SECEIVED

JUL 13 2011

Medical Facilities
Planning Section

Cardiologist Comments on Presentation of Special Needs Petition for Shared Fixed Cardiac
Catheterization Laboratory,
Iredell County,
Proposed 2012 State Medical Facilities Plan
Greensboro, July 13, 2011

Good afternoon, my name is Jim Bradford. I am one of 9 practicing cardiologists with privileges at Iredell Memorial Hospital and Davis Regional Medical Center. I have practiced in Statesville for 30 years.

I have made the special trip today to support this petition, because the cardiac catheterization at Iredell Memorial is important to me and my patients. Iredell Memorial has an excellent program. I think so and the rating agencies agree. It is accredited by The Joint Commission and it meets all of the Standards for the American College of Cardiology for both therapeutic and diagnostic cardiac catheterization. In addition, the Hospital recently received recognition from the American Heart Association as a Get With the Guidelines — Heart Failure Gold Quality Achievement Award winner. Most importantly, I trust them with the care of my patients every day.

We are forty minutes or more from the nearest open heart surgeons and tertiary cardiac catheterization programs. Some patients we serve live more than 1.5 hours away from the open heart surgery hospitals. Without open heart back-up on site, other physicians in the community and I are very careful about which patients we refer to the program versus transferring to a tertiary center. If open heart is possibly indicated, we refer to Winston Salem or Charlotte, where excellent, well-developed cardiac programs can provide the patient care they need. However, many patients are low risk for open heart surgery. Iredell Memorial serves these patients well. Our clinical outcomes are excellent, and the growth in the cardiology services at Iredell Memorial Hospital has reflected this quality of care.

I have choices in Iredell County. And I choose Iredell Memorial's program, because it is full service. They have invested in the staffing quantity and quality. Their cardiac catheterization laboratory has full time dedicated staff that works only in the catheterization laboratories. The nursing staff is trained in careful removal of the access sheath, and in patient management for optimum clotting time. Lab, emergency

room and management support the program such that we can respond very quickly even when the procedures are unscheduled or emergent.

Using the existing EP/ Angiography lab is an ideal solution for managing growth. It is economical because the hospital does not have to invest additional capital, and it provides the medical staff access to the equipment we need to have for our patients. The physicians at Iredell Memorial can work together on patient schedules to make this a very cost effective solution. We all appreciate the importance of critical care for critical patients. We do not know at what level the program growth in cardiac catheterization will reach its maximum. A shared lab will permit us to expand and meet the needs of our patients.

Thank you for your time and attention. I urge you to support this petition and to let us move on with using the EP/ angio laboratory for a third purpose as soon as possible. I too am open to questions.