In fact, Bayhealth Kent General is the only hospital in Delaware, Maryland or Virginia to receive this designation from Healthgrades®. Bayhealth took top honors as one of the 50 best hospitals for cardiac surgery in 2015 and received the Healthgrades Cardiac Surgery Excellence Award™ for the third year in a row. Bayhealth ranks in the top 5% of hospitals in the nation for cardiac surgery and was also named a 5-star recipient for coronary artery bypass surgery and valve surgery in 2015. Based on patient outcome data, these recognitions are proof of the quality, commitment and passion we provide every day for our patients.
DEAR FRIENDS,

I am pleased to present our Cardiovascular Services 2015 Annual Report for your review. Within this report, you will find patient stories, milestone celebrations, announcements about upcoming changes, new programs and more. This report also shows our quality outcomes and the steps we have taken to improve the patient experience.

Heart disease and stroke are two of the leading causes of death in the United States. Centers for Disease Control (CDC) data indicates that about 610,000 lives are lost each year from heart disease – that is equal to one in every four deaths. We are proud of the role Bayhealth has taken towards improving the lives of those we serve by providing a comprehensive and high quality heart and vascular program. From consultation, to diagnosis, to procedure and recovery, we are dedicated to saving and improving the lives of those we serve.

In 2015, Healthgrades™ named Kent General one of America’s 50 Best Hospitals for Cardiac Surgery, with specific five-star ratings for both coronary bypass surgery and valve surgery. Bayhealth - Kent General earned the Mission: Lifeline® Bronze Receiving Quality Achievement Award, bestowed by the American Heart Association (AHA) for implementing changes that led to quicker care and better outcomes for our STEMI patients. A STEMI heart attack happens as a result of a complete blockage in a coronary artery and carries a great risk of death and disability. Our Door to Balloon time, the measurement for how quickly we reduce this blockage, was 97% against a national average of 96% for fiscal year 2015. Bayhealth Medical Center also received accreditation of its Kent and Milford cardiovascular rehabilitation program by the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR). This certification recognizes Bayhealth for our commitment to improving the quality of life by enhancing standards of care.

We are proud of our achievements, but what matters most is making a difference in the lives of our patients by providing lifesaving care close to home. For them, seconds count and time means life or death. We are honored to be right where you need us, when you need us most, and we are driven to exceed your expectations.

Sincerely,

Deborah Watson, FACHE, FACMPE
Senior Vice President and Chief Operating Officer

OUR MISSION IS TO DELIVER WORLD-CLASS HEART AND VASCULAR CARE HERE IN CENTRAL AND SOUTHERN DELAWARE.
National Database of The Society of Thoracic Surgeons

As part of its commitment to creating better outcomes for heart patients, Bayhealth collects and reports its surgical information to the Society of Thoracic Surgeons (STS) to include in their National Database. We’re just one of many hospital systems who contribute to this database in an effort to better understand the national picture of cardiac care. This data is useful for clinical research, quality improvement, and more. To learn more about the STS National Database visit www.sts.org/national-database.

**STS CABG COMPOSITE OVERALL QUALITY RATING**

<table>
<thead>
<tr>
<th>QUALITY DOMAIN</th>
<th>BAYHEALTH SCORE</th>
<th>STS MEAN SCORE</th>
</tr>
</thead>
<tbody>
<tr>
<td>JAN–DEC 2014</td>
<td>97.1%</td>
<td>96.7%</td>
</tr>
</tbody>
</table>

**INPATIENT SATISFACTION: CVSICU**

(PRESS GANEY)

- Q1 FY15: 100%
- Q2 FY15: 100%
- Q3 FY15: 100%
- Q4 FY15: 100%
- AVG.: 100%

Percentage of patients who would recommend Bayhealth CVSICU to others.

**OUTPATIENT CARDIOVASCULAR SERVICES**

- Q1 FY15: 100%
- Q2 FY15: 99.4%
- Q3 FY15: 99.2%
- Q4 FY15: 98.4%
- AVG.: 99.2%

Percentage of outpatients who would recommend Bayhealth cardiac services to others.
Though better off now than a decade ago, today’s patient still faces risk with any surgical procedure. The heart is especially tricky. The heart surgeon’s goal is to correct a problem within the heart without causing any damage to the surrounding tissue. Since heart surgery can take a long time, surgeons need to ensure that their patient is healthy enough to withstand the procedure.

Severe aortic stenosis, also called an aortic valve obstruction, can weaken a person’s heart by causing it to work harder to pump blood throughout the body. Patients may feel weak, dizzy, have no tolerance for exercise, or be unable to complete their daily functions. Without treatment, severe aortic stenosis can lead to more heart problems and even death.

Aortic valve replacement can get a patient back on track and open heart surgery is the standard. Not every patient can undergo open heart surgery for a valve replacement; perhaps they are too weak, or their surgeon and cardiologist do not think they will be able to recover. For these patients, Transcatheter Aortic Valve Replacement (TAVR) may be the best chance they have.

“For some of our patients, TAVR may be their only option,” said Gary Szylowski, MD, of Bayhealth Cardiovascular Surgical Services. “A lot depends on their age and frailty.” As Chief of Bayhealth Cardiovascular and Thoracic Surgery, Dr. Szylowski has taken the lead role in bringing TAVR to Bayhealth. “TAVR allows us to help our patients who are at high risk for surgery.”

Compared to open heart surgery for valve replacement, TAVR is minimally invasive. The TAVR team inserts a catheter into the femoral artery (through the patient’s groin or leg) and uses it to push a replacement valve into place. The new valve expands to fill the space, pushing the old valve out of the way.

Since September 2015, Roberto Scaffidi, MD, of Bayhealth Cardiology Consultants has been training to perform the TAVR procedure with aortic valve experts Wilson Y. Szeto, MD, and Robert Li, MD, of Penn Heart & Vascular. Completing this training enables him to assist Dr Szylowski and the TAVR team as the interventional cardiologist.

“I’m always interested in learning something new to help people,” said Dr. Scaffidi. “In select patients TAVR is proven to be as effective as traditional aortic valve replacement surgery,” he said. “TAVR is a very specialized procedure that isn’t right for every patient. However, Dr. Scaffidi explains, “The earlier patients are referred the more improved their options will be. We can help them live a longer and healthier life.”

To learn more about Bayhealth’s Valve Clinic and our TAVR program, or to refer a patient please call 302-744-6600.

Bayhealth is committed to improving the health of heart and vascular patients in our community and across the region. Our goal is to provide our patients with access to world-class heart surgeons, innovative treatment options, and advanced clinical trials here at home. We accomplish this through our cardiac and endovascular surgery affiliation with Penn Medicine. U.S. News & World Report ranked the Hospitals of the University of Pennsylvania–Penn Presbyterian among the top 10 in the nation for heart care and heart surgery.

Bayhealth surgeons collaborate with Penn’s surgical faculty, who are recognized internationally for their commitment to research and excellence in heart and vascular care. This unique affiliation facilitates a community and academic partnership through intensive clinical and programmatic guidance, including the development of new services, implementation of evidence-based clinical care, and quality oversight.

Through this partnership, we provide our patients with clinical care and outcomes that meet or exceed the national benchmark measures set forth by the Society of Thoracic Surgeons.
At age 31, Jessica Poe was facing heart surgery, an odd circumstance for an otherwise young, healthy athletic trainer and outdoor enthusiast. Poe lives in Dover, and has been married to her husband for more than seven years. She loves to play volleyball.

Poe, the daughter of a paramedic and a trauma nurse, was born with a heart murmur. Heart murmurs are unexpected sounds created by the turbulence of blood flowing through the heart, sometimes from leaky heart valves. Heart murmurs are common, and most are deemed “innocent,” meaning the murmur is not an indication of a serious heart condition.

Sometime in her teens, Poe remembers developing racing heart beats and flutters in her chest, called palpitations. These are often caused by an abnormal heart rhythm, or extra premature beats. Poe visited a cardiologist and was placed on a heart monitor, but it failed to catch the cause of her palpitations.

A few years ago, Poe remembers having a pre-operative EKG as part of preparation for an unrelated surgery. “They found that I had Wolff-Parkinson-White (WPW) syndrome,” she said. She recalls the anesthesiologist’s surprise at this discovery, and for good reason: WPW syndrome is a congenital heart abnormality usually detected in children. Poe had an extra electrical bridge connecting the upper and lower chambers of her heart; the electrical signal goes down one bridge and short circuits backward up the other bridge, creating a “runaway” heart rhythm. Patients can experience palpitations, dizziness, and sometimes fainting or sudden cardiac death.

Through 2014 and into 2015, Poe’s heart was plagued with palpitations and elevated heart rates. “I went to the emergency department two or three times,” she said. “I couldn’t get my heart rate to go below 220 beats per minute, and it was making me feel faint.” Normal heart rates at rest are between 60-80 beats per minute, with a maximum for a 30-year-old with exercise being 190 beats per minute. “I had no idea what was going on,” she said.

Every time Poe experienced “an episode” (as she called them) she dealt with headaches, lightheadedness, and chest pain. Poe began seeing Laura M. Gravelin, MD, of Delaware Heart & Vascular, PA. Because Poe’s arrhythmia was difficult to catch on an EKG, Dr. Gravelin placed her on a 30 day heart monitor, which finally showed the source of the irregularities.

“I still have the printouts,” said Poe.

Later, when Dr. Gravelin left her Delaware practice, she discussed her departure with Poe. She also explained Dr. Miller was an expert in cardiology and electrophysiology and knew Poe’s heart as well as she did. “I can go to him if I need to,” said Poe.

Although Poe has other health problems to contend with besides her heart ablation procedure, she said she feels much better. “Every once in a while, my heart feels like it’s gearing up to get into that high pace, but now it stops before it can really get going,” said Poe.

For now, Poe is making the most of her new lease on life. She is in the midst of an exciting career change, and will soon finish classes to become a paramedic, to follow in her father’s footsteps. Ironically, a key function of a paramedic’s job is to be a first responder to victims of heart attacks or strokes; Poe’s heart will be helping others in due time.

Visit bayhealth.org/heart for more information about Bayhealth Cardiovascular Services.
At age 67, retired YMCA Director Charles “Buzz” Matthews has always been physically fit. In 2013, he noticed something unusual about his running patterns. “My times were drastically changing,” he said, “and my legs were getting tired more quickly.” When he began noticing a definite shortness of breath, he made an appointment with his doctor. “I knew there was a problem.”

In 2013, Matthews was referred to Vincent Abbrescia, DO, FACC, of Delaware Heart & Vascular, PA. Dr. Abbrescia reviewed Matthews’ health history, which showed a decline in his aortic valve’s function. The valve had gone from mildly restricted in 2004 to severely restricted in 2014. Matthews’ heart was not pumping enough oxygenated blood to the rest of his body.

Dr. Abbrescia sent Matthews to Cardiothoracic Surgeon Daniel Marelli, MD, of Bayhealth Cardiovascular Surgical Associates. Matthews explained the changes in his running times, and Dr. Marelli, also a runner, understood Matthews’ concerns. “Athletes become very sensitive to what’s going on in their bodies,” said Dr. Marelli, “They ‘feel’ more because they’re pushing themselves to a certain limit every time.”

In 2015, Bayhealth Kent General was recognized by Healthgrades™ as one of America’s 50 Best Hospitals for adult cardiac surgery, based on patient outcomes. Specifically, Kent General was awarded five stars for excellence in valve surgery and coronary bypass surgery.

Dr. Marelli presented several valve replacement options, including mechanical or biological valves. The pair chose the mechanical option, and the valve replacement surgery was successfully completed on August 21, 2014.

Since the surgery, Matthews has been working with both doctors to get back on the track. “I feel it’s important to support [Mr. Matthews] as he goes forward,” said Dr. Marelli.

“The runner

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– VINCENT ABBRESCIA, DO, FACC

“With Dr. Abbrescia, I’ve been monitoring his gradual increase in activity.”

“Mr. Matthews has made a remarkable recovery in a very short period of time, owing to his pre-surgical aerobic training and overall heart-healthy lifestyle,” said Dr. Abbrescia.

Matthews and Dr. Marelli developed a friendship based on their shared interest. They made a pact to run a race together once Matthews was able.

After Matthews’ surgical follow up appointment in early March, the pair chose to run the Shamrock Scramble, a 5K race scheduled for March 14, 2015. Race day was chilly and wet, but Matthews and Dr. Marelli donned green hats and laced up running shoes with warm smiles on their faces. With 150 other runners, they lined up at the starting line. When the horn blasted, they took off running.

The results were posted: Dr. Marelli came in 99th, with a time of 37:26.4, and Matthews crossed the finish line 0.2 seconds later, in 100th place. His time was 37:26.6.

“It was great to run with Dr. Marelli,” Matthews said. “[Friends] said it was cool for me to have my own personal heart surgeon running at my side, in case something would go wrong while I was running. They had heard of personal trainers running with their clients, but not surgeons running with their patients.”

“I always tell my patients that heart surgery allows you to continue your life,” said Dr. Marelli. Matthews has committed to training to increase his stamina. In April, he competed in several races, including the Dover Air Force Base Heritage Half Marathon & 5K. Matthews came in second in his age bracket (65 to 69) with a run time of just under three hours. His only issue: “I laced my shoes too tight.”
HEART MONTH

Each year, the staff of Bayhealth Cardiovascular Services participates in an awareness campaign called City Goes Red. When they founded the initiative with the Southern Delaware American Heart Association years ago, they had no idea how quickly the idea could spread. Now, other hospitals participate in this initiative, and City Goes Red has spread from Dover to Smyrna, Camden, Wyoming, Milford, Harrington, Seaford, Lewes, and Georgetown. City Goes Red is a simple but profound idea; in February, volunteers place red dress cutouts in high traffic areas in each city in Delaware. The red dresses stand out in sharp contrast to their winter surroundings. Some town halls are lit in red for the occasion. The teams of City Goes Red aren’t asking for money; they’re simply asking you to think about the women in your life and talk to them about their own risk for heart disease.

HEART DISEASE IS THE #1 KILLER OF WOMEN IN THE UNITED STATES, CLAIMING MORE LIVES THAN ALL FORMS OF CANCER COMBINED. TOGETHER, WE CAN RAISE AWARENESS IN THE FIGHT AGAINST HEART DISEASE BY TURNING THE CITY RED.

– CITY GOES RED PURPOSE

We’re all heart

AT BAYHEALTH KENT GENERAL CVUSICU

In 2004, Bayhealth established the 8-bed Cardiovascular Surgical Intensive Care Unit (CVUSICU) to care for patients who have heart or thoracic surgery. The CVUSICU is a specialized unit within Bayhealth Kent General designed to provide the highest standard of post-operative cardiac care. Instead of recovering in the Post-Anesthesia Care Unit (PACU), patients are moved directly from the operating room to the CVUSICU. There, patients awaken, have their airway cleared, and begin taking their first steps to recovery. They stay as long as they need, and most patients are discharged directly from the CVUSICU.

“We see a lot of patients who’ve had coronary artery bypass graft (CABG),” said CVUSICU Nurse Manager Meghan Holland, MSN, CCRN. “A lot of people have valve replacements, too. We try to keep our patients in our care as long as possible to ensure the continuum of care,” said Holland. She and her team work with Rehabilitative Services and Care Management staff to ensure CVUSICU patients can safely return home.

Caring for a person when they’re extremely sick is both a challenge and an honor. The team at Kent County’s only CVUSICU knows their patients’ lives depend on their ability to work together. Cardiothoracic Surgeon Daniel Marelli, MD, explained the specialized staff of the CVUSICU provides patients with more opportunities to succeed. “We have physician assistants (PA-Cs) available 24 hours a day,” he said. “If a patient is showing progress, they can move on to the next phase of recovery; they don’t have to wait until someone pages a physician. PAs can make the decision to go forward.”

Chief of Cardiac and Thoracic Surgery Gary Szydlowski, MD, said that he and his fellow surgeons “are ecstatic” about the CVUSICU. “We know we can go home at the end of the day and feel that our patients are in good hands,” he said.

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– CITY GOES RED PURPOSE
Clayton resident Eddie Walton is recently retired from the Delaware Emergency Management Agency (DEMA) at the State of Delaware, where he was involved in preparing for emergencies. Walton and his wife Arlene have been married 38 years and have lived in Delaware all their lives.

On Friday, June 26, Walton had the day off. In the morning, he left his home in Clayton to pick up equipment in Middletown. Upon returning, he ate lunch with Arlene, and then headed to his garage. “All at once, I had heaviness in my chest, I got this pain in my left arm, and I started perspiring, bad.” He ran to the house and yelled to his wife, “Arlene, I gotta go. Something’s wrong.”

When Arlene turned to grab her purse, she saw the couple’s only vehicle leaving the driveway. To her horror, Walton had driven himself to find emergency care.

When Walton arrived at the Bayhealth Emergency Center in Smyrna, his face was gray. Emergency Nurse Jamie Wells, RN, saw him coming and met him in the lobby. They took him to an exam room, and he complained he was hot, and he was dripping with sweat. They brought in a fan to cool him off.

Walton’s primary care physician, John Fink, MD, of Bayhealth Family Medicine, has an office in the same building. “After [Walton] arrived, Nurse Manager Kim Ford, RN, BSN, CRN, SANE, called to obtain an old EKG for comparison purposes,” said Dr. Fink. “Since I was upstairs, I was able to come to see [Walton], provide background to his nursing team, and a familiar face to him.”

The new EKG was inconclusive, but Walton’s symptoms looked like a heart attack. “I knew he had limited time,” said Wells. She arranged for rapid transport to Bayhealth Kent General, and called the frantic Arlene on the way.

At the Emergency Department at Kent General, Walton had a second EKG and was taken to the Cardiovascular and Electrophysiology Lab, or “cath lab.” There, Interventional Cardiologist Khaled Eljazzar, MD, found that Walton’s left anterior descending artery was almost 100 percent blocked. Just a trickle of blood kept Walton’s heart alive.

Dr. Eljazzar inserted a catheter through a needle in Walton’s groin area. He snaked the catheter over the heart and injected dye to view the area of the blockage, then cleared Walton’s blockage and placed a stent. “My pain went from about an eight to nearly nothing at all,” said Walton. Walton was admitted to the hospital, and three days later, he was told he could go home. “I was in on Friday and out on Sunday for a heart attack,” he said. “It was pretty miraculous.”

The following week, Walton went to see Dr. Fink and crossed paths with Wells, who was overcome with joy and hugged him right there in the lobby. “I could barely believe he was the same person,” she said.

Walton admits that he never should have driven himself to the Emergency Center. “I’ll never live that down,” he said. “I should have called 9-1-1.”

WHAT IS “DOOR TO BALLOON” TIME?

The American Heart Association defines “door to balloon time” as the amount of time between a heart attack patient’s arrival at the hospital to the time he/she receives percutaneous coronary intervention (PCI), such as angioplasty.

FY 2015 UPDATE: DOOR TO BALLOON TIMES

PERCUTANEOUS CORONARY INTERVENTION WITHIN 90 MINUTES OF ARRIVAL

AVERAGE FOR ALL HOSPITALS IN THE UNITED STATES = 96%

AVERAGE FOR ALL REPORTING HOSPITALS IN DELAWARE = 97%

AVERAGE FOR BAYHEALTH KENT GENERAL = 97%

Source data: Medicare.gov: Hospital Compare Data collection 4/1/14- 3/31/15
Community work:

AN INTERVIEW WITH LOUISA “LOUIE” PHILLIPS, RN, FACHE, SENIOR DIRECTOR OF OPERATIONS, CARDIOVASCULAR SERVICE LINE

What role has the team in the Cardiovascular Service line played in community heart health initiatives?

For many years, Bayhealth and its staff have been associated with the Southern Delaware American Heart Association. We’ve supported Go Red for Women, an annual awareness campaign, and the annual Heart Ball. Leaders of the service line and Bayhealth employees participate in the Southern Delaware Heart Walk and have raised countless dollars to support research, education, and awareness initiatives.

What is “City Goes Red” and how did it get started?

City Goes Red is an awareness campaign that we began several years ago. A few of us were involved on the Southern Delaware American Heart Association’s board of directors, and we came up with this idea of putting little red dresses all over Kent and Sussex counties.

The idea was to simply do an awareness campaign — not asking for money — but reminding people that heart disease is the number one killer of women in the United States. In February, we have volunteers who put red dress cutouts out all over Dover, Smyrna, Camden, Wyoming, Harrington, Seaford, Lewes, and Georgetown. Legislative Hall gets lit with red lights. We want drivers to see a red dress in a snowbank in the middle of Route 13 and think of the women in their own lives. It’s a visibility thing; and the power behind it is awareness.

Why does the Cardiovascular Service Line have such a commitment to the community?

We’re a group of people who volunteer. I am proud to say that most of our physicians and staff live within the Milford and Dover communities and we are driven to provide exceptional cardiac care close to home. It’s just who we are.
Mission: Lifeline® Bronze Receiving Quality Achievement Award

Although Bayhealth Cardiovascular Services celebrated many milestones and victories in 2015, our number one challenge remains: to continually improve our ability to provide quality, safe, lifesaving care — fast. In 2015, we celebrated a major win by achieving the Mission: Lifeline® Bronze Receiving Quality Achievement Award from the American Heart Association (AHA), in association with the Society of Cardiovascular Patient Care.

AHA established the Mission: Lifeline program to help hospitals create systems that improve the quality of care for victims of heart attack. Through the program, Bayhealth — as a Mission: Lifeline receiving hospital — is able to use AHA’s tools and processes to increase their own efficiency and reduce barriers to prompt treatment. We have access to training, guidelines, best practices, and national registry programs that allow us to be better, each and every day.

In order to attain this accreditation, Bayhealth’s cardiovascular and emergency care providers and staff participated in multiple quality control registries. The data, collected and reported over several years, provides the Mission: Lifeline organization with an accurate picture of Bayhealth’s patient outcomes.

Medical Director of the Cardiovascular and Electrophysiology Lab John Shuck, MD, said, “This is a total team effort. Many people did an excellent job to make this possible.”

Cardiovascular and Electrophysiology Lab Manager Barbara Smith, MSN, RN, CNML said, “This [award] shows that Bayhealth provides excellent care. We’re always aiming to do better; we always want to improve. We’re shooting for silver status next year.”
In fact, Bayhealth Kent General is the only hospital in Delaware, Maryland or Virginia to receive this designation from Healthgrades®.

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