



Modern medicine, old-fashioned care.

THE *Wellness* REPORT

Fall 2018

CALLING 911

Presenter:

Captain Derrell Sharp FF-PM

- **You have called 911, now what...**
- **What you can do while you wait**

November 7, 2018

1:00 – 2:30 pm

Olympic Medical Park

840 N 5th Ave, Sequim

Second Floor Conference Room

Refreshments Served

Please call Sara at

582-2850 to sign up.

Family and friends welcome....

Listen to Your Doctor

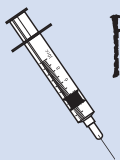
We receive calls from patients asking for medical advice all day long. We have a Registered Nurse staff our triage desk and she is always happy to listen and provide the best medical advice relating to your present health concern. She collects pertinent information from you to assess your situation to discuss with your doctor. In urgent matters, she will place the call on hold while she receives orders from your doctor to get you taken care of quickly and safely. In some of these instances, your medical condition may require **rapid or advanced treatment that is only available in a hospital setting...**and will instruct you to go the ER.

Please...listen to your doctor! Go. Please be assured it is NOT because it is inconvenient, or we are too busy to see you in the office. The doctor truly does know best.

When to call 911

Even if it is clear that you or your loved one needs emergency care, you may be unsure whether to drive yourself to an emergency room or call 911. When in doubt, please call 911 — what matters most is that you get to the emergency room quickly and safely.”

For certain medical emergencies such as a heart attack or stroke, calling 911 for an ambulance is always the right decision. This is because paramedics often can begin delivering life-saving treatment on the way to the hospital.



Flu Season...
Get Vaccinated!

Sequim Medical Associates will be providing flu shots at your scheduled visit beginning October 1st. The vaccine loses its effectiveness after 6 months so getting too early is not advised. For your added convenience, we will also have a dedicated nurse available on Tuesdays and Thursdays for the month of October from 8:30 to 11:30 a.m. on a first come, first serve basis.



High Blood Pressure = Hypertension

Hypertension (HTN) is the most important risk factor for cardiovascular disease, and the older we get, the more likely we are to develop it. About 32% of adults in their 40s and 50's have hypertension. But amongst adults 60 years and older, that number increases to about 65%.

Untreated, HTN can lead to strokes, heart attacks, congestive heart failure, and chronic kidney disease. So, everyone generally agrees that it is important to treat HTN. But it can be confusing when guidelines differ on whether the target BP should be intensive or more liberal, which is exactly what happened last year.

For many years, hypertension was defined as a blood pressure of 140/90 or higher. But last year, the ACC/AHA (American College of Cardiology/American Heart Association) published new guidelines that redefined hypertension as an average blood pressure \geq 130/80. Using that threshold, the number of US adults with hypertension suddenly increased from 32% to 46%.

Why did they do this? It was mainly based on results from the SPRINT trial which showed significantly fewer cardiovascular events and lower all-cause mortality in patients in the intensive therapy group (<120 mmHg), including elderly patients. But there were also significantly higher rates of serious adverse events in the intensive therapy group, including hypotension, syncope (passing out), electrolyte abnormalities and acute kidney failure.

It is important to note that the SPRINT trial did not include patients with diabetes, so it may not be valid to extrapolate results to diabetics. In fact, there is another trial, ACCORD, which did not show a mortality benefit or reduction in overall cardiovascular disease in diabetics with lower target BPs. There was a decreased risk for stroke but it was at the cost of substantially more serious adverse events.

The ACP/AAFP (American College of Physicians/American Academy of Family Physicians) also put out guidelines last year which were a bit more relaxed. They recommend that adults over age 60 have a target systolic BP of ≤ 150 . A lower target of ≤ 140 is recommended for patients with a history of transient ischemic attack (TIA) or stroke. For patients who are at high risk of cardiovascular disease, they recommend "shared decision making" regarding the lower target of ≤ 140 .

The bottom line is that guidelines are just a starting point, and when considering older patients, some are much more frail than their healthier counterparts, are on multiple medications, and are at greater risk of side effects from antihypertensive medications.

Patients with the most cardiovascular risk get the most risk-reduction from therapy and should aim for lower BPs. Patients who have a limited life expectancy or significant burden of other diseases and multiple medications, should be treated cautiously with more relaxed BP goals.

What can you do to lower your blood pressure?

Lose weight if you are overweight. Just a modest amount of weight loss can lower your BP significantly.

Reduce your sodium intake. The main source of sodium in the diet is from salt in packaged and processed foods and in foods from restaurants. A low-salt diet is generally ≤ 2 g sodium/day. Even if you are on BP medications, a low-salt diet can make them more effective.

Dietary Approaches to Stop Hypertension (DASH) eating plan. A diet that emphasizes more fruits and vegetables, low-fat dairy and fiber (try to get 20-35 g of fiber in your diet daily). Eat more fish, less red meat. It is even more effective when combined with salt restriction.

Exercise regularly. Exercise, such as brisk walking or jogging, 20-30 minutes most days of the week can lower BP even if your weight remains stable.

Avoid medications that can raise blood pressure. NSAIDs such as ibuprofen or naproxen, decongestants, such as pseudoephedrine, and appetite suppressants.

Limit alcohol (beer, wine, spirits). People who have ≥ 2 alcohol beverages per day are more likely to develop hypertension. It is recommended that men drink no more than 2 alcohol beverages per day and women drink no more than 1 per day.

Treat obstructive sleep apnea, thyroid disease and other possible causes of secondary HTN.

Take your blood pressure medications as directed by your doctor.

Tips for checking your blood pressure at home.

- It is normal for BPs to vary throughout the day in response to different stimuli.
- BPs tend to go up acutely with pain, emotional distress, and fevers.
- If you buy a BP monitor, bring it to the office so we can make sure that it's accurate.
- Keep a record and bring your BP log to your office visits.
- Be sure you are using a cuff that is the correct size for your arm.
- Wait at least 30 minutes after eating, having caffeine, smoking or exercising.
- Sit in a chair with your back supported, feet flat on the ground and legs uncrossed.
- Sit quietly for 5 minutes before measuring. Try to breathe normally and stay calm.



Rx Refills 101:

ONE WAY, ONE TIME. Please do not request refills for the same Rx in multiple different ways. If we receive requests electronically from the automated system and then by fax from the pharmacy and by phone from the patient for the

same Rx, then multiple people are repeating the same work and the doctor has to review the same prescription history multiple times.

The pharmacy will only contact the doctor if:

- No refills are available
- You report or request a change with the dose or strength
- PreAuthorization is needed from your insurance company

REQUESTING REFILLS

#1. BEST OPTION: Contact your pharmacy.

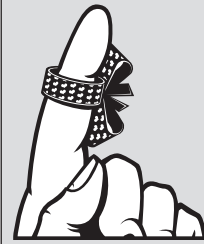
- Call your pharmacy and use their touch-tone automated refill line. Or...
- Request through your pharmacy online. Or...
- Call pharmacy and speak with them directly

#2. Calling the office and asking one of our staff for the Rx is also acceptable, though less efficient. That usually involves multiple people unnecessarily, but your Rx will be taken care of for you.

#3. Email your Doctor. PLEASE AVOID - Emailing your doctor for Rx refills is the least efficient use of his/her time and not part of the usual office work flow.

MAKE IT EASY ON YOURSELF. Prescriptions can set up to be filled automatically before you run out. And when refills do run out, a request will be sent electronically to our office. We can then simply authorize the Rx with the push of a button if it matches our records and is appropriate to refill. You can set up auto-refill through your pharmacy.

Thank you for helping us be more efficient!



Remember...

We're here to provide you quality healthcare. Part of our job is to educate and assist you with your health-care needs. Use the numbers below to get in touch with the people who can answer your questions.

Office 582-2850

Office Fax . . . 582-2851

After Hours
(Urgent Care) 582-2850
or 797-0213

Email:
kitty@sequimmed.com
For nonurgent needs only

Monthly Fee Questions,
Kitty 582-5542

Insurance Billing
Questions
Timmi 582-5543

Protimed Clinic
Mon, Wed & Fri
8-12:30, 1:00-3:00
Haley 582-2850

Mammograms

Sequim Medical Associates has always been committed to contacting our patients promptly and efficiently with lab or test results, which includes mammogram results. However, since Olympic Medical Center is mailing your results to you, we will no longer be duplicating this information by calling you. We encourage you to call us if you have any questions or concerns with the results provided by OMC.

Centers for Medicare and Medicaid Services

We would like to reassure our patients that we are not directly affected by the proposed Medicare payment cuts that have been in the news lately. We are a private practice and not employees of Olympic Medical Center.

Reminder...

The new Medicare cards have been sent out. Please be sure to have available at your next visit so we can update your records here.

SUGGESTED WEBSITE....

www.prepareforyourcare.com

Evidence based tools to engage older adults in shared decision making and to help prioritize goals and facilitate advance care planning.

Sequim Medical Associates, PLLP

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Sequim, WA 98382
www.sequimmed.com

(360) 582-2850



Sequim
Medical
Associates

Modern medicine, old-fashioned care.

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, WA 98382
(360) 582-2850

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*Tell us
how we're
doing...*

24 HOURS A DAY, 7 DAYS A WEEK...

(360) 582-2850

www.sequimmed.com

OFFICE HOURS: MONDAY-FRIDAY 8:00 am to 4:30 pm
APPOINTMENTS: (360) 582-2850
AFTER HOURS: (360) 582-2850 or (360) 797-0213 (urgent care)
FAX: (360) 582-2851
EMAIL: kitty@sequimmed.com
REFILLS: CALL YOUR PHARMACY
EMERGENCY: **DIAL 911**



Happy Holidays



2018 HOLIDAY SCHEDULE

**The office of
Sequim Medical Associates
will be closed for the following holidays:**

November 22 – Thanksgiving
December 25 – Christmas
January 1 – New Year's Day

**We will be in the office for emergencies
only on the following days:**

November 23 – Day after Thanksgiving
December 24 -- Christmas Eve
December 31 – New Years Eve

If you have a medical emergency during this time,
please contact the office at (360) 582-2850
and the answering service will forward you
to the doctor on call.