Heartburn or Heart Attack?
Know whether it’s dinner or unexpected danger

Paralympians in Training
A sports camp of spins and grins

WHAT IS SEPSIS?
A closer look at this deadly condition and ways to protect yourself
HAVING A BALL

Enjoy special photo coverage of Junior Wheelchair Sports Camp in this issue.
ON THE COVER
Roman Wachter’s nagging toothache turned into a race to save his life when he arrived in the emergency room with sepsis. Learn what it means to have septic shock.

DEPARTMENTS
Letter from the President  3
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Looking for the Valley lab?
As of September 30, it will be located at 2028 Village Lane, Suite 204 in Solvang. That’s the Pacific Diagnostic Laboratories (PDL) patient service center, now in a larger, renovated space and serving patients from 7:00 am to 5:00 pm. www.pdllabs.com

BUILDING THE NEW GVCH
Construction continues on the new Goleta Valley Cottage Hospital, with completion less than a year away.

FEATURES
4 HEARTBURN OR HEART ATTACK?
K.C. survives the unexpected.

6 JUNIOR WHEELCHAIR SPORTS CAMP
Campers convene for a week of sports and camaraderie.

11 WHAT IS SEPSIS?
A body’s response to infection can quickly turn into medical emergency. Know the signs.
GAME ON
A Junior Wheelchair Sports camper protects the ball on court. One of the week’s highlights for campers is competing with members of the UCSB men’s and women’s rugby teams. Read more on page 6.

Our Not-For-Profit Hospitals

Santa Barbara Cottage Hospital (SBCH) Today a 510-bed acute care teaching hospital and level II trauma center, the largest of its kind between Los Angeles and the San Francisco Bay Area, the hospital was founded in 1888 by 50 women determined to provide a healthcare facility for the growing community of Santa Barbara. With annual admissions of 18,144 patients, 43,811 emergency department visits, and 2,300 births, the hospital is renowned for its comprehensive maternal-child and pediatric services (Cottage Children’s Hospital), cardiac, neurosurgical and oncology programs, emergency and trauma services, modern operating rooms, sophisticated diagnostic radiology equipment, outpatient surgery, eye center, psychiatric and chemical dependency services, and inpatient and outpatient rehabilitation services (Cottage Rehabilitation Hospital).

Its medical staff of more than 600 includes specialists in all major clinical areas, many of whom are involved in the training and education of new physicians in the hospital’s internal medicine, general surgery and radiology residency programs.

Goleta Valley Cottage Hospital (GVCH) Founded in 1966 to serve the growing community of Goleta Valley, the hospital today is licensed for 122 acute-care beds, admits 1,545 patients a year and sees 18,427 emergency visits. Recognized for its Breast Care Center, specialized subacute unit and Center for Wound Management, the hospital joined forces with Cottage Health System in 1996.

Santa Ynez Valley Cottage Hospital (SYVCH) Offering acute-care services to the residents and visitors of the Santa Ynez Valley since 1964, the 11-bed hospital became affiliated with Cottage in 1995, and today continues to provide inpatient and outpatient surgery, 24-hour emergency services, and a physician office rental program that brings specialists to the Valley on a regular basis. Inpatient admissions in 2012 totaled 228. There were 6,643 emergency visits, and Valley residents increasingly rely on the hospital’s busy outpatient radiology and laboratory services. (Statistics from the year 2012)
Dear fellow community members,

I hope this issue of “Cottage” finds you in good health and looking forward to the celebrations of fall on the Central Coast. With construction progressing at Santa Barbara, Goleta Valley and Santa Ynez Valley Cottage Hospitals, we continue to enhance services for the health and wellness of our communities.

Cottage Children’s Hospital has developed into a regional referral center and a Level II Pediatric Trauma Center verified by the American College of Surgeons, making it one of only seven verified pediatric trauma centers in California. Santa Ynez Valley Cottage Hospital now has its own permanent MRI scanner to serve Valley residents, and Goleta Valley Cottage Hospital’s Center for Wound Management recently opened a clinic in Solvang.

The summer closed with the much-anticipated annual Junior Wheelchair Sports Camp at UCSB, sponsored by Cottage Rehabilitation Hospital and the CRH Foundation. (See photos in this issue.) We’re grateful for the many volunteers and generous donors who support the Cottage Rehabilitation Hospital Foundation to help make this fun event accessible to youth from the tri-county area.

October brings the next series of changes defined by the Affordable Care Act. It marks the beginning of the first open enrollment through Covered California, the state’s health insurance exchange, which will provide insurance products for those entitled to federal subsidy. Actual coverage will begin January 2014. We will also see an expansion in the eligibility for MediCal for patients earning up to 138% of the federal poverty level. With these and other efforts to increase access and affordability, further improve quality, and provide the best possible patient experience, formal collaboration among physicians, hospitals, and other providers will be critical. We are excited about the potential affiliation with Sansum Clinic and will keep you updated as discussions unfold.

As always, I welcome your feedback on how Cottage is doing in meeting your expectations and in fulfilling our core values of excellence, integrity and compassion. Thank you for your continued trust and support. It is our privilege to care for this community.

Ron Werft
President and CEO
Cottage Health System
K.C. Wash was convinced it was acid reflux when he felt a burning pain in his chest. The pain was so intense it woke him from his sleep in the middle of the night at the beginning of a June weekend.

He had attended a formal event the evening before and thought it must have been something he ate. “I had a lot of appetizers, so I thought I had indigestion,” K.C. said. “I drank some water and the pain seemed to go away. But two hours later it came back.”

By Sunday morning, the pain was again so intense that his wife, Rhonda, convinced him to consult a doctor.

Shortly after, Dr. Thomas Watson, medical director of the cardiac catheterization laboratory at Santa Barbara Cottage Hospital, received a call about K.C.’s symptoms. “I said that K.C. needed to get to the emergency room right away,” Dr. Watson recalled. “Heart attack symptoms often mimic symptoms of indigestion. The symptoms described sounded more serious than acid reflux.”

In the emergency room, K.C. and his wife received shocking news. Blood tests confirmed that he had experienced a heart attack. K.C. was rushed to the cath lab for a diagnostic angiogram. Doctors discovered a great deal of coronary artery disease and blockage. Two areas had more than 90 percent blockage. This meant that K.C. would need to have open heart surgery and a quadruple bypass.

“Never in my life had I ever had any problems that would make me think I was at risk for a heart attack,” K.C. said. “I’ve always been very active. I like hiking, skiing, mountain biking. I always thought I was in pretty good health.”

Sudden heart attack with no previous symptoms is quite common. “The majority of heart attacks, more than 50 percent, occur suddenly, with no symptoms or warning signs,” said Dr. Watson. “K.C. had a few extra pounds on him, like most of us do, but he was very
active. He was a non-smoker, he did not have diabetes or high blood pressure, and his cholesterol level was not that elevated. He didn’t have any of the standard risk factors.”

Dr. Watson advises that anyone who feels strong discomfort in the upper chest area should seek immediate medical attention, especially if the pain is prolonged or coming and going. “They need to get to the emergency room quickly. And we have a program to ensure that the most serious heart attack cases will get to us right away.”

That program is the Comprehensive Cardiac Care System, launched in Santa Barbara County in 2010. The program assures that paramedics can perform an EKG upon arrival and will transport people experiencing a serious heart attack or STEMI directly to a hospital that is designated as a STEMI Receiving Center. Santa Barbara Cottage Hospital has this important designation. It has the required equipment and staff to provide rapid intervention and care.

STEMI stands for “S-T Elevation Myocardial Infarction,” which is the most serious form of heart attack. In this situation, a heart artery is completely blocked with no flow to a portion of the heart muscle.

A designated STEMI hospital is able to perform a procedure known as cardiac catheterization (also called percutaneous coronary intervention) to open blocked arteries and restore blood flow to the heart. The goal of a Comprehensive Care System is to open closed coronary heart arteries within 90 minutes of the emergency call to 911.

Rapid response saves more heart muscle from damage.

“During a heart attack, time is muscle,” said Dr. Watson. “The longer the artery is blocked, the greater the amount of heart muscle damage. That increases the chances of disability and even death.”

Fortunately for K.C., he got to the emergency room in time. The surgery was a success and his recovery went well.

“After my cardiac rehab ends, doctors told me I could go back to doing all the things I loved to do,” said K.C. “I can’t wait to go golfing, kayaking and boating.”

Because of his experience, K.C. has radically changed his diet. But it’s not the thought of open heart surgery or even the 14-inch scar down his chest that makes him think twice about eating tri-tip or hamburgers.

“I don’t ever want that breathing tube down my throat again,” K.C. said with a chuckle. “Now my favorite food is fish.”

Dr. Thomas Watson, medical director of the cardiac cath lab at Santa Barbara Cottage Hospital, suspected that K.C.’s symptoms were indicating something serious, despite K.C.’s lack of risk factors or history of heart disease.

The most serious form of heart attack is an S-T Elevation Myocardial Infarction or STEMI. In this situation, a heart artery is completely blocked with no flow to a portion of the heart muscle.

Symptoms of Severe Heart Attack (STEMI):
- Chest pain or pressure
- Pain (either sudden or gradual) that builds to a severe discomfort
- Difficulty breathing
- Pain that spreads to shoulders, arms, neck or jaw
- Nausea and/or sweating

*BY MARIA ZATE | PHOTOS BY GLENN DUBROCK*
In July, 44 campers age 6 to 19 enjoyed a week at Cottage Rehabilitation Hospital’s Junior Wheelchair Sports Camp, funded by CRH Foundation and held at the UCSB Recreation Center. The program is now an official Paralympic Sports Club, with two former Paralympians as instructors, and abounds with activities tailored to the abilities of those who use a wheelchair to participate in sports – basketball, tennis, sit volleyball, hand cycling, wheelchair racing, decathlon events, swimming, soccer and more.
this is better School - HANNAH than

"Why can't we do this all the time!" - Devin
Local glass artist Roman Wachter with his girlfriend, Tegan McCloud.
Roman Wachter thought he had a pesky tooth infection. It would flare up now and then, but each time the pain would subside within a few days. At 32 years old, Roman was healthy and athletic. He didn’t rush to see a physician. He never imagined a toothache would turn into something that put his life in peril. But that it did, placing him in the hospital for a harrowing seven weeks.

Roman’s girlfriend, Tegan McCloud, arrived home from work on February 4, 2013, to find him in severe pain, barely able to talk. “His throat was so swollen I could hardly see his neck,” Tegan says, recalling how alarmed she felt. “I knew right then he needed to get to the hospital.”

Tegan and her mom rushed Roman to Santa Barbara Cottage Hospital’s Emergency Department. He was declining quickly and losing alertness. The medical team in the ED recognized signs of septic shock. They took immediate action, administering intravenous fluids and antibiotics in an attempt to stop the dangerous spiral of organ failure happening in Roman’s body.

Roman had severe infection of soft tissue in his jaw (Ludwig’s angina) and the bacteria had spread into his chest cavity. Surgeons extracted five teeth and inserted multiple tubes to drain infected fluid around his lungs.
Roman’s lungs and airway were so compromised that doctors had to perform a tracheostomy and use a mechanical ventilator to help him breathe. They placed him in a medically induced coma to facilitate breathing on the ventilator and continued aggressive treatment. Diagnostic tests revealed that Roman had suffered other complications of the infection, including septic arterial embolism in his brain — tiny lesions likely caused by small infected clots.

“Sepsis is potentially fatal in a very short amount of time,” says Dr. Jeffrey Fried, who is credited with establishing life-saving sepsis protocols at Cottage. “For every hour of delay in beginning antibiotic treatment there is a 7.5 percent decrease in survival rates.”

“If Tegan hadn’t gotten Roman to the hospital when she did, his organs would’ve shut down completely, and possibly irreversibly. It’s why our medical team is trained to recognize the signs of sepsis and initiate a sequence of rapid responses. That’s exactly what happened when Roman arrived in our emergency department.

“Cottage has been working on sepsis protocol longer than most hospitals. We’ve been at this a long time. I think that’s why our survival rates are so good.”

Roman, though, was in severe septic shock. His organs had already begun shutting down by the time he reached the hospital. Doctors were unsure whether he would survive. After a week of intensive treatment and multiple surgeries, they discontinued the sedation that was keeping his body in a coma, but still he did not awaken. Finally, on Valentine’s Day, he opened his eyes and recognized Tegan.

“Then I knew. I knew things would be okay,” Tegan says matter-of-factly, “because I know him pretty well. He’s stubborn. If anyone could come out of it, he would. He would get better.”

True to Tegan’s prediction, within a week Roman was beginning to walk outside his room, working hard to regain his strength.

“Mobilizing patients as early as possible helps their muscles and helps to keep their lungs clear of fluid — key factors that contribute to fewer complications and fewer days in the hospital,” says Paula Gallucci, RN, clinical manager of the medical intensive care unit at SBCH, recalling Roman’s extraordinary effort to walk and explaining the staff’s dedication to the effort. “Past convention was bed rest for the most critical patients, for the duration of their time in critical care units. But our research has shown that it actually helps patients recover faster to have them upright and taking steps as soon as they’re able, even while they may still have a ventilator. It’s a practice that’s not yet implemented in all hospitals because it takes a whole team to help a patient walk with a ventilator. It takes a lot of coordination of resources — respiratory therapy, physical therapy, nurses — everyone has to work together to keep the patient safe.”

For the duration of his stay in the hospital, Roman continued to walk and rehabilitate but couldn’t swallow properly. He was discharged with a feeding tube in his stomach to help him maintain nourishment. But Roman was determined to eat. He’d lost 50 pounds during the ordeal.
“Two and a half months without food is NOT COOL,” Roman emphasizes.

Today Roman is able to eat, though it may take many months for him to regain his strength entirely. From the look of his brain scan, doctors suspect his body had infection for close to a year before it was discovered and resolved.

“He has so many surgical scars, on his back and shoulders where tubes were placed. It looks like he was bitten by a shark,” says Tegan. “It’s hard to explain to people that it all started with his tooth.”

What is sepsis?

Sepsis is a condition caused by an overwhelming immune response to infection. The response results in inflammation and impaired blood flow. The body begins to cause damage to its own organs and tissues. Severe sepsis can lead to septic shock, multiple organ failure, and death. Early detection and treatment is paramount to survival.

Cottage Health System has been ahead of the curve in aggressively looking for, and proactively treating sepsis, the leading cause of death in US hospitals. Approximately 750,000 Americans are struck with sepsis each year, and that number is growing. The national mortality rate in these cases is estimated at 25–30 percent. Since 2008, the sepsis mortality rate at Santa Barbara Cottage Hospital has been substantially lower, at 5.6 percent.

Cottage’s success in battling sepsis — and its most severe form, septic shock — is due largely to a unique protocol implemented in 2005. Few other hospitals in the nation have such high survival rates for sepsis patients.

At Cottage, over 80% of patients with septic shock survive. The national average is approximately 64%.

Nurses and resident physicians are specially trained to identify septic patients, as they did in Roman’s case, and initiate a sequence of orders that includes expedited critical lab tests, immediate IV fluids and medication. The sepsis protocol developed at Santa Barbara Cottage Hospital was put in practice at Goleta Valley and Santa Ynez Valley Cottage Hospitals, with similar dramatic increases in survival rates.

Preventing infection is the best way to prevent sepsis.

Washing your hands is the first step toward preventing the spread of infection every day.

Cottage is committed to preventing infection and providing the best care to our patients. “We’re getting better and better at treating infection, and preventing it — our hospital infection rates are some of the lowest in the country, they really are exceptional — but bacteria is out there and we have to maintain constant vigilance. We educate our staff, monitor our progress and review our data daily. We don’t let our guard down,” says Dr. Fried. Find Cottage’s infection data online: www.cottagehealthsystem.org.

Sepsis is a medical emergency. Seek immediate medical attention — especially if you have a diagnosed or suspected infection — if you feel sick and have any of these symptoms:

• Extreme weakness, dizziness or confusion
• Loss of appetite
• Fever and chills
• Excessive thirst
• Signs of compromised organ function: difficulty breathing, rapid heart rate, low blood pressure, low urine output

Infection always comes before sepsis. Always practice good hand hygiene to help prevent the spread of germs, and seek medical attention for any illness that seems to be unusual in its lingering or worsening.
Free Head Injury Recovery Group
Keck Center for Outpatient Services of Cottage Rehabilitation Hospital offers a free, 16-week program of education, skill-building, coping, cognitive strategies and support for individuals experiencing persisting problems for six months or more after a mild closed head injury (Post-Concussive Syndrome). These problems can affect mood, self-esteem, work and relationships. The group offers an environment in which individuals receive support, learn about the recovery course after mild head injury and work on specific skills for improvement.

The group is facilitated by neuropsychologists and psychotherapists. It is fully funded by Cottage Rehabilitation Hospital Foundation. For more information, contact Mark Alfano, PhD, at 805-569-8960.

Help Bring Healing Arts and Gardens to the New GVCH
At the new Goleta Valley Cottage Hospital, indoor and outdoor spaces are being designed to feature art that inspires the human spirit and promotes health and wellness. Based on a growing body of research suggesting a relationship between art and improved patient outcomes and quality of life, an international movement to bring art into hospitals has emerged. If fundraising efforts for the program succeed, GVCH’s new Healing Arts and Restorative Garden Program will bring more than 285 pieces of art and a third-acre of tranquil garden space to the patient care environment. Construction is slated for completion next year.

The plan for the Restorative Garden celebrates the unique beauty of our region and the tradition of compassionate care at GVCH. It offers mountain views in a patient-accessible garden with a wide path meandering along a soothing stream. The garden will provide families, caregivers, staff and volunteers with a peaceful place for reflection and restoration.

As part of the program, artists from the Central Coast have been selected to create art that conveys a spirit of optimism, hope and healing. Themes for the art reflect our community and include Goleta’s rich agricultural history, innovation, and association with UCSB, along with nature and ocean scenes. Shown above is artist Hank Pitcher’s sketch for a proposed work to be featured in the new hospital lobby (at left).

You can help make GVCH’s Healing Arts and Restorative Garden Program a reality. Sponsorships and naming opportunities are currently available for community members to be a part of this exciting program. To learn more, please contact Tanya Gonzales in the GVCH Foundation office: 805-696-7918.
A Message on Giving

I’m Bob Andrews, former Chair of the Cottage Health System Board of Directors. It has been my privilege to practice law in Santa Barbara for the past 45 years. I have seen firsthand the powerful effect of thoughtful and generous charitable gifting.

The new Santa Barbara Cottage Hospital stands as a monument to this community’s generosity. The legacy and support of over 5,500 Central Coast residents has made it possible. As we look around, we see the power of philanthropy everywhere on the Central Coast – in our schools, parks, libraries, and through the good works and accomplishments of our local not-for-profits. Although there are many worthy charities in our community, each of us knows that good health and quality health care are priceless. As you consider your personal philanthropy for 2013 and beyond, I want to encourage you to make a gift to ensure quality health care for generations to come, through your Trust, Will or estate plan.

You may designate any of the following as beneficiaries:
- Santa Barbara Cottage Hospital
- Cottage Children’s Hospital
- Cottage Rehabilitation Hospital
- Goleta Valley Cottage Hospital
- Santa Ynez Valley Cottage Hospital

You may make a gift of particular assets such as:
- A specific dollar amount
- A percentage of your estate
- A part of your retirement account
- A particular asset
- The residue of your estate after everything else has been settled

Talk to your family and to your advisor. Remembering Cottage in your Trust, Will or estate plan can be relatively easy and cost-effective but the long-term impact can help others achieve optimal health care when they need it most.

And one more thing: Please let Carla Long, in Cottage’s Office of Planned Giving (805-879-8987), know about your plans. Each year we celebrate donors, like you, who have remembered Cottage through a deferred gift. The 10th anniversary celebration of the Cottage 1888 Society will be held November 6, 2013 at the Biltmore Hotel. We would love to include you among those we honor and celebrate your commitment to excellence in health care.

CHARITABLE GIFT ANNUITIES

Fluctuations in retirement and other asset values have made it more difficult than ever to predict exact levels of retirement income. To help decrease the uncertainty, some of Cottage’s friends are combining charitable planning with retirement planning – a creative strategy that provides an opportunity to fulfill meaningful philanthropic goals while securing a reliable retirement income stream. This gift vehicle is called a charitable gift annuity. How does it work?

- Transfer selected assets to the Santa Barbara Cottage Hospital Foundation, designated to the Cottage hospital of your choice.
- Receive a tax deduction for a portion of the assets.
- The Foundation will pay you a specific amount each year beginning at a time of your choosing.
- Your future income is guaranteed regardless of what happens in the market.
- In certain cases, a portion of your future income may be tax-free.

Cottage’s charitable gift annuity rates can provide an attractive alternative to the low rates currently available on CDs and other traditional investments.

The chart here shows Cottage’s rates at various representative ages for an immediate annuity. Rates for a deferred annuity may be even higher. For a confidential, complimentary, no-obligation proposal, call Carla A. Long, Director of Planned Giving, at 805-879-8987.

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COMMUNITY HEALTH PROGRAMS

Childbirth & Breastfeeding
Santa Barbara Cottage Hospital
Information: 805-569-8229

Community CPR
Infant/child and adult courses
Santa Barbara Cottage Hospital and
Santa Ynez Valley Cottage Hospital
Reservations/Information: 805-569-8229

Diabetes Classes: Living Well
Goleta Valley Cottage Hospital
Free ongoing classes.
Information: 805-681-6441

Glaucoma and Hearing Screenings
Mondays 11:00 am – 1:00 pm
Thursdays 2:30 – 4:30 pm
SBCH MacDougall Eye Center
Free. Information: 805-569-8264

Healthy Balance
Weight Management Clinic
8-week weight-loss program focusing on healthy
choices for nutrition and exercise.
Call for date of next orientation meeting:
805-569-7201

Heart Smart Lecture Series
Santa Barbara Cottage Hospital
Wednesdays 10:00 – 11:00 am
Free. Information: 805-569-7201

Memory Mingle
Second Monday of each month
10:00 – 11:30 am
Free. Information: 1-855-CHS-WELL (toll-free)

Nutrition and Diabetes Class
Santa Ynez Valley Cottage Hospital
Wednesdays Noon – 1:00 pm
Free. Information: 805-681-6431 x72351

Pediatric Asthma Education Fair
Goleta Valley Community Center
Saturday, November 9
10:00 – 3:00 pm
Free. Information: 805-569-7207

Smoking Cessation
Next course October 8.
Call for reservations: 1-855-CHS-WELL (toll-free)

Weight-Loss Surgery Seminar
Ongoing seminars at various locations.
Details on our website under Our Services.

Flu shot clinics begin September 28.
View the schedule at www.cottagehealthsystem.org or call 1-855-CHS-WELL.