

ANATOMY OF A HEART ATTACK

11:00	You're getting ready to turn in for the night. Suddenly, you feel a twinge in your chest. Not really a pain. More like a squeeze. Is it just indigestion? You start to sweat a little, and you sense this is something more serious. But you really aren't sure. Then your breathing becomes a little tough.
11:02	You jab your wife. She's concerned and decides to call 911, what you should have done two minutes ago. You are having a heart attack and this is what happens to you:
11:04	Your wife helps you downstairs to the living room and you sit on the couch. She turns on the outside lights so responders can find your house. The police are first on the scene, just two minutes after the 911 call. While they have an automated external defibrillator in their car, you are awake and alert, so you don't need it.
11:06	An emergency medical technician and a paramedic arrive. One of them begins to administer oxygen to you while the other starts an assessment. What's the nature of your pain? When did it start? What's your medical history?
11:10	The paramedic sprays nitroglycerin under your tongue to help with the chest pain and you are chewing on three baby aspirin as he begins to administer an EKG, an electrical test of your heart.
11:12	The medical providers are looking for what is called a STEMI — an ST segment elevation myocardial infarction — or a disruption in a portion of the normal electrical wave of your heart. In your case, they see it, so they transmit your EKG directly to the Emergency Department at St. Clair Hospital via Bluetooth technology over a cell phone.
11:15	The paramedic starts an intravenous line so you can receive medications quickly. They are monitoring your blood pressure and heart rhythm to make sure there are no irregularities. Your blood pressure is a little high, so they give you some medication.
11:18	The doctor on duty at St. Clair reads your EKG and concurs with the ambulance crew. It looks like a heart attack. Time to get to the emergency department quickly. The heart catheterization lab, which operates 24 hours a day, is notified to be ready for you. A team of medical professionals, including an invasive cardiologist, is called. The quicker you get treated, the less permanent damage to your heart muscle.
11:25	You are loaded onto the stretcher and taken to the waiting ambulance.
11:35	You arrive at St. Clair Hospital's ER and receive a quick 10-minute assessment and an identification wristband. You have a blood test to look for chemical evidence that you are having a heart attack. But since the physicians already suspect a heart attack, you are taken directly to the catheterization lab, just steps away from the emergency department, where the "Door-to-Balloon" team is already waiting for you.
11:50	In the cath lab, your groin area is scrubbed and draped and sedation is run through your IV.
11:56	An incision is made in your femoral artery in your groin and a catheter is inserted all the way up to your heart. Dye is injected so the doctor can view the heart pumping and see any blockages. In your case, they see a blockage.
12:06	The cardiologist determines your blockage can be fixed in the cath lab, like 90 percent of patients. If the blockage had been too large or in a risky area, the cardiac surgeon would have been called and you would have been scheduled for bypass surgery.
12:12	The cardiologist sends a tiny balloon through the catheter all the way up to the blockage. It is slowly inflated and the artery that appeared narrow now looks normal. The doctor watches on the video screen as blood flow is restored. The procedure has an overall complication rate of 1%. Your procedure goes flawlessly, as most do.
12:17	The doctor puts a stent — or a small brace — in the artery to keep it open. About 96% of patients receive one. The American College of Cardiology's industry goal is for physicians to open that artery no more than 90 minutes after you get to the hospital to preserve the most heart muscle. But look at your time. Just 42 minutes. Because medical responders sent the results ahead, and because St. Clair's cath lab is open 24 hours a day with a team always on call, you suffer no permanent damage.
	You spend the next 24 to 48 hours in the hospital for observation and are sent home with a prescription for medicine to prevent blood clots and control blood pressure, and a recommendation to take an aspirin a day. You also have a prescription for the Cardiac Rehabilitation Center at St. Clair, so you can start an exercise program under a doctor's supervision. You are also educated about the importance of a good diet and told you must not smoke.