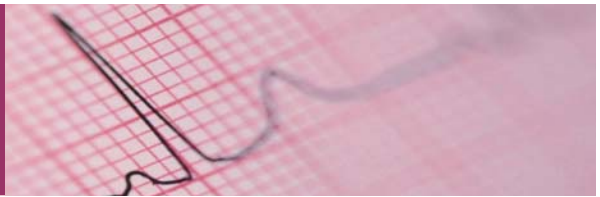
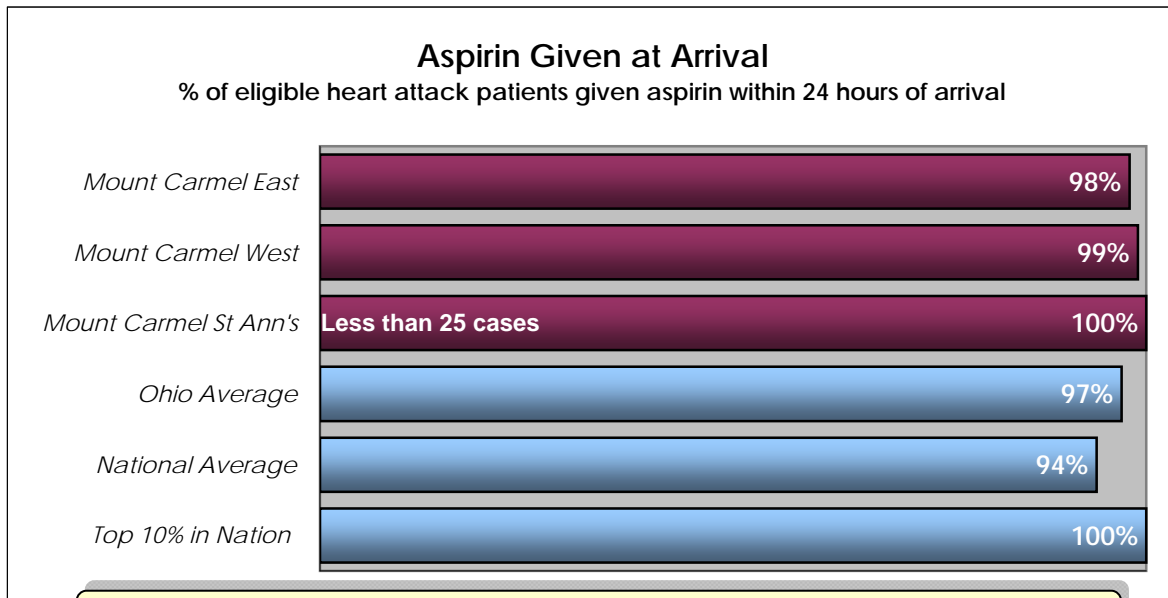


# HEART ATTACK

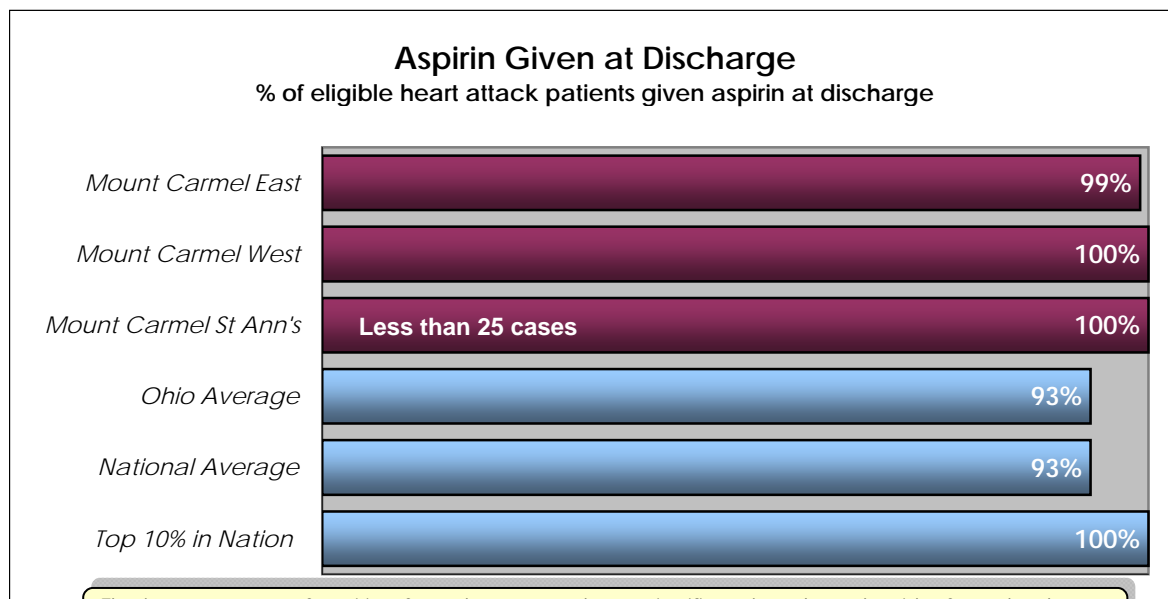
## Quality Indicators



Scientific research indicates that the following six measures represent best practice in the treatment of heart attacks (also called acute myocardial infarction or AMI). Mount Carmel data is for the time period October 2008 - March 2009. Ohio and national data is from the Hospital Compare website and is for the time period January 2008 - December 2008. Instances with fewer than 25 cases are too small to reliably predict hospital performance.



Early treatment with aspirin significantly reduces mortality from a heart attack (aspirin should not be taken by patients who are allergic to aspirin)



The long term use of aspirin after a heart attack can significantly reduce the risk of another heart attack or stroke (aspirin should not be taken by patients who are allergic to aspirin)

### ACEI or ARB Given for Left Ventricular Systolic Dysfunction

% of eligible heart attack patients given ACEI or ARB medication



For heart attack patients with heart failure and decreased function on the left side of the heart, early treatment with ACE inhibitors (angiotensin converting enzyme) or ARBs (angiotensin receptor blockers) can reduce mortality from future heart attacks

### Beta Blocker Prescribed at Discharge

% of eligible patients prescribed a beta blocker at discharge



Beta blockers are medications used to lower blood pressure, treat chest pain (angina) and heart failure and prevent heart attacks

