



University of Michigan Cardiovascular Center

A RECOGNIZED LEADER

The University of Michigan Cardiovascular Center is committed to excellence—be it the successful implementation of life-saving cardiac care, or in forging meaningful relationships that serve colleagues and patients from across the region. The CVC offers nationally known programs in heart failure, transplant, stroke, children's heart disease, valve surgery, implanted heart-assist devices, electrophysiology, preventive heart care, and vascular medicine and surgery.

The CVC is committed to research on the heart and blood vessels, and the diseases that affect them. Existing research strengths include arrhythmia, aortic conditions, congenital heart, end-stage heart disease, hypertrophic cardiomyopathy, renovascular disease, valvular heart disease, atherothrombosis, and venous disease. A culture of cooperation, along with access to research funding, allows the CVC to pursue life-saving and life-enhancing care with passion and perseverance.

The **Joint Commission on Accreditation of Healthcare Organizations** has recognized the CVC for the high quality and coordinated care provided within several Disease Management programs. This includes programs for patients with coronary artery disease and heart failure, the Stroke Program, and recently, the heart-device program for improving patient care with ventricular assist devices (VADs).

When it comes to cardiac care, U-M Health System has been rated highly by **Hospital Compare**. This national service is run by a coalition of government and non-profit groups, and rates hospitals' performance on delivery of certain proven medications, as well as lifestyle counseling. U-M scored significantly higher than the national average on the measures of: Heart Attack Patients Given Percutaneous Coronary Interventions (PCI) Within 90 Minutes of Arrival, and Heart Failure Patients Given Discharge Instructions.

In the areas of coronary artery bypass surgery, percutaneous coronary intervention, and abdominal aortic aneurysm repair, the CVC has received high marks from **The Leapfrog Group**. A national nonprofit, Leapfrog sets standards for high-quality and safe health care. Leapfrog has also given U-M hospitals the highest rating possible in the measures of ICU staffing and Safe Practices. These ratings indicate a high number of medical staff and caregivers classified as 'intensivists,' as well as a proven commitment to reducing preventable medical mistakes.

The **Michigan Health and Safety Coalition's** most recent consumer report shows U-M far exceeded the thresholds for the recommended number of all cardiovascular procedures measured. Referring colleagues can be confident their patients will be treated by a surgical or procedural team that possesses high levels of experience coupled with positive outcomes. The measured procedures included: open-heart surgery, percutaneous coronary intervention, abdominal aortic aneurysm repair and carotid endarterectomy surgery.

YOUR CVC TEAM

CVC LEADERSHIP

Kim A. Eagle, M.D., F.A.C.C.
Linda R. Larin, F.A.C.H.E., M.B.A.
David J. Pinsky, M.D.
Richard L. Prager, M.D.
James C. Stanley, M.D.

SERVICE DIRECTORS

Cardiovascular Medicine:

Adult Congenital Heart Program
Timothy Cotts, M.D.

Anticoagulation Service

James B. Froehlich, M.D., M.P.H.
David B. Dyke, M.D.

Arrhythmia & Electrophysiology

Hakan Oral, M.D.

Clinical Cardiology

David J. Pinsky, M.D.
Kim A. Eagle, M.D.

Echocardiography

William F. Armstrong, M.D.

Electrocardiography

Michael Lehmann, M.D.

Cardiac Catheterization and Intervention

Stanley Chetcuti, M.D.
Mauro Moscucci, M.D.

Heart Failure and Transplant Management

Todd M. Koelling, M.D.
Keith D. Aaronson, M.D., M.S.

Hypertension

Alan B. Weder, M.D.
Kenneth A. Jamerson, M.D.

Vascular Medicine

James B. Froehlich, M.D., M.P.H.

Hypertrophic Cardiomyopathy Clinic

Sharlene Mary Day, M.D.
William F. Armstrong, M.D.
Mark W. Russell, M.D.

Preventive Cardiology

Melvyn Rubenfire, M.D.

Pulmonary Hypertension

Vallerie McLaughlin, M.D.
Melvyn Rubenfire, M.D.

Cardiac Surgery:

Adult Cardiac Surgery

Richard L. Prager, M.D.

Heart Transplant/Circulatory Support

Francis D. Pagani, M.D., Ph.D.
Jonathan W. Haft, M.D.

Mitral Valve Surgery

Steven F. Bolling, M.D.

Aortic Valve Surgery and Thoracic Aortic Disease

G. Michael Deeb, M.D.

Aortic Endovascular Surgery

Himanshu J. Patel, M.D.

Congenital Heart Center – Pediatric and Congenital

Cardiovascular Surgery

Edward L. Bove, M.D.
Eric J. Devaney, M.D.
Jennifer C. Hirsch, M.D.

Congenital Heart Center – Pediatric Heart

Transplant Program

Richard G. Ohye, M.D.

Vascular Surgery:

Vascular Surgery Section

Thomas Wakefield, M.D.

Endovascular Vascular Surgery

Enrique Criado, M.D.

Diagnostic Vascular Unit

Peter Henke, M.D.

The Stroke Program:

Lewis Morgenstern, M.D.

Cardiovascular Anesthesiology Specialists:

Wei C. Lau, M.D.

Patrick E. Benedict, M.D.
Lori Quinlan Riegger, M.D.
Andrew L. Rosenberg, M.D.

Radiology:

Thoracic Radiology Imaging

Ella A. Kazerooni, M.D., M.S.

Interventional Radiology

James J. Shields, M.D.

Pediatrics:

Pediatric Cardiology

Albert P. Rocchini, M.D.

Pediatric Cardiac Catheterization and Intervention

Thomas R. Lloyd, M.D.
Albert P. Rocchini, M.D.

Congenital Heart Center – Pediatric Heart

Transplant Program:
Dennis Crowley, M.D.

To reach these faculty or others at the CVC, call M-LINE at (800) 962-3555

TEAM APPROACH TO PATIENT CARE

In 2001, Rick Halpert was a healthy Kalamazoo attorney in his mid-50s, when a routine physical revealed something unusual: a major blood vessel in his chest was enlarged. Halpert had the images sent to a physician he knew at Case Western Reserve. The doctor called him back; he needed surgery immediately. Looking back, Halpert remembers asking, "I assume you'll have me come down to the Cleveland Clinic?" But the doctor said, "No, the best place is U-M."

A short time later, Halpert and his wife, Mary, were in Ann Arbor, sitting opposite G. Michael Deeb, M.D. — the director of the Multidisciplinary Aortic Clinic and a specialist in aortic valve disease, aortic aneurysms and dissections, Marfan syndrome, and adult cardiac surgery, as well as a professor in the U-M Department of Surgery.

Deeb's diagnosis: an aortic aneurysm and a badly leaking heart valve. Recalls Halpert, "Dr. Deeb spent time explaining the surgery and exploring my options. He was also extremely kind. I felt like I was in really good hands."

Halpert says that he was enormously impressed not only with the skill of his surgeons, but with the care he received from virtually everyone he met as part of the U-M medical team. The nurses and the young doctors-in-training showed extraordinary sensitivity and kindness. "You hear about hospitals being cold

places," he says, "but I couldn't have been treated more warmly than if I was at a family dinner."

Halpert healed beautifully from surgery and returned to his active life.

Unfortunately, the story doesn't end here. Four years later, while flossing, Halpert cut his gums. Soon, he began to run a fever. His leg went numb, then his arm. He credits the physicians at the Bronson Hospital ER in Kalamazoo for identifying the cause: the tiny mouth wound had become a gateway for bacteria which caused infection that spread to the prosthetic valve and graft at the top of his heart. He recalls, "The doctors at Bronson said, 'For what you have, you need to be at U-M.'"

Deeb and his U-M team came to Halpert's aid again. The junction where the prosthetic aortic valve was sutured to the graft was infected and Halpert had a contained rupture. Deeb recalls the situation, "He was in serious difficulty; his prosthetic valve was damaged and leaking badly. On serial imaging studies, the contained rupture was shown to be enlarging and Halpert was at risk of bleeding to death."

Halpert replays his conversation with Deeb in his hospital room, "I remember he said, 'Rick, I think we're going to have to go back in. I asked if I was going to die. He said, 'No, you're not going to die, Rick.' And I never worried again. I had that level of faith."

Deeb reports, "During the surgery, we



removed the infected material as well as all the infection in his native tissue. Only then could we implant new material. It was a long surgery and he faced significant risk. It is important to note that when patients have an infected prosthesis, we can't treat with medication alone. We must remove the infected foreign object."

After the successful surgery and at the urging of Dr. Kim Eagle, a director of the University of Michigan Cardiovascular Center, and Halpert's U-M cardiologist, Halpert began seeing Doug Wunderly, M.D. — a Kalamazoo cardiologist — for his ongoing care. Earlier this spring during a routine evaluation, Halpert was diagnosed with atrial fibrillation and was treated successfully by Wunderly. "My doctor and Dr. Eagle stayed in touch so that I could continue my care locally," Halpert says. "It was wonderful — all of these professionals from different hospitals cooperating for my benefit."

Today, Halpert is healthy. "I owe my life to the U-M — twice!" he says.



FOR PHYSICIANS

Call M-LINE at 800-962-3555

Your referral relationship with the University of Michigan Health System is highly valued. That is why we're dedicated to developing and maintaining referring physician satisfaction by improving access to our clinics and services. We want your patients to have the best experience possible, especially when you choose to refer them to us.

Use M-LINE to:

- Schedule an appointment
- Coordinate a patient transfer
- Request a physician-to-physician consultation
- Inquire about any clinical service information

FOR PATIENTS

Call 734-647-7321 or 888-287-1082, option 1

The Cardiovascular Call Center helps patients schedule appointments, arrange referrals, and determine which services are right for them for all cardiovascular services, including:

- Cardiovascular Medicine
- Cardiac Surgery
- Vascular Surgery

Call 734-647-7321 or 888-287-1082, option 2

The Cardiovascular Answerline provides an immediate response by a nurse who can answer questions, facilitate medical information to clinic nurses and other health care providers, and assist with referrals and patient triage.

The CVC faculty have developed Consult Request Guidelines which contain suggested patient management and test guidelines at www.med.umich.edu/umconsults.