

# Cardiovascular Disease Disparities



## Oklahoma Task Force to Eliminate Health Disparities

Data Presentation – February 4, 2004



# This Presentation

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- What is Cardiovascular Disease (CVD)?
- Oklahoma Cardiovascular Disease Facts
- Risk Factors
- Mortality
- Current Quality Indicators



# What is Cardiovascular Disease?



# What is Cardiovascular Disease

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- Cardiovascular Disease is a group of diseases that affect the heart and the circulatory system.
  - This includes the muscles and nerves that support the heart, arteries and veins.
- There are more than 60 different types of cardiovascular disease.



# Diseases of the Heart

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- **Congenital Heart Defects** – structural problems with the development of the heart.
- **Acute Myocardial Infarction** – heart attack.
- **Infections of the Heart** such as endocarditis.
- **Congestive Heart Failure** – chambers of the heart fail to function.
- **Coronary Heart Disease** – plaque in the vessels that feed the heart muscle.
- **Arrhythmia** – irregularities of the heart beat such as Atrial Fibrillation



# Diseases of the Circulatory System

- **High Blood Pressure or Hypertension** – restriction of blood flow through the arteries of the body.
- **High Blood Cholesterol** – the build up of plaque on the arteries of the body.
- **Peripheral Vascular Disease** – blockage of the arteries in the legs.
- **Stroke** – blockage of the blood vessels that supply oxygen and food to the brain.
- **Phlebitis** – blockages in the veins.



# Oklahoma CVD Facts

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# Cardiovascular Disease Facts

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- Heart disease and stroke still remain the 1<sup>st</sup> and 3<sup>rd</sup> leading causes of death in Oklahoma.
- In 2003, heart disease and stroke accounted for over one-third of the total deaths in Oklahoma.
- In 2003, heart disease caused 10,980 deaths in Oklahoma.
  - 5,365 men
  - 5,615 women



# Cardiovascular Disease Facts

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- Oklahoma ranks 50<sup>th</sup> in Age-Adjusted Mortality Rate from Cardiovascular Disease Deaths (1999-2001).
- Oklahoma's Age-Adjusted CVD rate is 411.6/100,000 compared to 336.6/100,000 for the US overall.



# Risk Factors

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# Risk Factors

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- Major risk factors that can't be changed.
- Life-habit risk factors (modifiable).
- Disease risk factors.
- Emergency response factors.
- Emerging risk factors.



# Non-Modifiable Risk Factors

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- Increasing Age
  - men  $\geq 45$  years
  - women  $\geq 55$  years
- Gender (male)
- Heredity
  - Race
  - Family History



# Life Habit Risk Factors

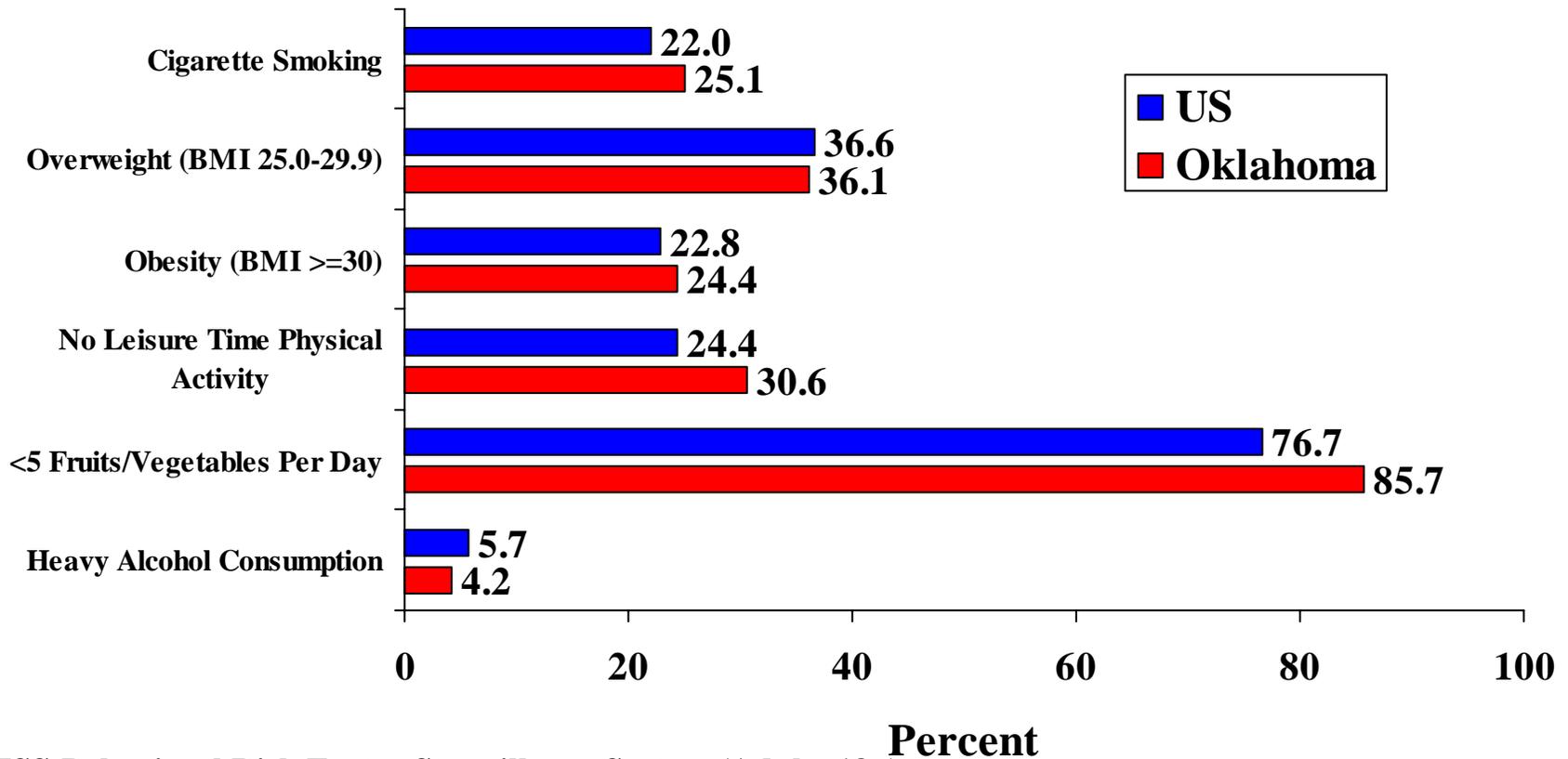
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- Cigarette Smoking
- Obesity (BMI  $\geq 30$ ) and Overweight (BMI  $\geq 25$ )
- Other factors that Contribute
  - Physical Inactivity
  - Nutrition
  - Stress
  - Excessive Alcohol



# Prevalence of CVD Risk Factors

## BRFSS 2003



BRFSS-Behavioral Risk Factor Surveillance System (Adults 18+)

\*2002 data only available; data not available.



# Disease Risk Factors

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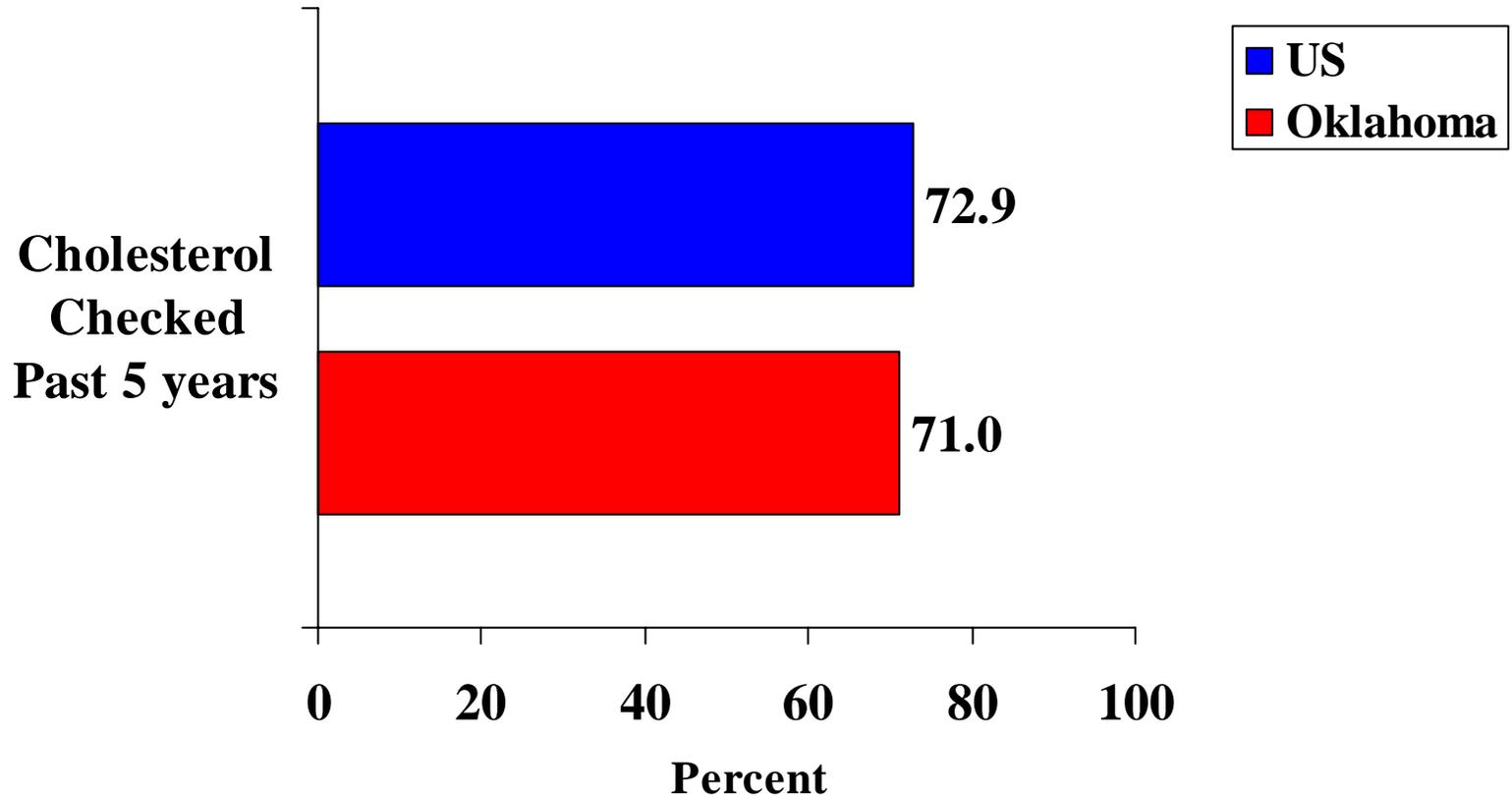
- High Blood Cholesterol
  - Low HDL cholesterol ( $<40$  mg/dL)
- Hypertension or High Blood Pressure (HBP)
  - Pre-hypertension ( $\geq 120-139 / \geq 80-89$  mmHg)
  - Hypertension ( $\geq 140/90$  mmHg)
  - On anti-hypertensive medication
- Diabetes



# Cholesterol Screening

## BRFSS 2003

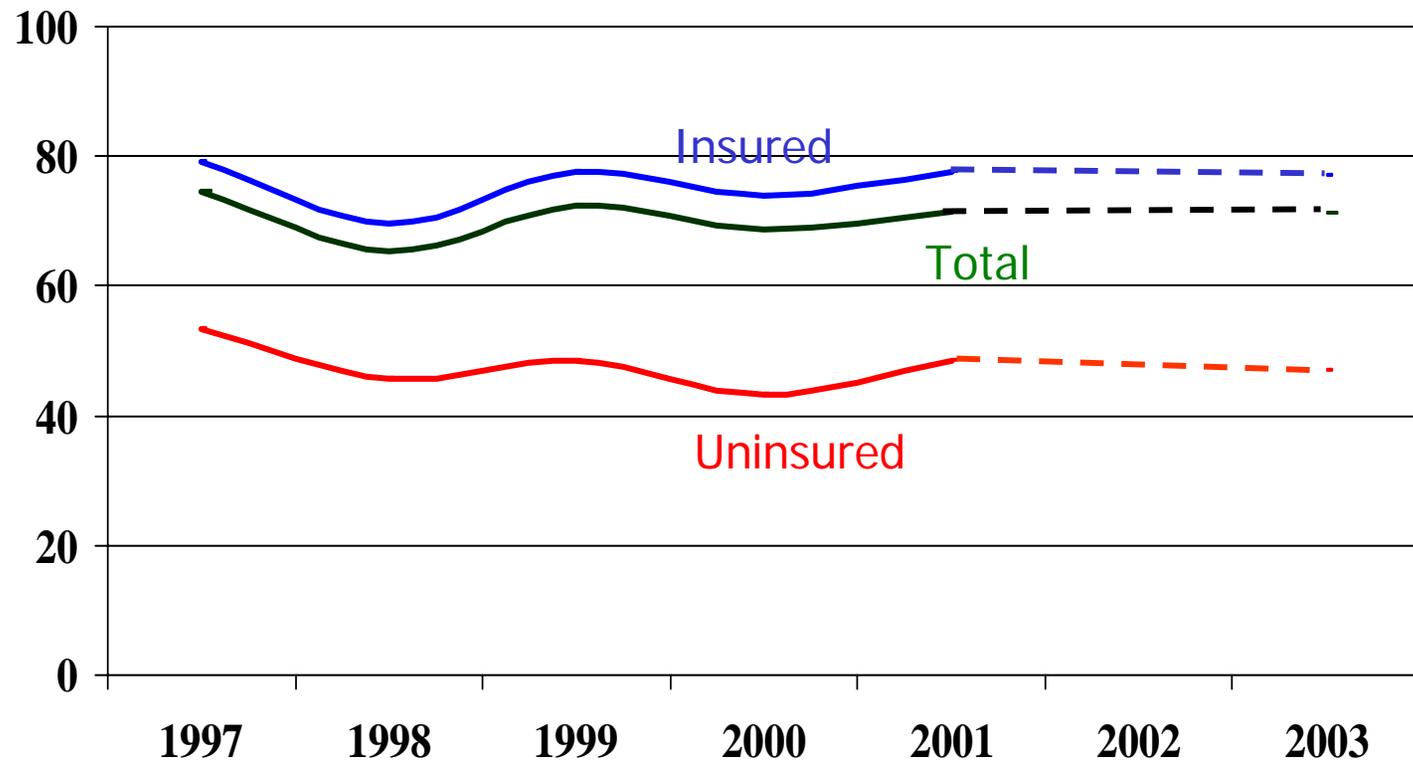
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BRFSS-Behavioral Risk Factor Surveillance System (Adults 18+)



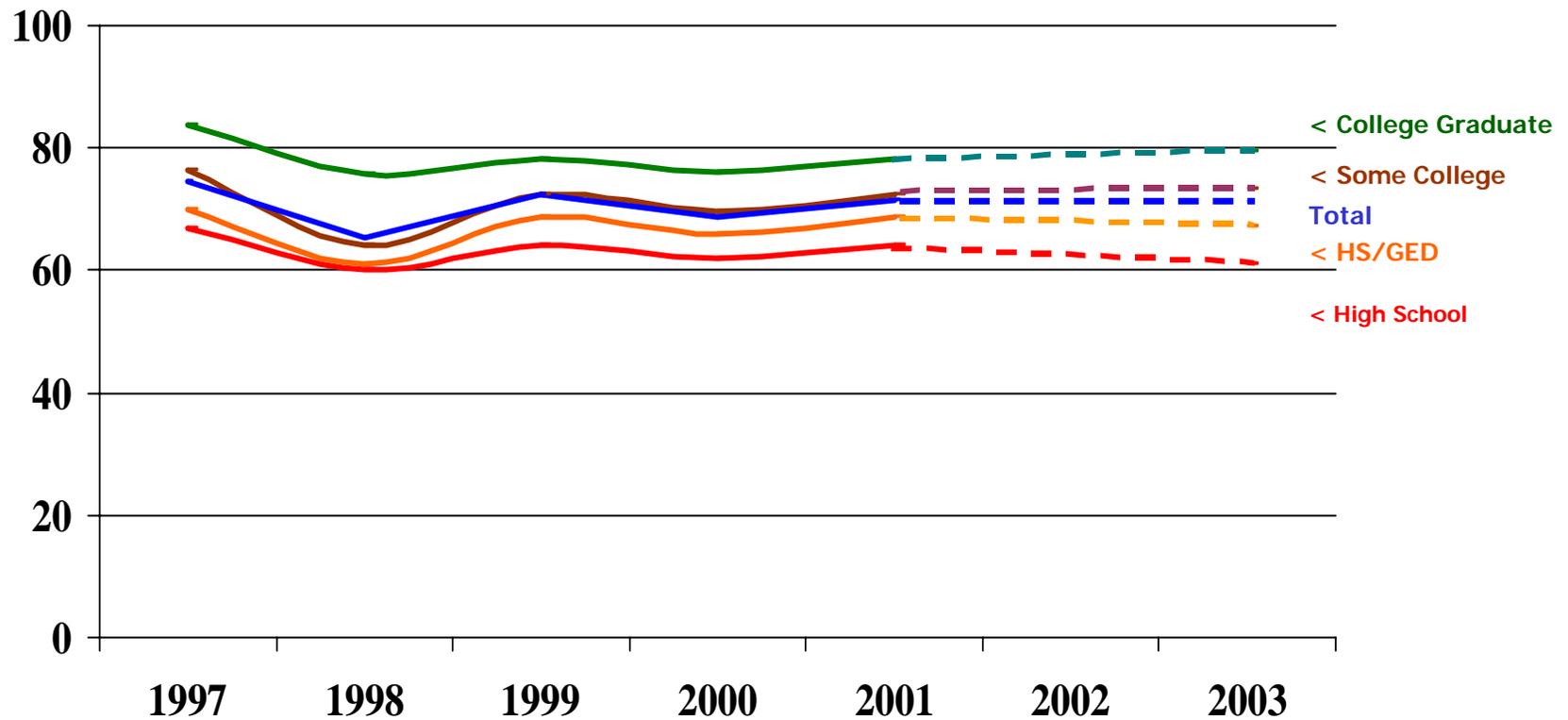
# Cholesterol Check in Past 5 Years by Insurance Oklahoma



2002 BRFSS data unavailable



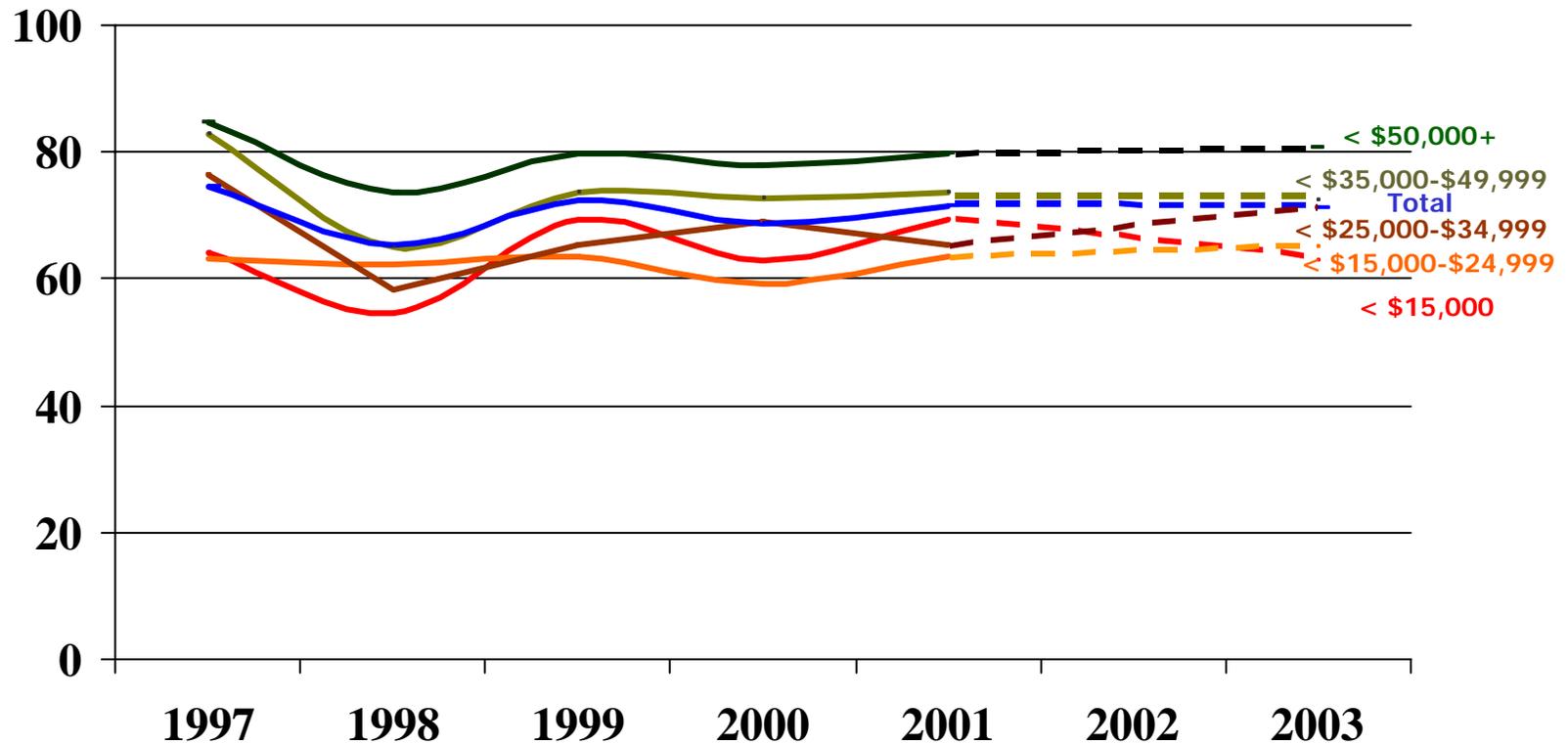
# Cholesterol Check in Past 5 Years by Education Oklahoma



2002 BRFSS data unavailable



# Cholesterol Check in Past 5 Years by Household Income Oklahoma

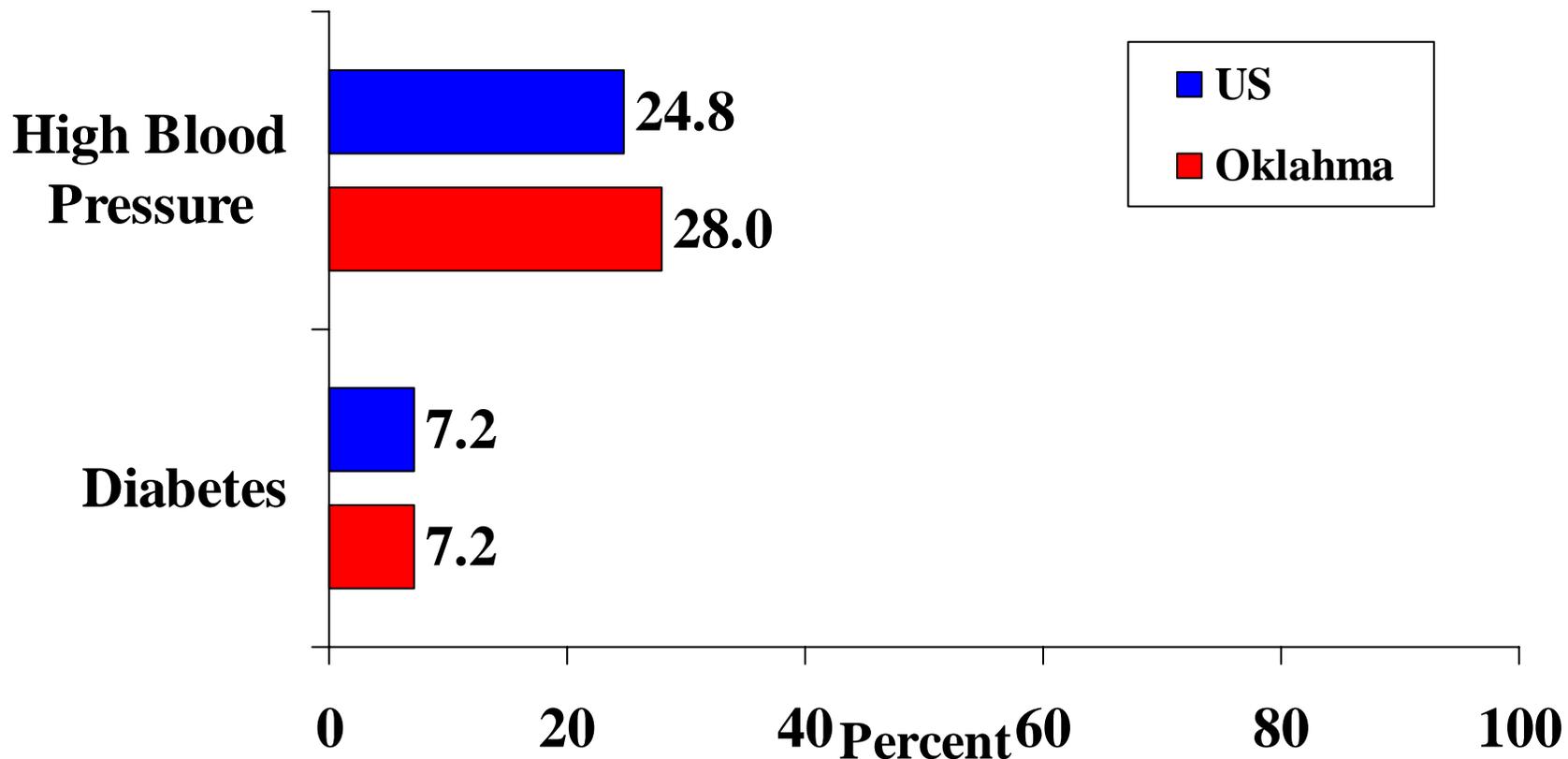


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# Risk Factors

## BRFSS 2003

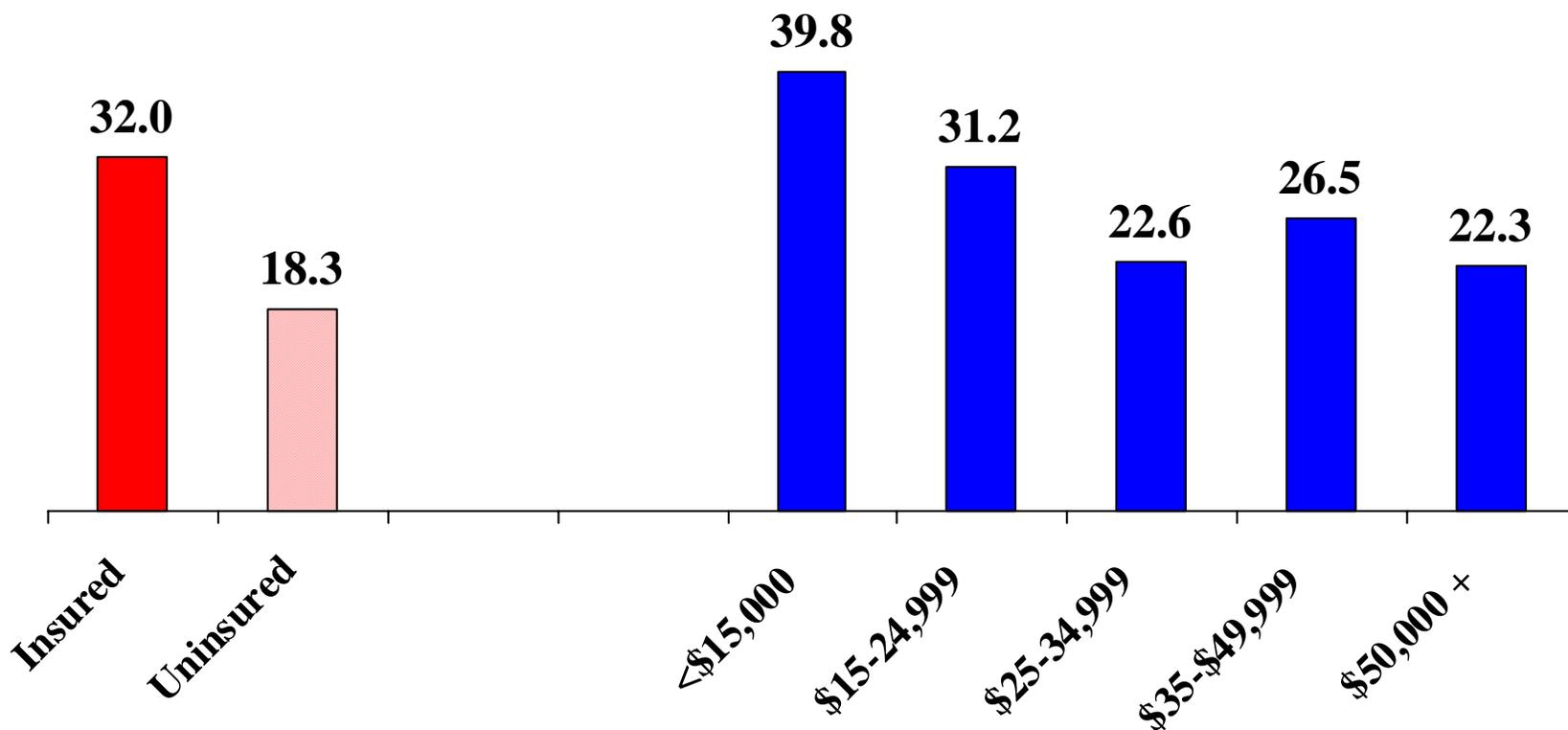


BRFSS-Behavioral Risk Factor Surveillance System (Adults 18+)



# Percent of Adults Told HBP by Insurance Status/Income Oklahoma 2003

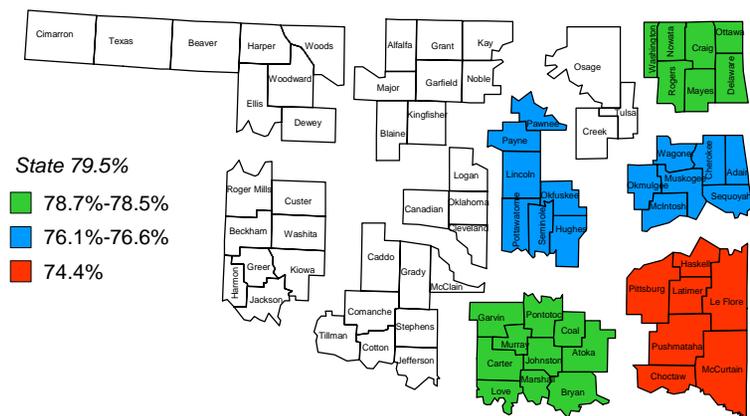
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BRFSS-Behavioral Risk Factor Surveillance System (Adults 18+)

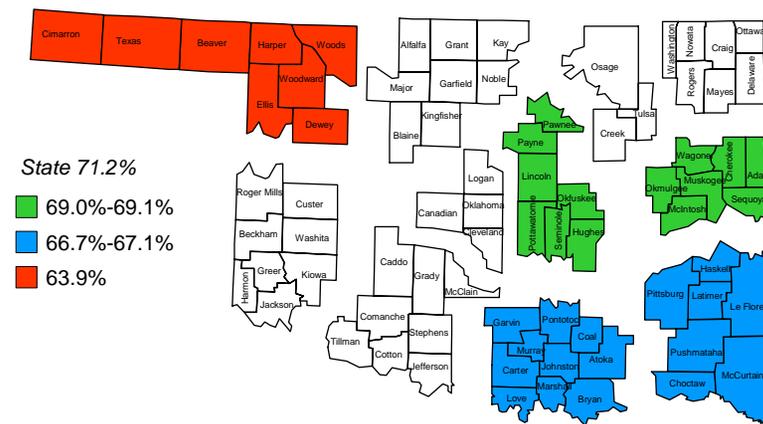


Percent of Adult Respondents With Any Kind of Health Plan by Sub-State Planning Districts: Oklahoma 2001-2003



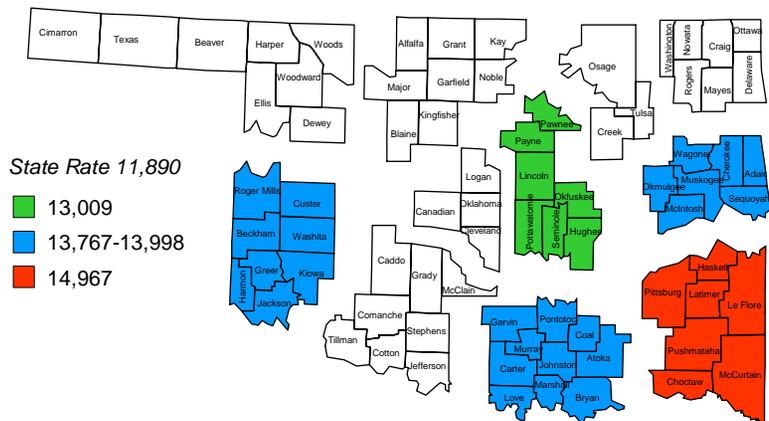
Source: Oklahoma Behavioral Risk Factor Surveillance System

Percent of Adult Reporting Having had their Cholesterol Checked in the Past 5 Years by Sub-State Planning Districts: Oklahoma 2003



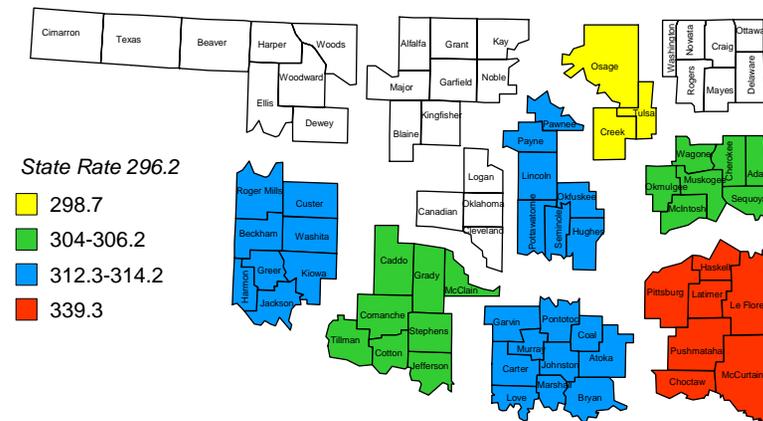
Source: Oklahoma Behavioral Risk Factor Surveillance System

Rate of Paid Claim Data with a Diagnosis of Cardiovascular Disease among Medicaid Patients by Sub-State Planning Districts: Oklahoma 2003



Rates per 100,000 eligible recipients.  
 Rates obtained were from administrative data which included paid claims/encounters only and for recipients eligible at any time during the defined year.  
 Numerator = eligible Medicaid recipients with defined diagnosis code  
 Denominator = total number of people that were Medicaid eligible at any point during the given year  
 Source: Oklahoma Health Care Authority

Age-Adjusted Mortality Rate Cardiovascular Disease (ICD10 I00-109,I11,I13,I20-I51) by Sub-State Planning Districts: Oklahoma 2002



Rate per 100,000  
 Age-Adjusted to US 2000 Standard

Source: Oklahoma Vital Records

# Emergency Response Factors

- Time is critical to increase survival and decrease disability
  - **Heart Attack** – Treatment <5 minutes of onset
  - **Stroke** - Treatment <3 hours of onset



# Recognizing Heart Attack Sign and Symptoms

## Oklahoma BRFSS 2003

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	<b>Yes</b>	<b>No</b>	<b>Don't know/ Not sure</b>
<i>Pain in the jaw, neck, or back</i>	53.0%	22.0%	25.0%
<i>Feeling weak, lightheaded, or faint</i>	70.0%	12.9%	17.0%
<i>Chest pain or discomfort</i>	93.9%	2.3%	3.9%
<i>Trouble seeing out of one or both eyes</i>	34.7%	29.5%	35.8%
<i>Pain or discomfort in the arms or shoulders</i>	85.6%	5.9%	8.4%
<i>Shortness of breath</i>	87.4%	4.5%	8.0%



# Recognizing Stroke Sign and Symptoms

## Oklahoma BRFSS 2003

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	Yes	No	Don't Know/ Not Sure
<i>Sudden confusion or trouble speaking</i>	87.2%	2.6%	10.2%
<i>Sudden numbness or weakness of face, arm, or leg, especially on one side</i>	90.4%	2.7%	6.9%
<i>Sudden trouble seeing in one or both eyes</i>	64.6%	7.5%	28.0%
<i>Chest Pain or Discomfort</i>	39.6%	30.8%	29.5%
<i>Sudden trouble walking, dizziness, or loss of balance</i>	85.8%	3.3%	11.0%
<i>Severe headache with no known cause</i>	59.7%	10.8%	29.5%

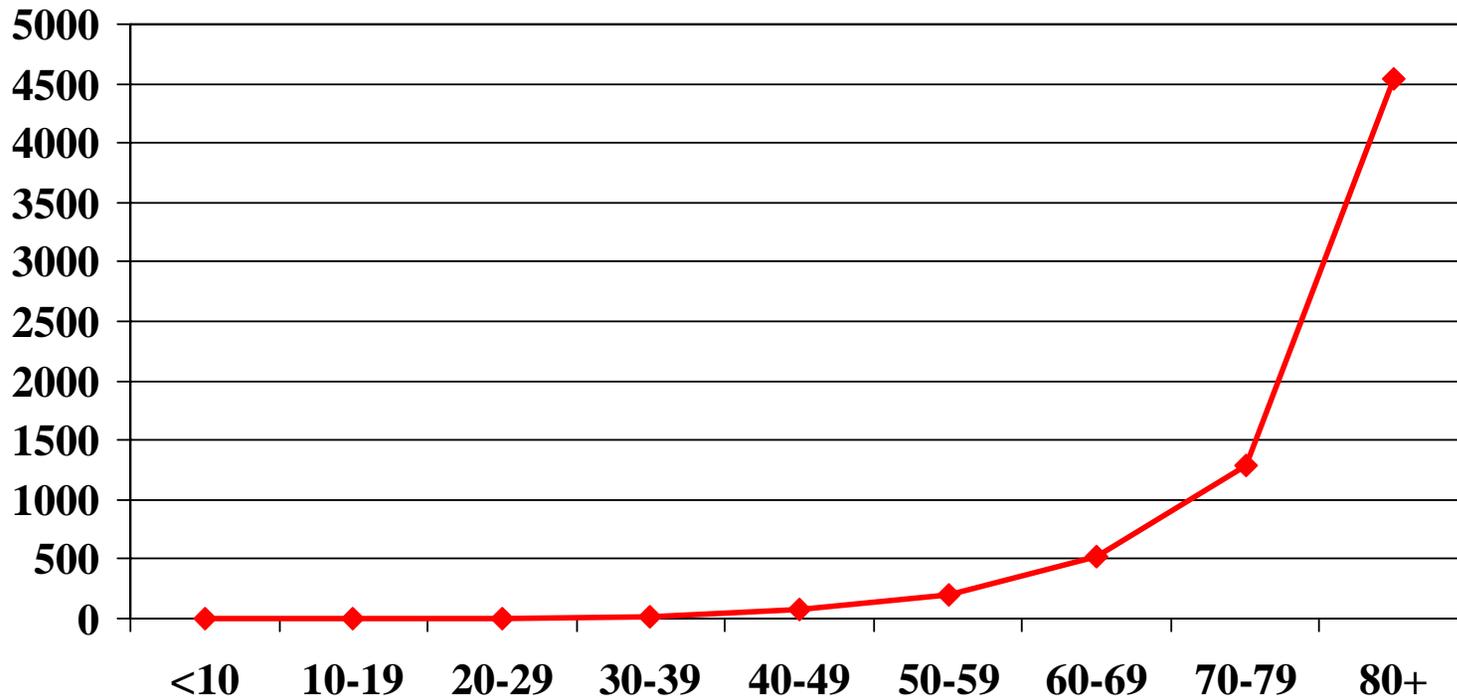


# Mortality

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# Death Rate Due to Heart Disease by Age Oklahoma 2002



Rate per 100,000

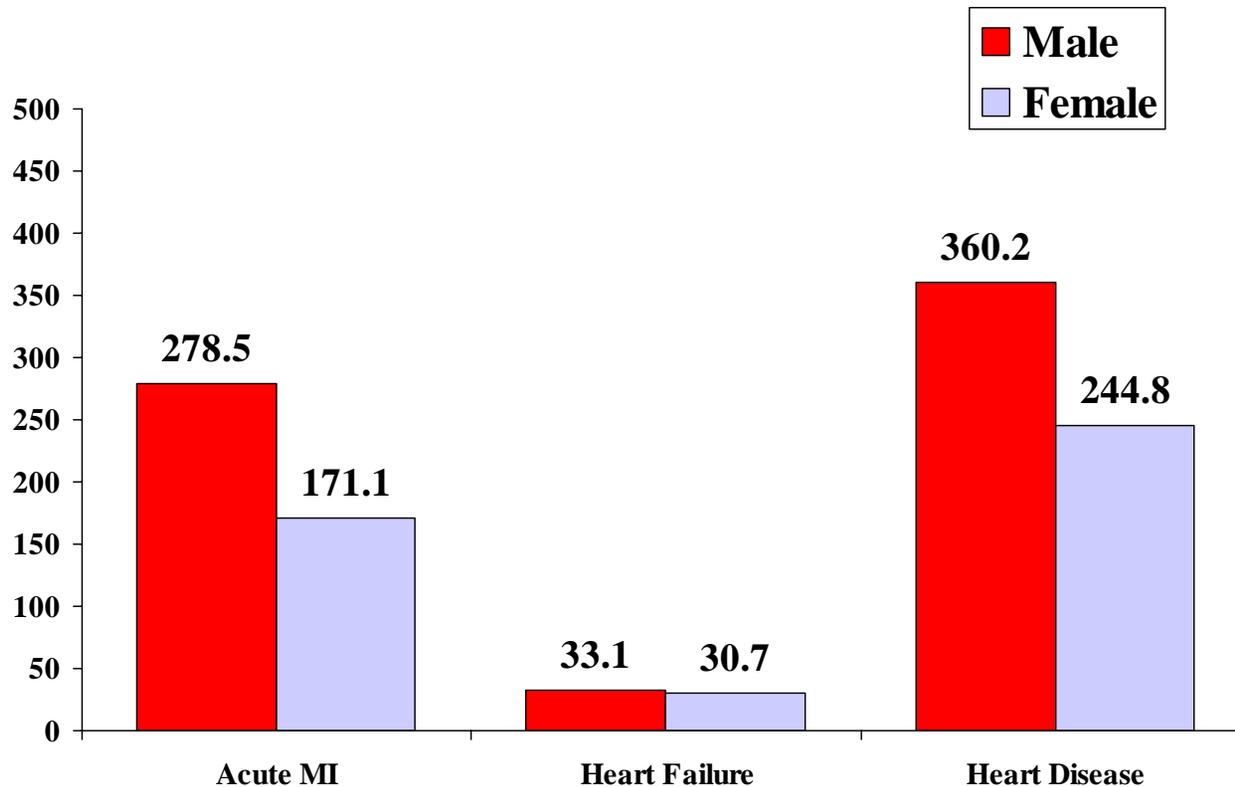


# Age-Adjusted Death Rate

## Acute MI, Heart Failure, and Heart Disease

### Oklahoma 2002

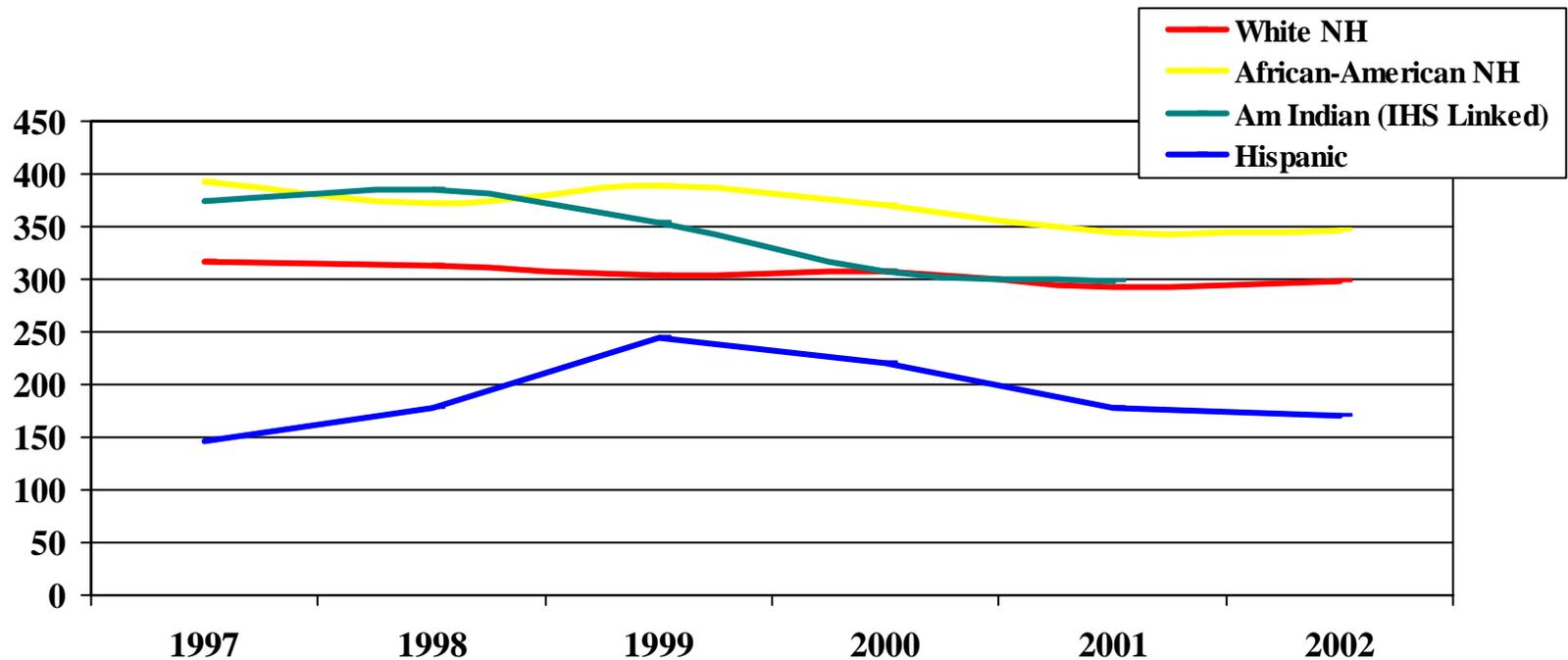
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Rate per 100,000  
Age-adjusted to 2000 US Population



# Deaths due to Heart Disease by Race and Ethnicity Oklahoma 1997-2002



Rate per 100,000  
Age-adjusted to 2000 US Population

AI IHS Linked data unavailable for 2002.



# Quality Improvement in Medicare:

## *Acute Myocardial Infarction and Heart Failure*

Oklahoma Foundation for Medical Quality





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**2000 Age-Adjusted Death Rates for Total Cardiovascular Disease, Coronary Heart Disease and Stroke by State (includes District of Columbia and Puerto Rico)**

Maps showing age-adjusted death rates by state for cardiovascular disease, coronary heart disease and stroke are available in the [Death Rates by State](#) fact sheet at [americanheart.org](http://americanheart.org). See inside front cover for instructions.

State	Total Cardiovascular Disease*			Coronary Heart Disease**			Stroke <sup>†</sup>		
	Rank <sup>¶</sup>	Death Rate	Percent Change <sup>‡</sup> 1990 to 2000	Rank <sup>¶</sup>	Death Rate	Percent Change <sup>‡</sup> 1990 to 2000	Rank <sup>¶</sup>	Death Rate	Percent Change <sup>‡</sup> 1990 to 2000
Alabama	47	393.6	-12.8	17	162.6	-22.6	40	65.7	-11.5
Alaska	12	295.0	-12.6	5	126.9	-29.6	42	65.9	+7.0
Arizona	7	288.2	-18.8	23	169.3	-21.8	11	53.7	-4.1
Arkansas	46	382.3	-10.9	36	194.0	-21.2	51	78.9	-7.2
California	27	326.2	-18.4	32	189.4	-24.1	26	59.0	-14.0
Colorado	5	275.2	-19.1	6	127.8	-35.7	12	55.5	-3.5
Connecticut	17	304.8	-17.7	21	167.2	-23.0	6	49.3	-9.6
Delaware	31	340.3	-19.1	40	195.7	-25.3	8	49.9	-15.6
District of Columbia	44	380.0	-11.4	27	182.5	+6.6	9	50.4	-26.6
Florida	19	309.4	-16.3	35	193.1	-19.8	5	48.8	-11.6
Georgia	45	382.0	-15.7	20	166.7	-29.0	47	70.1	-11.6
Hawaii	4	272.9	-16.6	2	116.5	-27.1	19	57.5	-8.2
Idaho	13	296.0	-14.9	11	149.7	-24.4	34	62.1	-8.7
Illinois	33	347.3	-19.0	38	194.5	-27.4	31	60.1	-9.3
Indiana	38	367.0	-16.2	34	191.3	-25.5	45	67.2	-8.1
Iowa	24	317.5	-17.0	39	195.0	-20.9	21	58.5	-5.7
Kansas	26	323.3	-16.2	15	156.5	-25.9	29	59.4	-6.3
Kentucky	48	393.6	-12.4	44	202.8	-20.9	39	65.5	-7.6
Louisiana	43	375.7	-19.4	31	187.8	-30.3	36	63.4	-12.1
Maine	20	313.3	-20.3	25	173.4	-27.1	17	56.7	-2.2
Maryland	32	347.1	-15.3	30	187.5	-20.0	32	60.1	+0.6
Massachusetts	9	289.8	-22.6	10	148.2	-32.0	4	47.6	-13.0
Michigan	41	373.7	-15.3	45	210.0	-26.1	33	60.3	-8.3
Minnesota	2	257.0	-26.6	3	121.2	-39.3	15	56.5	-17.9
Mississippi	52	439.2	-11.6	48	214.9	-22.4	46	66.1	-10.4
Missouri	40	373.1	-12.2	46	212.4	-17.4	37	63.6	-2.8
Montana	8	288.5	-17.2	7	128.5	-28.1	24	58.8	-11.3
Nebraska	14	296.4	-22.4	9	137.9	-33.8	18	56.7	-8.5
Nevada	29	336.8	-22.6	24	169.3	-28.3	27	59.0	-0.4
New Hampshire	21	314.6	-19.3	33	190.6	-19.4	16	56.6	-8.6
New Jersey	30	339.1	-16.5	42	198.8	-23.8	2	46.4	-16.7
New Mexico	3	269.6	-20.4	12	153.1	-22.5	10	51.3	-4.7
New York	36	354.0	-20.5	52	240.4	-24.7	1	39.0	-24.0
North Carolina	39	368.6	-14.5	29	186.4	-26.4	49	75.2	-8.0
North Dakota	11	294.2	-20.4	19	165.0	-19.0	20	58.2	-9.0
Ohio	37	365.7	-15.8	43	202.7	-23.2	22	58.5	-5.1
Oklahoma	51	413.8	-7.5	51	232.7	-8.8	43	66.5	-2.2
Oregon	10	294.1	-21.1	8	136.6	-35.3	48	75.1	+5.3
Pennsylvania	34	352.1	-17.4	37	194.3	-26.7	14	56.4	-8.2
Puerto Rico	1	253.1	—	4	123.1	—	7	49.8	—
Rhode Island	23	316.0	-20.9	47	214.0	-16.6	3	47.3	-14.2
South Carolina	42	373.9	-18.0	28	185.2	-25.8	52	80.8	-10.7
South Dakota	22	314.7	-18.0	22	169.0	-29.2	28	59.1	-1.0
Tennessee	50	398.2	-12.5	50	227.5	-17.3	50	76.0	-7.6
Texas	35	352.7	-13.7	41	197.0	-18.8	38	64.0	-6.1
Utah	6	280.0	-18.5	1	114.6	-35.7	25	58.8	-6.7
Vermont	18	307.1	-18.2	26	173.5	-27.4	13	56.0	-6.4
Virginia	28	334.8	-20.9	16	160.7	-28.0	41	65.7	-10.8
Washington	16	301.1	-18.8	14	154.6	-25.5	44	65.5	-4.4
West Virginia	49	395.6	-14.6	49	223.6	-20.0	23	58.7	-4.9
Wisconsin	25	321.9	-18.0	18	164.0	-29.6	35	63.3	-6.4
Wyoming	15	297.8	-19.6	13	153.4	-21.2	30	59.7	-9.5
<b>Total United States</b>		<b>345.3</b>	<b>-16.5</b>		<b>188.9</b>	<b>-24.8</b>		<b>58.7</b>	<b>-10.1</b>

	Death from:	Total Cardiovascular Disease	Coronary Heart Disease
Massachusetts	39	209.0	22.0
Michigan	41	373.7	15.3
Minnesota	2	257.0	26.6
Mississippi	52	439.2	11.6
Missouri	40	373.1	12.2
Montana	8	288.5	17.2
Nebraska	14	296.4	22.4
Nevada	29	336.8	22.6
New Hampshire	21	314.6	19.3
New Jersey	30	339.1	16.5
New Mexico	3	269.6	20.4
New York	36	354.0	20.5
North Carolina	39	368.6	14.5
North Dakota	11	294.2	20.4
Ohio	37	365.7	15.8
Oklahoma	51	413.8	7.5
Oregon	10	294.1	21.1
Pennsylvania	34	352.1	17.4
Puerto Rico	1	253.1	—
Rhode Island	23	316.0	20.9
South Carolina	42	373.9	18.0
South Dakota	22	314.7	18.0
Tennessee	50	398.2	12.5
Texas	35	352.7	13.7
Utah	6	280.0	18.5

<http://www.americanheart.org/downloadable/heart/1105390918119HDSStats2005Update.pdf>

# National Priorities for Hospital Quality Improvement

- Acute myocardial infarction
  - 1.1 million Americans each year
  - 400,000 Medicare admissions annually
  - Most common cause of death
- Heart Failure
  - Affects 1-2 million Americans
  - 713,000 Medicare admissions annually
  - Most common reason for hospitalization



# National Performance Measures

## *Acute Myocardial Infarction*

- *Acute Myocardial Infarction*

- *Quality In*

- Early administration of aspirin
- Early administration of beta blockers
- Time to reperfusion therapy

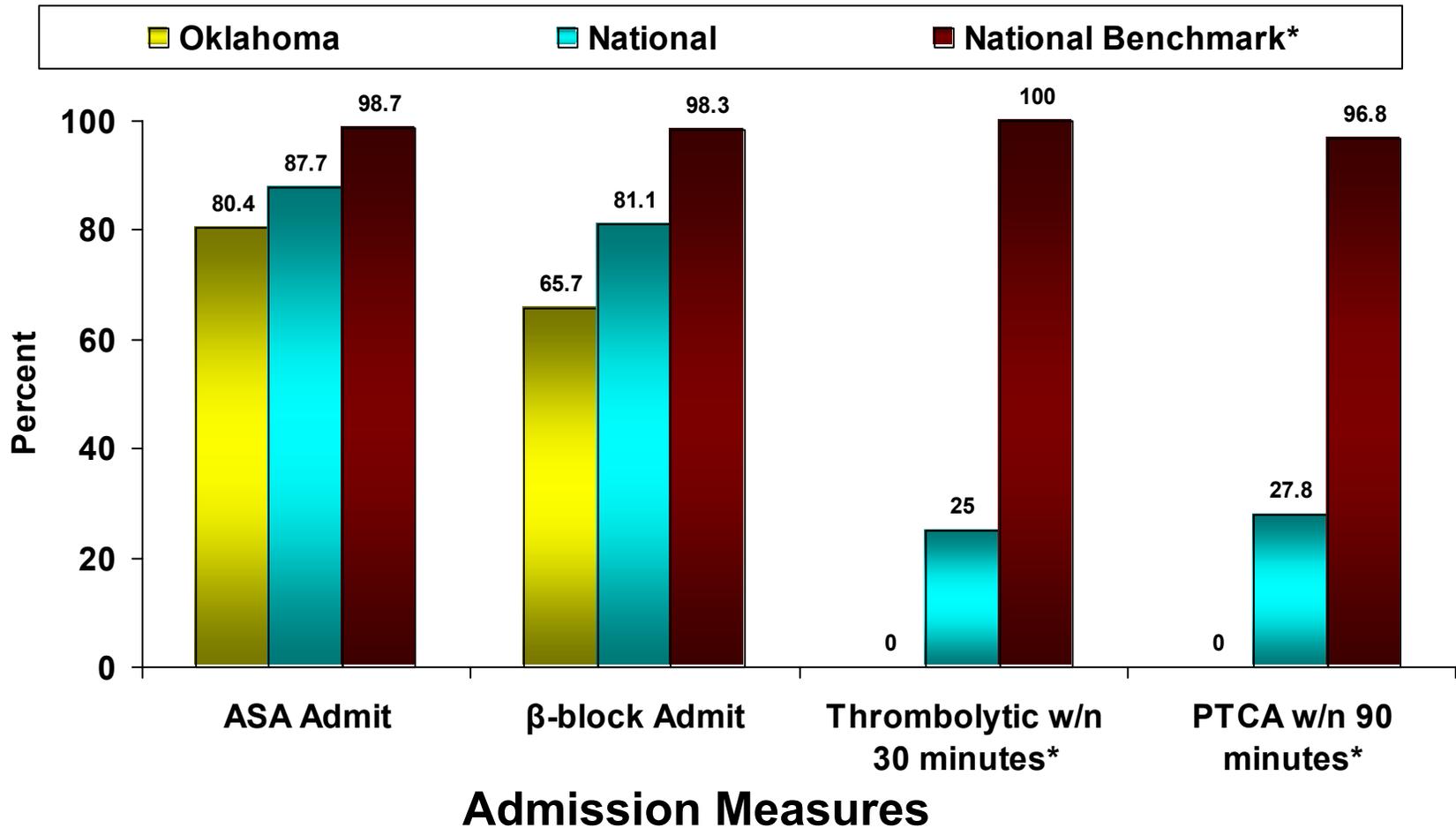
- *Quality Out*

- Aspirin at discharge
- ACE-I / ARB for patients with systolic dysfunction
- Beta blocker at discharge
- Smoking cessation counseling



# Acute Myocardial Infarction

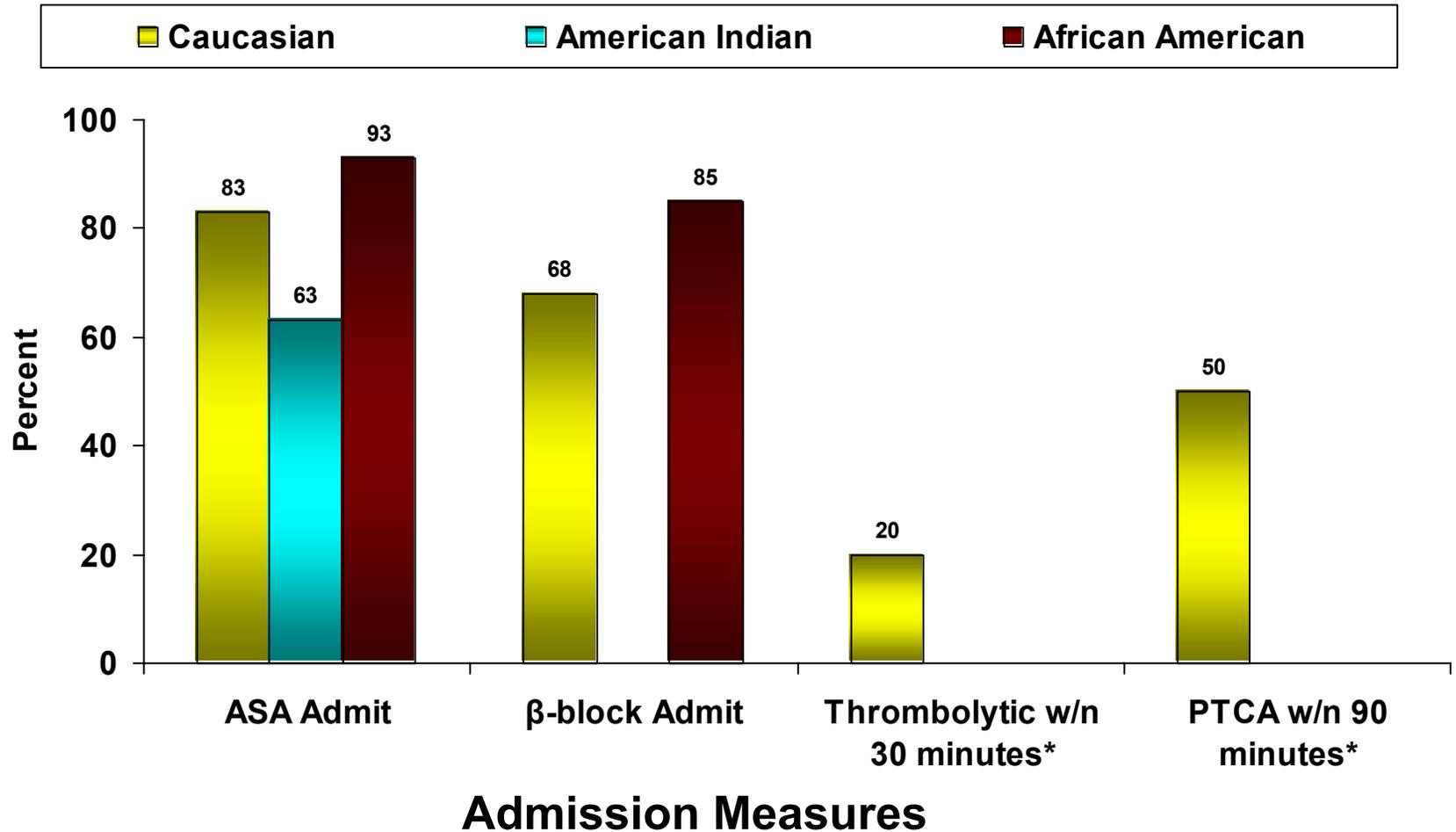
## *Current Surveillance, 1<sup>st</sup> Quarter 2004*



\*For these two measures, the state-specific denominators are very small.

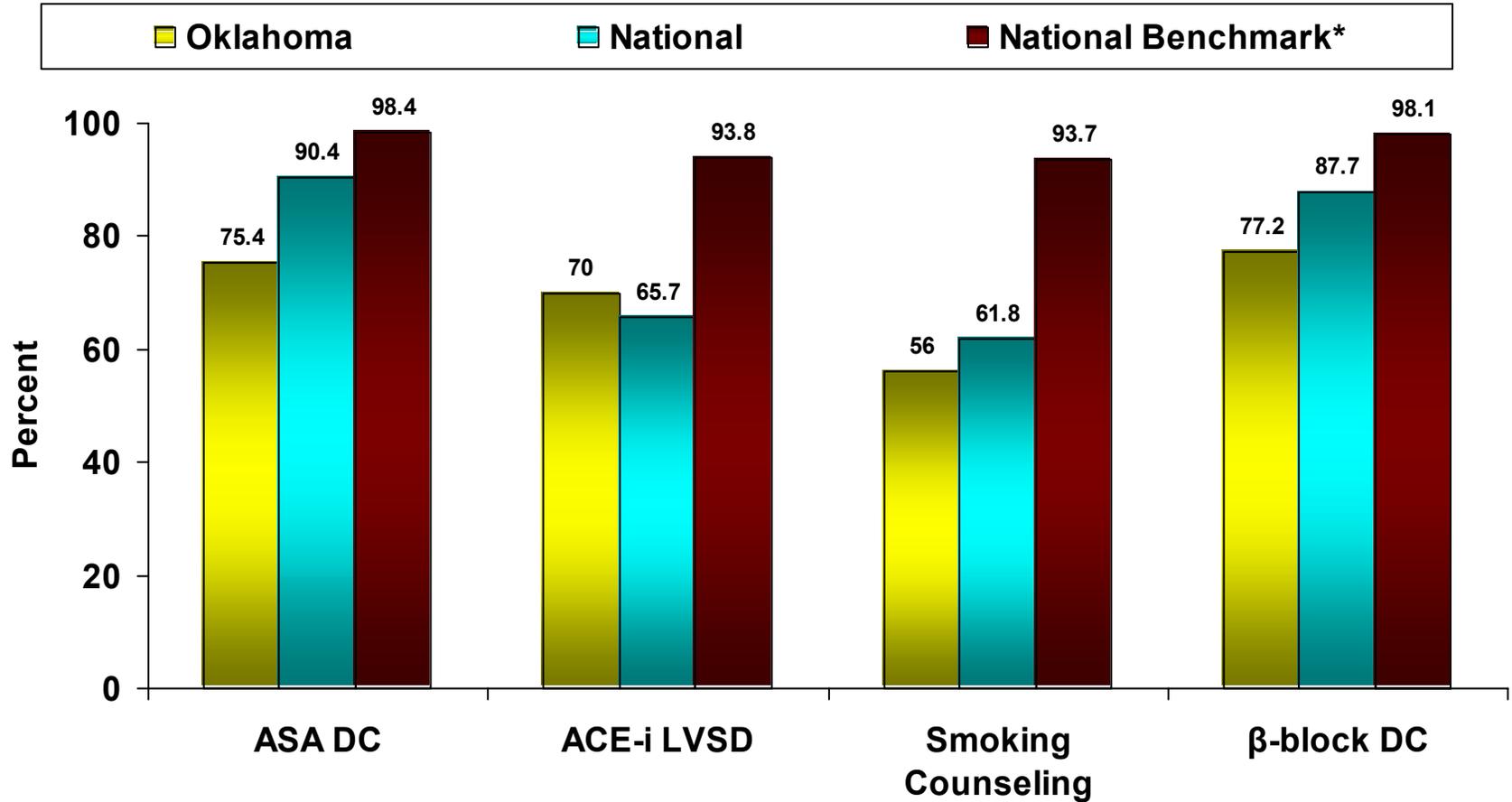
# Acute Myocardial Infarction

## *Current Surveillance, 1<sup>st</sup> Quarter 2004*



# Acute Myocardial Infarction

## *Current Surveillance, 1<sup>st</sup> Quarter 2004*

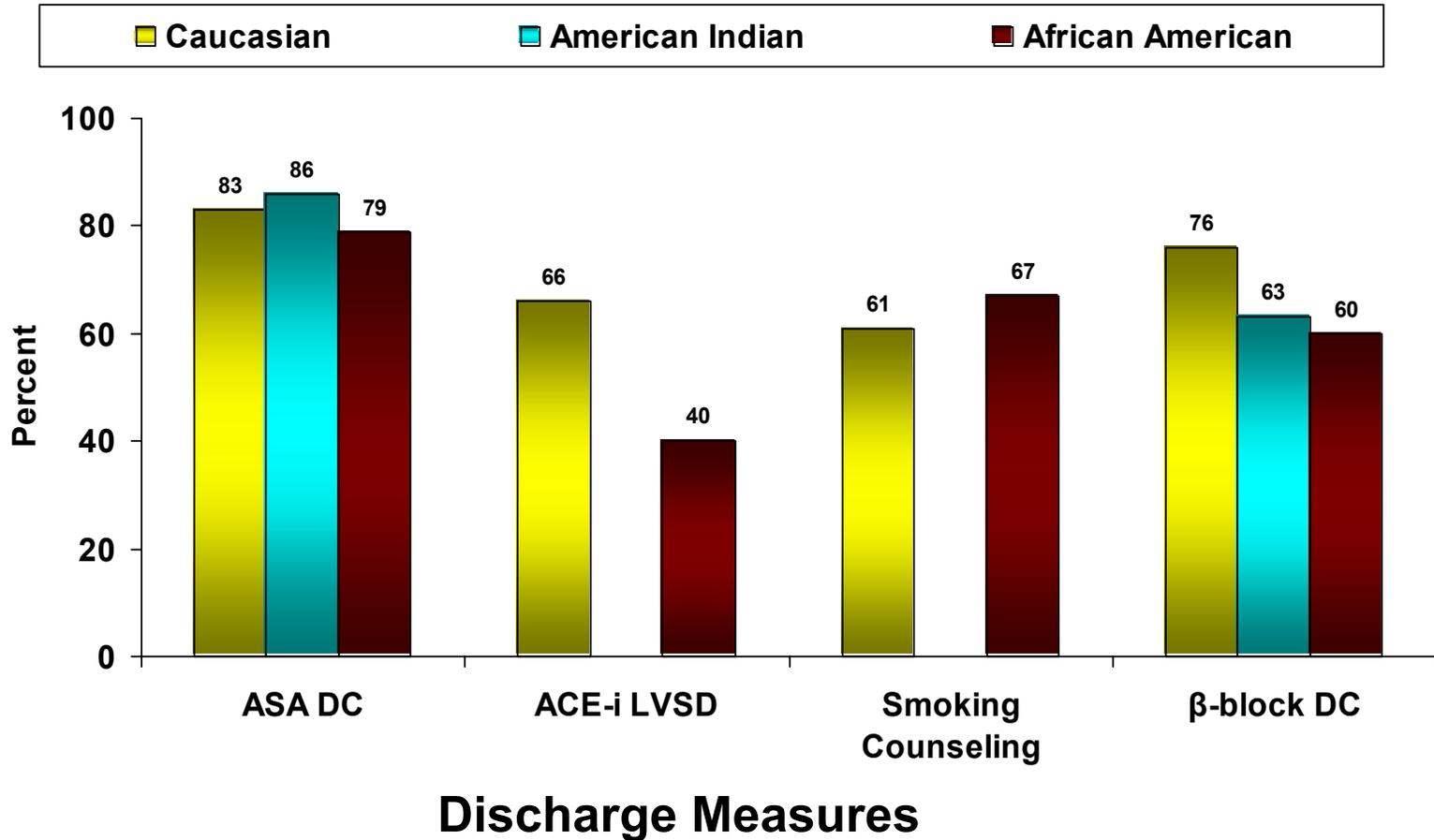


### Discharge Measures



# Acute Myocardial Infarction

## *Current Surveillance, 1<sup>st</sup> Quarter 2004*



# National Performance Measures

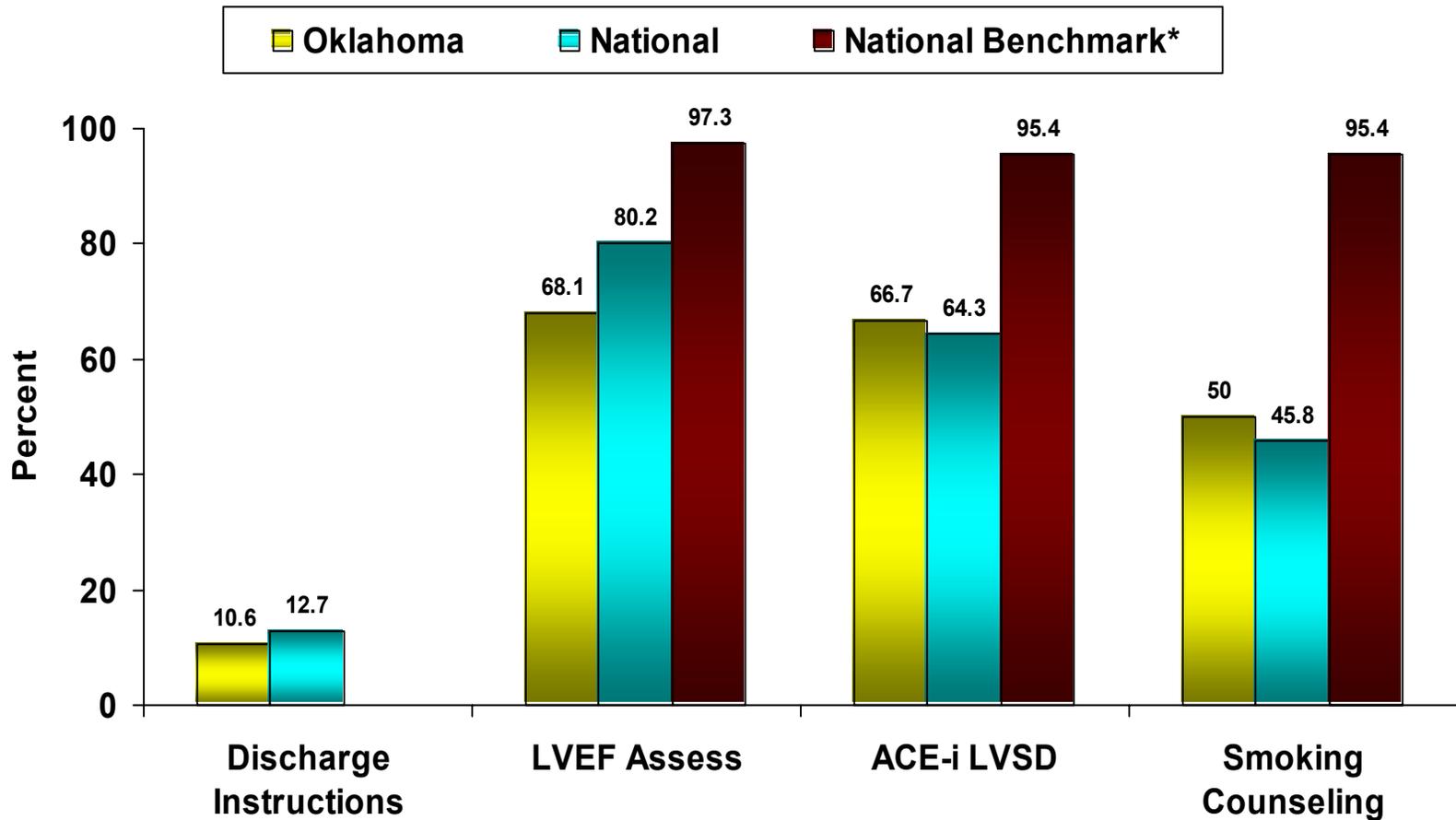
## *Heart Failure*

- *Heart Failure*
  - *Quality In*
    - Evaluation of left ventricular function before or during hospitalization
  - *Quality Out*
    - ACE-I at discharge for patients with systolic dysfunction
    - Discharge instructions
    - Smoking cessation counseling



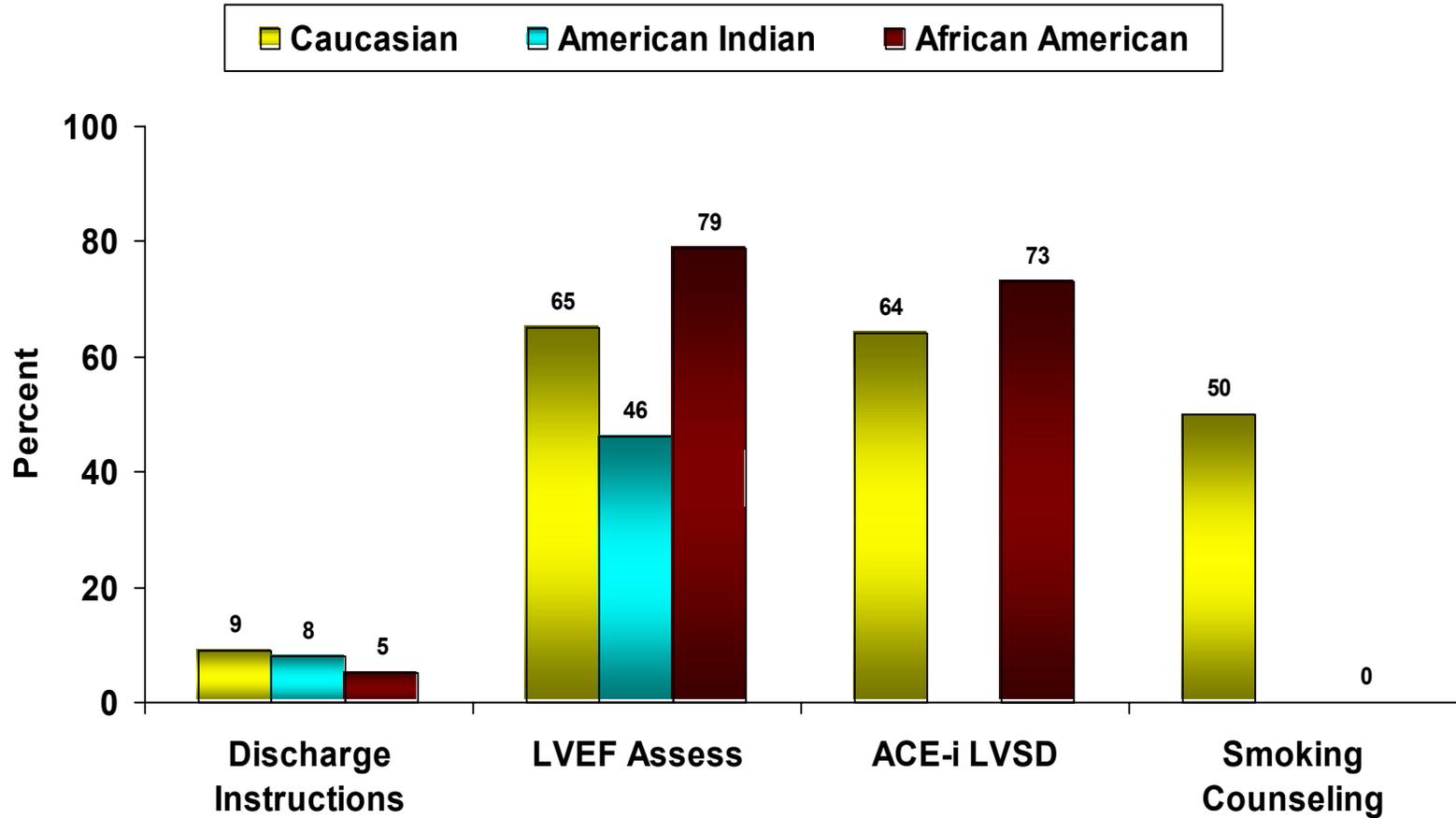
# Heart Failure

*Current Surveillance, 1<sup>st</sup> Quarter 2004*



# Heart Failure

*Current Surveillance, 1<sup>st</sup> Quarter 2004*



# Hospital Public Reporting Measures

- Acute myocardial infarction
  - Aspirin at arrival
  - Beta blocker on arrival
  - Aspirin prescribed at discharge
  - ACE-inhibitor for LV systolic dysfunction
  - Beta blocker at discharge
- Heart Failure
  - Left ventricular function assessment
  - ACE-inhibitor for LV systolic dysfunction
- Pneumonia
  - Antibiotic dose within 4 hours of hospital arrival
  - Oxygenation assessment at arrival
  - Inpatient pneumococcal vaccination rate

Required reporting to Oklahoma State Department of Health for hospital quality report card expected to start in 2005.





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## Hospital Quality Initiative (HQI)

CMS has several efforts in progress to provide hospital quality information to consumers and others and improve the care provided by the nation's hospitals. These initiatives build upon previous CMS and QIO strategies to identify illnesses and/or clinical conditions that affect Medicare beneficiaries in order to: promote the best medical practices associated with the targeted clinical disorders; prevent or reduce further instances of these selected clinical disorders; and prevent related complications. This page includes links to reports and other documents that describe in more detail these efforts that will result in reporting quality information on the cms.hhs.gov site in the Fall of 2003 and on medicare.gov in early 2005.

### Highlights

The [Specifications Manual](#) for National Hospital Quality Measures is now available (09/15/2004).

The "National Voluntary Hospital Reporting Initiative (NVHRI)" will now be known as "**Hospital Quality Alliance(HQA): Improving Care through Information**". These changes will be reflected over the next few weeks.

### HQI Overview

- [Overview Summary](#) (PDF 29 KB)

### Connecticut Partnership

- [Fact Sheet](#) (PDF 110 KB)

### The National Voluntary Hospital

### Premier Hospital Quality Incentive



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### Highlights

**Over 4000 US acute care hospitals reported on quality of care** provided in the first quarter of CY2004, using the 10-measure "starter set" of the Hospital Quality Alliance (HQA). [Data available](#) on November 30, 2004

**Addressing the Influenza Vaccination Measure and the Vaccine Shortage:** [Joint statement](#) (PDF 16K) on collection and reporting on the influenza vaccination measure from the Centers for Medicare & Medicaid Services (CMS) and the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

**Change in Measures that address Angiotensin Converting Enzyme Inhibitor (ACEI) for Left Ventricular Systolic Dysfunction (LVSD) in the Heart Failure and Acute Myocardial Infarction Measure Sets:** Incorporation of Angiotensin Receptor Blockers (ARBs). [Fact Sheet](#) (PDF 478K) describing the

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Search About Data Details Resources

## Welcome to the National Voluntary Hospital Reporting Initiative.

This site provides information on the quality of care in hospitals that have volunteered to report their data for selected clinical topics. This website is the result of a collaborative effort between the Centers for Medicare & Medicaid Services, national hospital organizations, accrediting organizations, consumer advocates, and others. Improvements and updates will occur on a regular basis.

Any hospital that volunteered to participate and submitted 25 or more cases for one or more measures will be included. Critical Access Hospitals can participate and will have the data reported if the 25 case minimum is met for the measure(s) submitted. Despite volunteering to submit quality for public reporting, psychiatric, children's, and rehabilitations hospitals are not currently represented because the displayed clinical conditions are less commonly treated in those settings.

For a listing of hospitals who have volunteered to report their quality information but are not yet included in the current report, visit the [American Hospital Association's](#) (AHA) website. The AHA list includes some psychiatric, children's, and rehabilitation hospitals. Hospitals interested in participating should contact the [American Hospital Association](#).

Information and inquiries concerning the submission of clinical data, and enrollment for clinical data submission may be found at the [Quality Net Exchange](#).

**CONSUMERS:** [Click here](#) for easy to read information.

### Search for hospitals by area (Step 1 of 3)

Please **select a state/territory** from the drop down box where you would like to search for hospitals.

Select a State

volunteers to participate and submits cases for one or more measures can choose to have their data displayed on this website.

In addition to the CAHs, psychiatric, children's, and rehabilitation hospitals have also volunteered to participate in the HQA initiative. Despite volunteering to submit data on quality for public reporting, these hospitals are not currently represented because the clinical conditions assessed by the current measures (heart attack, heart failure and pneumonia) are less commonly treated in those settings. These hospitals may have data included at some point in the future when applicable quality measures are added.

For a listing of the hospitals that have volunteered to report their quality information, including those not currently reporting, visit the [American Hospital Association's](#) (AHA) website. Hospitals interested in participating in the HQA should contact the [American Hospital Association](#).

Information and inquiries concerning the submission of clinical data, and enrollment for clinical data submission may be found at the [Quality Net Exchange](#).

**CONSUMERS:** [Click here](#) for easy to read information.

**Search for hospitals by area  
(Step 1 of 3)**

Please **select a state/territory** from the drop down box where you would like to search for hospitals.

Return to the [Hospital Quality Initiative Home Page](#) on [www.cms.hhs.gov](http://www.cms.hhs.gov) Quality website.

To provide feedback on this section of the website or to suggest ways to improve it, go to the [feedback tool](#) and let us know what you think.

[Search](#)

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[Data Details](#)

[Resources](#)

▶ [Select State](#) > [Narrow Search](#)

### Search for hospitals by area (Step 2 of 3)

There are **102 acute care** or critical access Medicare-certified hospitals that **volunteered** to submit their data for public reporting in **Oklahoma**. Psychiatric, children's, and rehabilitation hospitals are generally not included.

Please select a county below to narrow your search.

- OKLAHOMA CITY
- OKMULGEE
- PAULS VALLEY
- PAWHUSKA
- PAWNEE
- PERRY
- PONCA CITY
- POTEAU
- PRAGUE
- PRYOR
- PURCELL

How to search by all hospitals in **Oklahoma**.

[State >](#)

Select below and click the "Search by City" button.

[Search by City >](#)

- **Name Search**

Enter all or part of a hospital name below and click the "Search by Name" button.

[Search by Name >](#)

**Search for hospitals by area  
(Step 3 of 3)**

There are **14** hospitals that meet your search criteria. Below, select the quality measures that you would like to view **and** the hospitals you would like to compare. You may select individual measures or an entire category. You may select more than one hospital by pressing the 'Control' key and clicking on multiple hospitals or by clicking the left mouse key and dragging the mouse pointer over a range of hospitals.

**Step 3a Select Measures**

[Select All Measures](#)

<input checked="" type="checkbox"/> Heart Attack (AMI) Care	<input checked="" type="checkbox"/> Heart Failure Care	<input type="checkbox"/> Pneumonia Care
<input checked="" type="checkbox"/> ACE Inhibitor for LVSD	<input checked="" type="checkbox"/> ACE Inhibitor for LVSD	<input type="checkbox"/> Initial Antibiotic Timing
<input checked="" type="checkbox"/> Aspirin at arrival	Assessment of	<input type="checkbox"/> Oxygenation assessment
<input checked="" type="checkbox"/> Aspirin at discharge	<input checked="" type="checkbox"/> Left Ventricular Function	<input type="checkbox"/> Pneumococcal Vaccination
<input checked="" type="checkbox"/> Beta blocker at arrival		
<input checked="" type="checkbox"/> Beta blocker at discharge		

**Step 3b Select Hospitals**

[Unselect All Hospitals](#)

- LAKESIDE WOMEN'S HOSPITAL
- MERCY HEALTH CENTER, INC
- NORTHWEST SURGICAL HOSPITAL
- O U MEDICAL CENTER (EVERETT TOWER)
- OKLA CENTER FOR ORTHOPAEDIC & MULTI-SP
- OKLAHOMA HEART HOSPITAL
- OKLAHOMA SPINE HOSPITAL
- PHYSICIANS HOSPITAL OF OKLAHOMA
- ST ANTHONY HOSPITAL
- SURGICAL HOSPITAL OF OKLAHOMA, L L C

View Results >

Data collected nationally from hospitals submitting data to the QIO Data Warehouse\*

\*For a list of hospitals that have volunteered to participate but have not submitted data to the QIO Data Warehouse, see [American Hospital Association's](#) website.

<b>Quality Measures<sup>1</sup></b> Data collected nationally from Hospitals submitting data to QIO Data Warehouse	<b>Top 10% of Hospitals submitting data scored equal to or higher than:</b>	<b>Top 50% of Hospitals submitting data scored equal to or higher than:</b>	<b>DEACONESS HOSPITAL OKLAHOMA CITY, OK 73112</b>	<b>INTEGRIS BAPTIST MEDICAL CENTER OKLAHOMA CITY, OK 73112</b>	<b>INTEGRIS SOUTHWEST MEDICAL CENTER OKLAHOMA CITY, OK 73109</b>
<b>Heart Attack (AMI) Care</b>					
<b>ACE Inhibitor for LVSD</b>	93%	78%	71% of 35 patients <sup>2</sup>	89% of 85 patients <sup>2</sup>	100% of 50 patients <sup>2</sup>
<b>Aspirin at arrival</b>	100%	95%	91% of 127 patients <sup>2</sup>	100% of 210 patients <sup>2</sup>	94% of 199 patients <sup>2</sup>
<b>Aspirin at discharge</b>	99%	94%	87% of 119 patients <sup>2</sup>	99% of 472 patients <sup>2</sup>	92% of 170 patients <sup>2</sup>
<b>Beta blocker at arrival</b>	98%	90%	83% of 101 patients <sup>2</sup>	88% of 147 patients <sup>2</sup>	94% of 144 patients <sup>2</sup>
<b>Beta blocker at discharge</b>	98%	91%	80% of 115 patients <sup>2</sup>	96% of 381 patients <sup>2</sup>	92% of 155 patients <sup>2</sup>

1. See the [technical appendix](#) for a detailed explanation of the measures and how they are calculated.
2. Measure is based upon a sample of hospital's relevant discharges.