

4440 West 95th Street
Oak Lawn, Illinois 60453-2699
Telephone 708.425.8000



Welcome to your first day as a Junior Heart Doc at Advocate Christ Medical Center! Today, you begin four years of training with world-renowned cardiologist Dr. Marc Silver. At the end of your intense training, you will achieve your dream of becoming a heart doctor.

There are several requirements for your training, including viewing live, open-heart surgery! As a Junior Heart Doc, you will complete six tasks, view bypass surgery and then compile a final report for Grand Rounds, which is a weekly meeting with your cardiology colleagues. Throughout the six lessons you will demonstrate understanding of the anatomy of the heart and the bypass procedure, analyze patient symptoms, examine various treatments and make recommendations, and educate the public.

Your first patient is Bill Harvey. Mr. Harvey came to Christ Medical Center this morning complaining of chest pain and is anxiously waiting to be seen by a doctor. As the Junior Heart Doc, you are responsible for patient intake, diagnosis, treatment and follow-up. Other health professionals at the medical center will contribute their expert advice to help you treat Mr. Harvey.

Four years of college, four years of medical school and two years of hospital internship have prepared you for this challenge. You have taken a physician's oath promising to do what will benefit your patient. On a daily basis, heart patients put their lives in your hands. We have confidence that you are up to the challenge.

Good luck!

The Cardiology Staff
Advocate Christ Medical Center

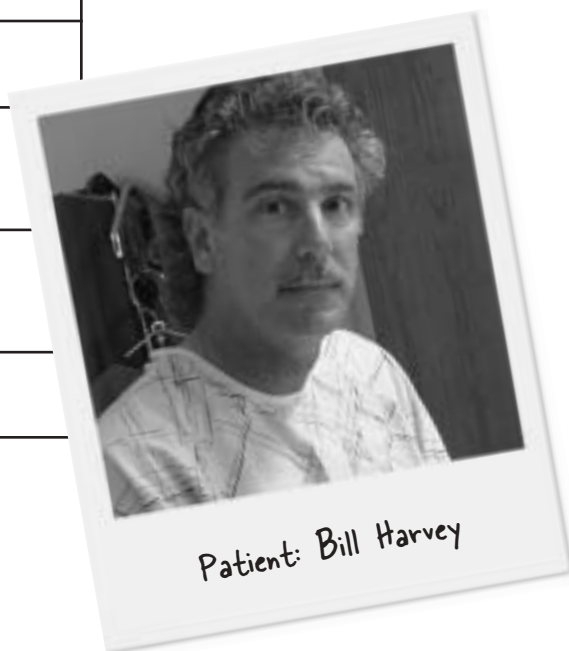
Name _____

Date _____

Highlight and make notes in the margin of important information that may be contributing to Mr. Harvey's condition.

[illegible]

Patient Name: Bill Harvey	
Reason for Consultation: Chest pain	
Background: Mr. Harvey, a 57-year-old male with no prior cardiac history, has been experiencing shortness of breath and tightness in his chest for the last six months. Over the course of the last month, he noticed the pain was more intense, occurred more often and that it was accompanied by a burning sensation in his chest. Yesterday, dizziness accompanied his chest pain, and he decided it was time for a visit to the cardiologist.	
Gender: Male	Weight: 200 lbs.
Age: 57	Temperature: 98.2° F
Height: 5'10"	Employment: Supervisor of a factory assembly line
Family History: Father died at 62 of a sudden heart attack. Mother is 83 and is still living. Paternal grandfather died at 55 of heart disease. Paternal grandmother died at 92 from complications due to diabetes. Maternal grandfather died at 70 of natural causes. Maternal grandmother died at 93 in household accident.	
Diet: Patient reports a “moderately healthy diet with weakness for fast foods.”	
Unhealthy Habits: Patient smoked one pack of cigarettes a day for 30 years; he quit six months ago, when he began experiencing shortness of breath. Patient denies alcohol use.	
Exercise: Patient played football in high school, but he has not exercised regularly since then; he coached football until six months ago, when he began feeling short of breath on the field.	
Stress: Patient reports feeling “under a lot of pressure” on the job and in his coaching responsibilities.	





Lesson 1: Presenting the Patient

Note from the Nurse:

To: Junior Heart Doe
From: Nancy Jeffrey, R.N.
Re: Preliminary Test Results

Mr. Harvey was fairly calm but seemed worried about his symptoms. I told him I would be taking his blood pressure with an arm cuff, and that I would then take some blood in order to determine his cholesterol level.

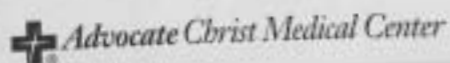
Here are his test results, along with normal ranges to use as comparisons:

Test	Result	Normal Range
Cholesterol	260 mg/dL	<200 mg/dL
Blood pressure	160/90 mm Hg*	<140/90 mm Hg*
Pulse	90 bpm**; regular rhythm	60–100 bpm**; regular rhythm
Weight	200 lbs.	150–175 lbs.

Nancy Jeffrey, R.N.

*mm Hg = millimeters of mercury

**bpm = beats per minute



Note from the Cardiologist:

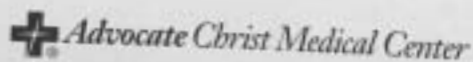
To: Junior Heart Doe
From: Marc Silver, M.D.
Re: Further Testing

From the initial consultation and preliminary tests conducted on the patient, it appears that Mr. Harvey is experiencing heart trouble. Before making a diagnosis, I recommend conducting further tests. Mr. Harvey should have an angiography test today.

After reviewing the results of his angiogram, you will have more information with which to accurately diagnose Mr. Harvey's problem. Send him to the lab technician, Sharon Gray, in the Catheterization Lab on the third floor of the Medical Center.

We will discuss the case again when Mr. Harvey's test results return.

Dr. Marc Silver, Cardiologist



Notes:





Lesson 1: Presenting the Patient

Answer the following questions to prepare you for your next appointment with Mr. Harvey.

1. What conclusions can you make from Nurse Jeffrey's notes?

2. After reading Mr. Harvey's patient file, what symptoms indicate that something might be wrong with him?

3. Based on his patient chart, what might be contributing to his condition?

4. What do you still need to learn about Mr. Harvey or heart disease to diagnose and treat him?



Lesson 1: Presenting the Patient

Part B: Risk Factors

Note from the Cardiologist:

To: Junior Heart Doc
 From: Marc Silver, M.D.
 Re: Heart Disease Risk Factors

It appears that Mr. Harvey is having some trouble with his heart. It is important that Mr. Harvey learn about heart disease—or coronary artery disease—risk factors and how these can be controlled, modified or eliminated to slow the development of the disease.

Using the reference chart at the back of this lesson as a guideline, pick three risk factors that you think are influencing Mr. Harvey's condition, and then write him a letter explaining the risk factors and how they can be controlled.

Dr. Marc Silver, Cardiologist

 Advocate Christ Medical Center



Risk Factor 1:

Risk Factor 2:

Risk Factor 3:



Lesson | Extension: Presenting the Patient

As a Junior Heart Doc, you know that nutrition is related to heart disease. Use the information on the **Nutrition Reference Sheet** to answer the following questions. Then, compile the information to educate Mr. Harvey about nutrition.

1. What is the daily allowance of fat and calories recommended for Mr. Harvey, who is 57 years old and does not exercise on a regular basis?

2. Use the table to calculate the **total** amount of calories and fat Mr. Harvey consumed today for breakfast and lunch.

	FOOD	CALORIES	FAT
BREAKFAST			
LUNCH			
TOTAL			

3. Did Mr. Harvey already exceed the recommended amount of calories today? If so, by how many?

4. Did Mr. Harvey already exceed the recommended amount of fat grams today? If so, by how many grams?

5. Using Danny's Donuts' and Burger World's nutritional information, suggest alternative breakfast, lunch, and dinner menus for Bill Harvey. Be sure to stay within the recommended daily allowance for calories and fat grams.

	FOOD	CALORIES	FAT
BREAKFAST			
LUNCH			
DINNER			
TOTAL			



Lesson 1: Presenting the Patient

CORONARY ARTERY DISEASE RISK FACTORS REFERENCE SHEET

Risk Factor	Explanation	Control
High Blood Pressure	Each heartbeat creates pressure against the artery wall. High blood pressure creates a strain on the artery wall. It cannot be cured, but it can be controlled.	Reduce salt consumption, take the prescribed medication, exercise regularly and quit smoking.
Diabetes	The body must produce enough insulin to break down glucose (sugar). Diabetes is the result of the inability of the body to produce enough insulin, which causes glucose to accumulate in the blood.	Follow the recommended diet and take the prescribed medications.
Smoking	The nicotine in cigarettes is a stimulant that causes blood vessels to narrow. Consequently, blood pressure rises and the heart beats faster. Carbon monoxide contained in cigarettes enters the blood faster than oxygen. This reduces the ability of the blood to carry oxygen.	Quit smoking.
Cholesterol and Fat	A diet high in cholesterol and fat can lead to fatty deposits on the arterial walls, which restrict blood and oxygen flow to the heart.	Decrease red meat consumption, increase fish and poultry consumption, restrict egg consumption to two eggs per week and choose low-fat dairy products.
Obesity	A 20% increase over a person's ideal body weight is considered obese. Extra weight forces the heart to work harder in order to supply blood to the excess pounds. It also increases the risk of diabetes and high blood pressure.	Develop good eating habits, consider a physician-directed diet plan and increase physical activity.
Poor Exercise	The heart, like any other muscle, needs to be exercised regularly so it can function properly.	Begin walking, swimming, bicycling or any other exercise that strengthens the heart muscle, starting slowly and gradually increasing efforts.
Stress	There are two types of stress: emotional and physical. Too much of either type causes the heart to beat faster, the blood vessels to narrow and blood and oxygen flow to be restricted.	Eliminate or minimize the causes of stress. Try to react differently to stressful events.
Heredity	Heart disease can be hereditary. If your parents or grandparents had heart disease, there is a greater possibility that you will also develop it.	Cannot be controlled. Avoid copying any bad parental habits, such as smoking, poor diet or unhealthy eating or exercise habits.
Age	Coronary artery disease is a gradual process. Usually it affects people in their middle or later years.	Cannot be controlled. Start to eliminate and control as many of the risk factors as early as possible. It is never too late to begin taking care of yourself.
Male Sex	Typically, coronary artery disease affects men at an earlier age than women. However, women are developing coronary artery disease more frequently due to an increase in smoking habits and stress.	Cannot be controlled. Eliminate or control as many of the other risk factors as possible.



Lesson 1: Presenting the Patient

NUTRITION REFERENCE SHEET

Recommended Daily Allowance (RDA) Chart

	Calories	Fat grams
Active men, teen boys	2,800	< 93
Most women, older adults	1,600	< 53
Most children, teen girls, active women and most men	2,200	< 73

**Excerpted from Mayo Clinic Heart Book, Second Edition*

Fast-Food Facts

Danny's Donuts	Calories	Fat grams
Donut—chocolate crème-filled	240	9
Donut—chocolate frosted	340	15
Donut—glazed	180	8
Donut—vanilla frosted	210	9
Bagel—blueberry	340	3
Bagel—plain	340	3
Biscuit—plain	280	14
Biscuit—egg and cheese	380	22
Biscuit—sausage, egg and cheese	590	42
Croissant—plain	290	18
Coffee cake	710	29
English muffin—ham, egg and cheese	320	12
Muffin—blueberry	490	17
Coffee with cream and sugar	90	6
Burger World	Calories	Fat grams
Hamburger	260	9
Cheeseburger	320	13
Quarter-pound hamburger	420	21
Quarter-pound cheeseburger	530	30
Big Burger Boy sandwich	560	31
Grilled chicken sandwich	440	20
Chicken nuggets (6)	290	17
Garden salad (no dressing)	35	0
Fat-free Vinaigrette dressing	50	0
Ranch dressing	230	21
Fries (small)	210	10
Fries (large)	450	22
Fries (super-size)	540	26
Coke (large)	310	0

Find nutritional information for America's favorite fast-food restaurants at www.olen.com/food/.