

Patient Considers Vanderbilt Rehabilitation a Blessing

Seventy-nine-year-old Sally Sayre was visiting family north of Rhode Island. Over dinner, she suddenly “didn’t feel right,” passing out minutes later. An ambulance whisked Sally off to Dartmouth-Hitchcock Medical Center.

Sally had suffered a massive hemorrhagic stroke, which occurs when a blood vessel in the brain ruptures and bleeds into the surrounding brain. These strokes account for 13 percent of stroke cases, and most patients don’t survive them.

Sally’s husband, Ford, and their children raced to New Hampshire. Sally’s bleed stopped on its own but damaged her ability to comprehend and express language, known as aphasia. But, Sally survived.

After nine days in the hospital, it was time for rehab. Knowing the reputation of Vanderbilt Rehabilitation Center at Newport Hospital, Ford advocated for Sally to be transferred home to the Ocean State.

When the ambulance arrived at Newport Hospital, Ford knew Sally was in the right place. “Sally was on her road to recovery, needing to relearn basic words and how to walk and eat. They just enveloped her,” says Ford. “The care she received at Vanderbilt was just that, caring.”

It wasn’t easy, but with her family’s constant support, the care of her doctors and nurses, and the daily physical, occupational and speech therapy, Sally made a remarkable recovery.

“Sally had quite a significant stroke. When she arrived at Vanderbilt she had trouble finding the right words to express herself, but during her stay she rebounded



significantly,” explains Mustapha Kemal, MD, medical director of Vanderbilt Rehabilitation Center.

After more than two weeks, when Sally was able to walk, use the stairs, eat, and recognize faces and names, she was ready to leave Vanderbilt. “By the time she was discharged, she had improved to a level that if I hadn’t known of her stroke, I wouldn’t suspect she had one,” says Dr. Kemal.

Nine months later, Sally continues speech therapy to help with the aphasia, but overall has made measurable progress and is back to her active lifestyle. She says, “I count my blessings that one of the best centers for stroke rehabilitation in the country is right here at Newport Hospital.”



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Emergency Care is No Accident

John remembers seeing the triage nurse in our emergency department when he arrived experiencing excruciating abdominal pain. He later described her as calm, knowledgeable and caring. She made him feel that everything was going to be okay.

Within minutes, Anthony Napoli, MD, director of the emergency department, was there. A nurse promptly started an IV, took a blood sample and called for an abdominal CT scan. Diagnosis: a kidney stone. John received medication and an emergency phone number to call, if necessary, over the weekend.

John later wrote to Newport Hospital President Crista Durand expressing his appreciation for the outstanding team that cared for him. What John didn't recall from his visit was how busy the ED was: our staff made him feel like he was their sole focus from the moment he arrived.



You might think this story is unique, but this is now a typical experience for patients in our ED since new initiatives and protocols were put in place last year to reduce wait times and improve patient satisfaction. The result: waiting times are the lowest in the state, surpassing national standards, and patient satisfaction ratings are in the top fifth percentile of similar community hospitals nationwide.

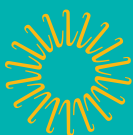
“Newport Hospital’s unique challenge is that we have great variability in our emergency department volume,” explains Dr. Napoli. “While winters can be fairly quiet, summer volume increases 40 percent and can sometimes more than double what we see on a winter day.”

With new systems in place this past summer (one of the busiest summers the ED has ever had), wait times were as low as 16 minutes, beating national benchmarks. “We are proud of these results. Our patients felt respected and cared for and got the fast, efficient, skilled treatment they deserve,” says Dr. Napoli.

But Crista Durand and Dr. Napoli know systems alone are not enough.

“Sustaining these improvements is difficult if you don’t change the environment,” explains Crista. “Reality is, any day in the summer and fall, I can walk down to the ED and there will be seven patients in the hallway. The staff goes above and beyond to compensate for having 17 beds when we need 25, having one triage bay when we need three, and not having a behavioral health area.”

Plans are underway to transform the emergency department and provide increased access and services for the community.



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