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## For Your Health's Sake

### How Huntsville Memorial Hospital's Quality Compares

(Huntsville, TX) –Most people check restaurant ratings or read consumer reviews before they make a choice. Shouldn't you also check the quality of the hospitals you rely on when you need medical care?

In an emergency, your life may depend on getting to the nearest hospital. When you can plan ahead, you and your doctor should discuss which hospital will best meet your health care needs. Information is available to help you make an informed choice. Whether you have Medicare or another type of insurance, there are websites that can help you find and use information about hospital quality.


Hospitals provide quality care when they give their patients the care and treatments known to get the best results for their condition. Getting quality hospital care may help with your recovery and help you avoid other problems. Not all hospitals provide the same quality of care.

Most hospitals have programs to check and improve the quality of the care they provide. They may collect and monitor information from patient charts to see where they can improve patient care. They may send their patients surveys to ask about their hospital experience. Many hospitals report the information they collect to their state and to Medicare.

Medicare, the states, and other hospital industry leaders review this information and help hospitals take steps to improve quality. Some of the information about hospital quality is published online. Medicare publishes information about hospital quality on the **Hospital Compare** Web tool. Visit [www.hospitalcompare.hhs.gov](http://www.hospitalcompare.hhs.gov). Hospital Compare gives you a "snapshot" of how well hospitals in your area, and around the nation, care for patients with certain conditions.

Hospital Compare is a consumer-oriented website that provides information on how well hospitals provide recommended care to their patients. On this site, the consumer can see the recommended care that an adult should get if being treated for a heart attack, heart failure, or pneumonia or having surgery. The performance rates for this website generally reflect care provided to all U.S. adults with the exception of the 30-Day Risk Adjusted Death and Readmission measures and the Hospital Outpatient Medical Imaging measures that only include data from Medicare beneficiaries. In March 2008, data from the Hospital CAHPS (HCAHPS) survey, also known as the CAHPS Hospital Survey, was added to Hospital Compare. HCAHPS provides a standardized instrument and data collection methodology for measuring patient's perspectives on hospital care.

I promised last week to share Huntsville Memorial Hospital's quality metrics with you and I always keep my promises. Below are the current scores for our facility. You can see Huntsville Memorial Hospital's quality scores as it compares to the state and national averages. I hope you are as proud as I am. I encourage everyone to find out more by visiting the Hospital Compare website.

Hospital Process of Care Measures Tables	Average for all reporting hospitals in the U.S.	Average for all reporting hospitals in Texas	HUNTSVILLE MEMORIAL HOSPITAL	Data Collected	
				From	To
Outpatients having surgery who got an antibiotic at the right time - within one hour before surgery (higher numbers are better)	92%	93%	94% of 130 patients	7/1/2009	6/30/2010
Outpatients having surgery who got the right kind of antibiotic (higher numbers are better)	94%	93%	98% of 124 patients	7/1/2009	6/30/2010
Surgery patients who were taking heart drugs called beta blockers before coming to the hospital, who were kept on the beta blockers during the period just before and after their surgery	93%	92%	98% of 45 patients	7/1/2009	3/31/2010
Surgery patients who were given an antibiotic at the right time (within one hour before surgery) to help prevent infection	97%	97%	99% of 156 patients	7/1/2009	6/30/2010
Surgery patients who were given the right kind of antibiotic to help prevent infection	97%	97%	100% of 156 patients	7/1/2009	6/30/2010
Surgery patients whose preventive antibiotics were stopped at the right time (within 24 hours after surgery)	94%	94%	95% of 152 patients	7/1/2009	6/30/2010
Heart surgery patients whose blood sugar (blood glucose) is kept under good control in the days right after surgery	93%	91%	Not Available <sup>†</sup>	7/1/2009	6/30/2010
Surgery patients needing hair removed from the surgical area before surgery, who had hair removed using a safer method (electric clippers or hair removal cream – not a razor)	99%	100%	100% of 211 patients	7/1/2009	6/30/2010
 Surgery patients whose urinary catheters were removed on the first or second day after surgery.	90%	89%	87% of 52 patients	1/1/2010	6/30/2010

Surgery patients whose doctors ordered treatments to prevent blood clots after certain types of surgeries	94%	93%	98% of 128 patients	7/1/2009	3/31/2010
Patients who got treatment at the right time (within 24 hours before or after their surgery) to help prevent blood clots after certain types of surgery	92%	91%	98% of 128 patients	7/1/2009	3/31/2010

Hospital Process of Care Measures Tables	Average for all reporting hospitals in the U.S.	Average for all reporting hospitals in Texas	HUNTSVILLE MEMORIAL HOSPITAL	Data Collected	
				From	To
Average number of minutes before outpatients with chest pain or possible heart attack who needed specialized care were transferred to another hospital (a lower number of minutes is better)	61 Minutes	65 Minutes	54 Minutes of 3 patients <sup>1</sup>	7/1/2009	6/30/2010
Average number of minutes before outpatients with chest pain or possible heart attack got an ECG (a lower number of minutes is better)	8 Minutes	8 Minutes	9 Minutes of 292 patients	7/1/2009	6/30/2010
Outpatients with chest pain or possible heart attack who got drugs to break up blood clots within 30 minutes of arrival (higher numbers are better)	54%	43%	100% of 4 patients <sup>1</sup>	7/1/2009	6/30/2010
Outpatients with chest pain or possible heart attack who got aspirin within 24 hours of arrival (higher numbers are better)	95%	94%	98% of 279 patients	7/1/2009	6/30/2010
Heart Attack Patients Given Aspirin at Arrival	99%	98%	91% of 11 patients <sup>1</sup>	7/1/2009	6/30/2010
Heart Attack Patients Given Aspirin at Discharge	98%	98%	100% of 4 patients <sup>1</sup>	7/1/2009	6/30/2010
Heart Attack Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	96%	96%	Not Available <sup>†</sup>	7/1/2009	6/30/2010
Heart Attack Patients Given Smoking Cessation Advice/Counseling	99%	100%	100% of 1 patients <sup>1</sup>	7/1/2009	6/30/2010

Heart Attack Patients Given Beta Blocker at Discharge	98%	98%	100% of 3 patients <sup>1</sup>	7/1/2009	6/30/2010
Heart Attack Patients Given Fibrinolytic Medication Within 30 Minutes Of Arrival	55%	53%	Not Available <sup>†</sup>	7/1/2009	6/30/2010
Heart Attack Patients Given PCI Within 90 Minutes Of Arrival	90%	89%	Not Available <sup>†</sup>	7/1/2009	6/30/2010

Hospital Process of Care Measures Tables	Average for all reporting hospitals in the U.S.	Average for all reporting hospitals in Texas	HUNTSVILLE MEMORIAL HOSPITAL	Data Collected	
				From	To
Pneumonia Patients Assessed and Given Pneumococcal Vaccination	93%	94%	100% of 87 patients	7/1/2009	6/30/2010
Pneumonia Patients Whose Initial Emergency Room Blood Culture Was Performed Prior To The Administration Of The First Hospital Dose Of Antibiotics	96%	96%	99% of 91 patients	7/1/2009	6/30/2010
Pneumonia Patients Given Smoking Cessation Advice/Counseling	97%	98%	100% of 37 patients	7/1/2009	6/30/2010
Pneumonia Patients Given Initial Antibiotic(s) within 6 Hours After Arrival	95%	95%	97% of 101 patients	7/1/2009	6/30/2010
Pneumonia Patients Given the Most Appropriate Initial Antibiotic(s)	92%	91%	94% of 63 patients	7/1/2009	6/30/2010
Pneumonia Patients Assessed and Given Influenza Vaccination	91%	93%	100% of 58 patients	10/1/2009	3/31/2010

Hospital Process of Care Measures Tables	Average for all reporting hospitals in the U.S.	Average for all reporting hospitals in Texas	HUNTSVILLE MEMORIAL HOSPITAL	Data Collected	
				From	To
Heart Failure Patients Given Discharge Instructions	88%	89%	98% of 93 patients	7/1/2009	6/30/2010
Heart Failure Patients Given an Evaluation of Left Ventricular Systolic (LVS) Function	98%	97%	97% of 110 patients	7/1/2009	6/30/2010
Heart Failure Patients Given ACE Inhibitor or ARB for Left Ventricular Systolic Dysfunction (LVSD)	94%	94%	97% of 30 patients	7/1/2009	6/30/2010
Heart Failure Patients Given Smoking Cessation Advice/Counseling	98%	99%	100% of 15 patients <sup>1</sup>	7/1/2009	6/30/2010

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