety in cardiac care in 2010 by The Delta Group, the nation's largest privately held healthcare information services company.



Munroe Regional Medical Center is the first Accredited Chest Pain Center in Marion, Lake, Sumter and Citrus Counties.

EMS was transmitting David's vitals on the way, and the Munroe Regional team was waiting for him when the ambulance pulled up. Not only was one of David's arteries 100% blocked, he was having a major heart attack. And every second counted. With a quick "I love you" to his wife of 31 years, David was rushed into Munroe Regional's catheterization lab where the doctors opened his completely blocked artery in just 20 minutes from the time he arrived at Munroe Regional's Emergency Department—incredible, considering the national benchmark is 90 minutes.

Seeing David back in his patrol car just five weeks after his heart attack, an EMS Lieutenant asked, "Are you back to work already? That's some sort of record recovery."

Maybe so, but David thinks his wife put it best: "Calling 911 and getting to Munroe Regional like you did are two of the smartest things you've ever done."

When it's your heart, second best is not an option. Just ask David McClain or his wife, Dodie.

To learn more about door-to-balloon times, visit www.MunroeRegional.com/heart.



Munroe Heart

Munroe Regional Medical Center

Ocala, FL



Cardiac Electrophysiology

In January 2010, in an effort to expand Munroe Heart's award winning heart program and to meet the needs of the surrounding communities, Munroe Heart added a cardiac electrophysiology (EP) program, which focuses solely on the electrical system of the heart. Munroe's state-of-the-art EP lab serves patients with complex cardiac rhythm disturbances (rapid heartbeat) including atrial fibrillation and ventricular tachycardia ablations.

In December 2009, Munroe Heart announced the addition of cardiac electrophysiologist Celso Acevedo, M.D. to its team. Dr. Acevedo joined Munroe Heart from Cardiology Associates of Fort Lauderdale.

The EP Lab

While EP may be the fastest growing of all the cardiovascular disciplines, it is often characterized by crowded and cluttered labs. Tedious procedures are made even longer by repositioning equipment, walking to the control room and working with dissimilar systems. To ease the functionality and enhance the capabilities of the EP Lab, Munroe installed a cutting edge electrophysiology lab, in fact, Munroe's lab was the fourth lab opened in the United States featuring this innovative technology. The lab was designed for complex electrophysiology procedures such as ablations and EP studies.

Munroe Heart's EP lab is equipped with the Philips EP cockpit. The EP cockpit creates a comfortable working environment by integrating data management

throughout the heart rhythm care cycles, and enables new complex therapies. The EP cockpit organizes all equipment on one movable ceiling mounted rack to reduce clutter. This allows Dr. Acevedo to operate all equipment in the EP lab from a single location, which increases efficiency and enhances quality care. In addition, instead of having to navigate through several monitors, the EP cockpit is equipped with one 56-inch high resolution LCD display that accepts up to eight sources simultaneously and can resize and enlarge information at any time and position on the screen, while maintaining full sharpness.

The lab also features St. Jude Medical's EnSite Velocity™ Cardiac Mapping System. The Velocity System enables Dr. Acevedo to simultaneously create a detailed 3-D cardiac model and electrical map using multiple catheters and electrodes, which allow him to collect and display more relevant patient information in a shorter amount of time. The Velocity System also provides real-time, side-by-side views of the live procedure and previously recorded portions of the procedure, giving him a quick and easy comparison of events and results at different times throughout the procedure, without losing the ability to visualize and navigate catheters in real-time.

The purpose of Munroe Heart's innovative, technologically advanced EP lab is to enhance efficiencies in workflow, ensure greater navigational accuracy, have shorter procedure times and significant X-Ray dose savings -- all supported by high quality imaging, which leads to better outcomes and patient safety.



Dr. Celso Acevedo

To date,
Munroe's EP program
has provided care to
approximately

600 patients

in the first 10 months
of the program.

Dr. Celso Acevedo: *On Electrophysiology*

“As a Cardiac Electrophysiologist, I specialize in treating patients that have arrhythmias or rhythm disorders of the heart. The heart has its own specialized electrical system that, when damaged, can cause symptoms of palpitations (fluttering of the heart) or even put the patient at risk for cardiac arrest. In the electrophysiology laboratory, we use specialized equipment to evaluate the ‘wiring’ of the heart. Using both the latest technology and years of experience we are able to eliminate many of these abnormalities with a procedure known as an ‘ablation.’ ”

—CELSO ACEVEDO, M.D., CARDIAC ELECTROPHYSIOLOGIST, MUNROE HEART



Dr. Acevedo and Chuck Glynn, C.V.T.

LifeTime Wellness Center's Cardiac Rehabilitation Program

Diagnosis and Treatments Options for Rhythm Disorders

EP studies

An EP study is a minimally invasive procedure that an electrophysiologist can use to assess the electrical system of the heart. This test helps diagnose the cause of a heart arrhythmia, location of the problem and determine the best treatment available for the patient.

Ablations

Munroe Heart's EP lab has the technology available to perform complex heart ablations using either radiofrequency ablations or CryoAblations. An ablation is used to treat abnormal heart rhythms, or arrhythmias.

During an EP ablation, a catheter is inserted into a specific area of the heart where special equipment directs energy through the catheter to the areas of the heart muscle causing the abnormal heart rhythm. The device releases energy which blocks the pathway of the abnormal rhythm and returns the heart to a normal rhythm.

Rhythm Devices

Munroe Heart's cardiac electrophysiologist also treats rhythm disorders by implanting rhythm devices, such as pacemakers and internal cardioverter-defibrillators (ICDs) in Munroe's EP lab. These devices help restore a patient's heart to a more regular heart rhythm.

Cardiac Rehabilitation at Munroe Heart is a medically supervised program that is focused on helping patients with cardiovascular or pulmonary disease. The goal is to help patients get well sooner and return to full, active, and productive lives. Once they have learned the habits of living a heart healthy life, it is important to maintain that behavior.

Cardiac rehabilitation is a safe and effective way to stabilize, slow, or even reverse the progression of cardiovascular disease. Cardiac rehabilitation involves a customized program of exercise, education, and counseling. Munroe's cardiac rehab team will make sure the program moves at a comfortable pace that is safe for you. You will be taught proper exercise techniques such as warming up and stretching before you begin exercising. You will also be educated on important ways to stay healthy.



Mike Blaney, R.N., B.S.

LifeTime's Cardiac Rehab program continues to grow. In 2010, there were 170 registered Phase II patients and 3,637 total Phase II visits. Patient successes and outcomes include 15% of phase II patients completed all 36 session during program and the program currently has 163 phase III members enrolled as members. Patients that stay involved in the program and consistently engage in the activity and education continue to see positive health benefits that include: increased heart efficiency, lowered cardiac risk factors, and lower depression levels just to name a few.

Dr. John Galat: *On Heart Valve Surgery*

"At Munroe Heart, we utilize the most up-to-date and innovative techniques to repair or replace diseased heart valves, often through minimally invasive incisions. Unique to the region, state, and country, Munroe Heart program anesthesiologists work exclusively with heart surgery patients. In close collaboration with them, we are best able to evaluate the abnormal valve(s) during surgery and take care of patients after surgery. This dedicated team approach to heart valve surgery has resulted in outcomes that rival the best in the nation—right here in our region."

— JOHN GALAT, M.D., CARDIOTHORACIC SURGEON, MUNROE HEART



Munroe Heart in the Community



Munroe Heart's physicians, surgeons and clinical care teams are committed to education and raising the awareness of heart disease risk factors in our community. Whether they are speaking about Chest Pain at community functions, participating in health expos, or teaching Hands Only CPR™, education plays a vital role in Munroe Heart's mission.

Community Outreach

In 2010, Munroe Heart participated in approximately 500 "heart related" events and seminars reaching a combined audience of over 40,000.

Outreach programs include:

- Prestige 55 lectures & events.
- Worksite Wellness Screenings.
- Health Expos.
- Munroe Heart Tours.
- Women In Red.
- Munroe Heart Community Lectures.
- Health Resource Line.
- Parish Nurses & Health Ministry Lectures.

Additional programs in 2010 include:

Women in Red

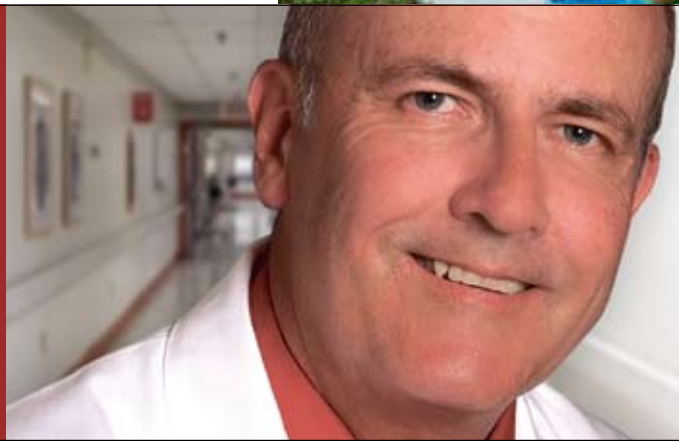
Munroe Heart recognizes that heart disease is the No. 1 killer of American women, but many women do not realize they are at risk. To increase awareness of the danger of heart disease, Munroe Regional established Women in Red in 2007. The mission of Munroe Regional's Women in Red is to provide women with the facts about heart disease and promote heart health.

As of February 1st of this year, the medical center's Women in Red has close to 3,100 members working together to educate the community

Dr. David Lammermeier: *Advances in Lung Surgery*

"One of the most important new developments in surgical options for lung cancer patients is minimally invasive lung surgery (called video-assisted thoracoscopy). Much less invasive than traditional approaches, video-assisted thoracoscopy uses small incisions and micro-camera-guided surgical techniques that result in a faster recovery for patients. It can also be more accurate than traditional options. Minimally invasive lung and chest surgery isn't right for every patient, but it is an important option for many."

— DAVID LAMMERMEIER, M.D., CARDIOTHORACIC SURGEON, MUNROE HEART





on women's heart disease. Each year the Women in Red host an annual "Take Heart" symposium to offer education on the importance of living a heart healthy lifestyle to its members. In addition to their annual "Take Heart" symposium, Women in Red members have the opportunity to attend private tours of Munroe Heart, schedule speaking events for their friends and family, participate in Heart Healthy cooking classes and Women in Red's Afternoon Teas.

Young Women in Red

Munroe Regional's Young Women in Red program was created in late 2009 to teach girls to love their heart and make healthy choices, promoting a healthier generation of women. The program aims to educate girls and raise awareness of the danger of women's heart disease – disease that most likely develops because of lifestyle habits learned early in life. The patterns set as a child – food choices, activity level – often remain for life. The Young Women in Red program has been developed in conjunction with the Girl Scouts of West Central Florida, which serves nearly 30,000 girls in grades K-12 and 13,000 adult members in Citrus, Hernando, Hillsborough, Marion, Pasco, Pinellas, Polk and Sumter counties. To date, over 250 girl scouts have participated in the Young Women in Red program.

The Florida Hospital Association's Florida Society for Healthcare Public Relations & Marketing (FSHPRM) recognized the Young Women in Red program with their 2010 Mark of Excellence Award for Community Outreach.

Hands Only CPR

Hands-Only CPR, as recommended by the American Heart Association, is CPR without mouth-to-mouth breaths. It is recommended for use by people who see an adult suddenly collapse in the "out-of-hospital" setting (like at home, at work, in a park).

It consists of two steps:

- 1) Call 911 (or send someone else to call).
- 2) Begin providing high-quality chest compressions by pushing hard and fast in the center of the chest with minimal interruptions.

Munroe Heart has been working to educate residents in our community on Hands-Only CPR and since May 2010 over 500 individuals have been trained.

American Heart Association

Since 2006, Munroe Heart and the American Heart Association have teamed up to raise awareness on heart disease in Marion County. In 2010, for the fifth consecutive year Munroe Regional made the largest fundraising donation in Marion County to the American Heart Association for their annual Heart Walk. Partnering in events such as Go Red for Women and Go Red Goes to School, Munroe Heart and the American Heart Association have reached approximately 15,000 residents of Marion County and provided education on heart disease risk factors and prevention.

"The American Heart Association's partnership with Munroe Heart makes it possible for us to fight the number one killer of men and women in Marion County!"

Together we are making it possible for people to live stronger, healthier lives."

Staci McDonough
Regional Director, American Heart Association - Central Florida

Dr. Gregory von Mering: *On Peripheral Artery Disease*

"Peripheral arterial disease (often called P.A.D.) occurs when plaque builds up in the arteries, limiting blood flow. P.A.D. most commonly affects the legs, but also can affect your head, arms, and organs. An accurate diagnosis is important because people who have P.A.D. are at an increased risk for coronary artery disease, heart attack and stroke. Treatment can range from lifestyle changes to medications to bypass grafting and angioplasty. Your doctor can discuss all of the P.A.D. treatment options available to you and recommend the best option for your situation."

— GREGORY VON MERING, M.D., INTERVENTIONAL CARDIOLOGIST, MUNROE HEART



Recent Accolades, Awards, and Accomplishments

Overall Hospital Care

Consumer Choice Award – Marion County's Most Preferred Hospital for Overall Quality & Image and Best Doctors & Nurses for eight consecutive years. One of only nine hospitals in Florida to win eight or more times consecutively.
National Research Corporation

One of the Top 100 hospitals in the nation, #1 in our market and #1 in the state of Florida for Patient Safety in Overall Hospital Care in 2010.
The Delta Group

One of the Top 100 hospitals in the nation, Top 10% in the state of Florida and #1 in our market for Patient Safety in Overall Medical Care in 2010.
The Delta Group

#1 in our market and Top 10% in the state of Florida for Medical Excellence in Medical Care in 2010.
The Delta Group

#1 in our market for Patient Satisfaction in Overall Hospital Care, Overall Medical Care and Overall Surgical Care in 2010.
The Delta Group

One of the Top 100 hospitals in the nation, Top 10% in the state of Florida and #1 in our market for Patient Safety in Overall Surgical Care in 2010.
The Delta Group

Munroe Heart

One of only 12% of hospitals in the United States to be recognized as an Accredited Chest Pain Center and the first Accredited Chest Pain Center in Marion County.
Society of Chest Pain Centers

Ranked in the **Top 10 in State** for Cardiac Surgery in 2011 and the only hospital in Marion, Lake, Sumter, Citrus and Alachua County to be rated as a 5-Star for Coronary Bypass Surgery in 2011.
HealthGrades

One of the Top 100 hospitals in the nation, Top 10% in the state of Florida and #1 in our market for Medical Excellence in Cardiac Care (14th in the Nation) and Pulmonary Care (9th in the Nation) in 2010.
The Delta Group

One of the Top 100 hospitals in the nation, Top 10% in the state of Florida and #1 in our market for Patient Safety in Cardiac Care and Pulmonary Care in 2010.
The Delta Group

One of only six hospitals in Florida, and 24 in the nation, to be rated 5-Star for Coronary Interventional Procedures nine years in a row (2003-2011).
HealthGrades

#1 in our market for patient safety in major cardiac surgery in 2010.
The Delta Group

Recognized as **one of the Top 50** Heart Bypass Surgery Programs in the United States.
Consumer Reports / Society of Thoracic Surgeons

Munroe Orthopedics

#1 in our market for Medical Excellence and Patient Safety in Orthopedic Care in 2010.
The Delta Group

Critical Care

The **only four-time recipient** of the Beacon Award for Critical Care Excellence in the state of Florida and one of only six recipients recognized four or more times in the United States.
American Association of Critical Care Nurses

Stroke Care

Recognized as a **Primary Stroke Center** by The Joint Commission. Munroe was the first Primary Stroke Center in Marion County.

Diabetes Care

Received **Gold Seal of Approval** for Diabetes Outpatient Services by The Joint Commission.

Bariatric Care

Designated a **Bariatric Center of Excellence**.
American Society for Metabolic & Bariatric Surgery

Neurological Care

#1 in our market and Top 10% in the nation for Patient Safety in Neurological Care in 2010.
The Delta Group

Cancer Care

One of the Top 100 hospitals in the nation, #1 in our market and #1 in the state of Florida for Patient Safety in Cancer Care in 2010.
The Delta Group



1500 SW First Avenue
Ocala, Florida 34471

Health Resource Line & Community Health Information
352-867-8181
M - F 8:30 a.m. - 5:00 p.m.

For

**360 degree
virtual tours** of the

Munroe Heart program, visit

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and "click" For Patients and Visitors then Virtual Tour.



When it's your heart, *second best is not an option.*