




# Advancing Heart Care

WITH **MEDICINE** BEYOND MEASURE.

# Cardiac Services

 **TANNER**  
HEART CARE



One-third of all deaths in west Georgia are caused by cardiovascular disease. By providing west Georgia and east Alabama residents with the latest in cardiac and vascular diagnostics and treatment, Tanner Health System is turning things around.

Tanner Heart Care offers state-of-the-art technologies to diagnose and treat cardiovascular disease, with services provided by a team of highly skilled, expertly trained cardiac and vascular medicine specialists.

Exceptional care, convenient locations and a comprehensive approach — that's how Tanner delivers **heart care beyond measure.**



# TABLE OF CONTENTS

CARDIOLOGY SPECIALISTS .....	2
MINIMALLY INVASIVE CARDIAC CARE .....	6
INTERVENTIONS.....	8
CARDIAC ELECTROPHYSIOLOGY .....	11
DIAGNOSTIC IMAGING.....	12
NUCLEAR CARDIOLOGY.....	14
ACCESS TO CARE.....	16
ENDOVASCULAR CARE.....	18
CARDIAC REHABILITATION .....	19
ACCREDITED CHEST PAIN CARE.....	20
KEEPING HEARTS HEALTHY .....	21

# Advancing Heart Care

BEGINS WITH **EXCEPTIONAL** CARDIOLOGY SPECIALISTS AND STAFF.

When it comes to heart care, it is important to have a medical team focused on clinical excellence, innovation and compassion.

At Tanner, cardiac care is delivered by a team of cardiologists versed in a wide range of techniques and procedures to detect heart disease early, manage it effectively and treat it when necessary.

## Tanner Heart & Vascular Specialists

part of Tanner Medical Group



### **Christopher Arant, MD, FACC, FSCAI**

Dr. Arant is board-certified in cardiovascular disease and interventional cardiology by the American Board of Internal Medicine. He received his medical degree from the Mercer University School of Medicine in Macon. He completed his internship, residency and fellowship in cardiovascular medicine at Shands at the University of Florida in Jacksonville.



### **Onaje Greene, MD, FACC, FASNC**

Dr. Greene is board-certified in cardiovascular disease by the American Board of Internal Medicine. He earned his medical degree from the Howard University College of Medicine in Washington, D.C. He completed his internship and residency in internal medicine at Union Memorial Hospital in Baltimore and a fellowship in cardiology at Howard University Hospital in Washington, D.C.



### **Mujeeb A. Jan, MD, FACC**

Dr. Jan is board-certified in cardiovascular disease by the American Board of Internal Medicine. Dr. Jan earned his medical degree from Khyber Medical College in Peshawar, Pakistan. He completed an internship and residency in internal medicine at Lady Reading Hospital in Peshawar, Pakistan, and a residency in cardiology at Pakistan Institute of Medical Sciences in Islamabad, Pakistan. In the United States, Dr. Jan completed an internship and residency in internal medicine at Georgetown University Medical Center in Washington, D.C.



### **Rajat Jhanjee, MD, MSEE**

Dr. Jhanjee is board-certified in electrophysiology, cardiovascular disease and internal medicine by the American Board of Internal Medicine. He earned his medical degree and finished his electrophysiology and cardiology training at the University of Minnesota. He also holds a master's degree in electrical engineering from the University of California, Los Angeles. Dr. Jhanjee worked professionally for three years designing pacemakers and defibrillators before pursuing his medical degree.



### **Chelif Junor, MD, FACC**

Dr. Junor is board-certified in cardiovascular disease, interventional cardiology and internal medicine by the American Board of Internal Medicine. He earned his medical degree from Howard University in Washington, D.C., and completed his residency and internship in internal medicine at The Cleveland Clinic Foundation in Cleveland, Ohio. He also completed a fellowship in interventional cardiology from the University of Pennsylvania and a fellowship in cardiovascular disease from the University of Missouri in Columbia.



**Shazib Khawaja, MD, FACC, FSCAI, FSVM**

Dr. Khawaja is board-certified in cardiovascular disease and interventional cardiology by the American Board of Medicine and serves as chief of interventional cardiology for Tanner Health System and medical operations leader for Tanner's heart and vascular services. He earned his medical degree from the University of South Alabama. After completing a residency in internal medicine at Albany Medical College in Albany, New York., Dr. Khawaja completed a fellowship in cardiovascular medicine at Dartmouth-Hitchcock Medical School and an interventional cardiology subspecialty fellowship at the University of Minnesota/ Minneapolis Heart Institute. Dr. Khawaja also received advanced training in peripheral vascular interventions at the Arizona Heart Institute.



**William Rogers, MD, FAAC, MAAC**

Dr. Rogers is board-certified in cardiovascular disease by the American Board of Internal Medicine. He joined Tanner's medical staff in 1983. Dr. Rogers earned his medical degree from the Medical College of Georgia in Augusta, where he also completed his internship, residency and fellowship in cardiovascular disease. Dr. Rogers is the medical director of the John and Barbara Tanner Cardiac Rehab Center at the Tanner Heart and Vascular Center.



**Dia Smiley, DO**

Dr. Smiley is board-certified in internal medicine. She earned her medical degree from the Ohio University College of Osteopathic Medicine in Athens, Ohio. She completed a postdoctoral research fellowship with the division of vascular surgery at Brigham and Woman's Hospital and Harvard Medical School in Boston, Massachusetts, and her residency in internal medicine and a cardiology fellowship in the University of Cincinnati College of Medicine Clinical Scientist Training Program in Cincinnati, Ohio. Dr. Smiley also completed a fellowship in advanced cardiac imaging at the Yale University School of Medicine/Yale New Haven Hospital in New Haven, Connecticut.

## West Georgia Cardiology



### **Charlie Rouse, MD, FACC**

Board-certified in cardiovascular disease by the American Board of Internal Medicine, Dr. Rouse earned his medical degree from East Tennessee State University's Quillen College of Medicine in Johnson City, Tennessee. He completed his internship and residency in cardiology at the Greenville Hospital System in Greenville, South Carolina. He also has a master's in nutrition from Georgia State University.



### **Randy S. Turkel, MD**

Dr. Turkel is board-certified in cardiovascular disease, electrophysiology and internal medicine by the American Board of Internal Medicine. He earned his medical degree from the University of Medicine and Dentistry in Newark, New Jersey. He completed his internship, residency and a fellowship in cardiovascular disease at New Jersey Medical School in Newark. He also completed a fellowship in electrophysiology at Rush University in Chicago, Illinois, and Aurora Health Care in Milwaukee, Wisconsin.

# Advancing Heart Care

## WITH MINIMALLY INVASIVE CARDIAC CARE.

Sometimes, exceptional heart care gets under your skin.

Tanner offers a wide range of services that enable its team of cardiac specialists to make accurate diagnoses, but sometimes the best way to find a problem is to take a closer look. Minimally invasive approaches either use the body's existing openings, such as the mouth, or use tiny incisions that mean less pain, less risk of infection and less time to heal than other procedures.

Tanner's invasive cardiology services include a range of diagnostic tests and treatments, from transesophageal ultrasound (TEE), which allows cardiologists to take an image of your heart from inside your chest without requiring an incision, to more advanced procedures like angiography, in which dye released from a catheter inside the body's arteries enables a cardiac or vascular specialist to monitor the flow of blood, determine if there are any blockages in the arteries and, if so, how severe the blockages are.

Angiography — also called a cardiac cath or heart cath — is a test to check your heart and coronary arteries. Specifically, the procedure tests blood flow in the coronary arteries, as well as blood flow and blood pressure in the chambers of the heart. This test can show how well the heart valves work and can check for any defects in the way the wall of the heart moves.

Invasive cardiology can also locate blockages in the arms and legs that cause peripheral artery disease and increase the risk of amputation. It can also be used to determine a patient's risk of stroke if blockages are found in the arteries supplying the patient's brain.

At Tanner, invasive cardiology is used to help make more accurate diagnoses, so each plan for care can be tailored to each individual patient and his or her unique needs.



## Look Inside





**Tanner's invasive cardiac services include:**

- ▶ Diagnostic and interventional peripheral angiography
- ▶ Permanent and temporary pacemaker implantation
- ▶ Cardiac nuclear medicine (thallium cardiac imaging)

# Advancing Heart Care

## WITH HEART-SAVING INTERVENTIONS.

A blocked artery often means trouble. Arteries transport oxygen-rich blood throughout the body. Should an artery become blocked — usually by a buildup of a waxy, fatty substance called plaque — that can lead to other parts of the body being deprived of the oxygen the blood carries.

Without oxygen, wounds on the legs and arms have difficulty healing. Without blood, the muscles that form the heart begin to die. Without blood, the brain cannot work.

From the risk of amputation to relief for heart attacks to preventing strokes, the interventional cardiology team at Tanner Heart Care is focused on leading-edge, evidence-based clinical care and delivering the best possible outcome for patients.

Tanner offers lifesaving interventional cardiology services at two regional locations — Tanner Medical Center/Carrollton and Tanner Medical Center/ Villa Rica — including angioplasty and stenting services.

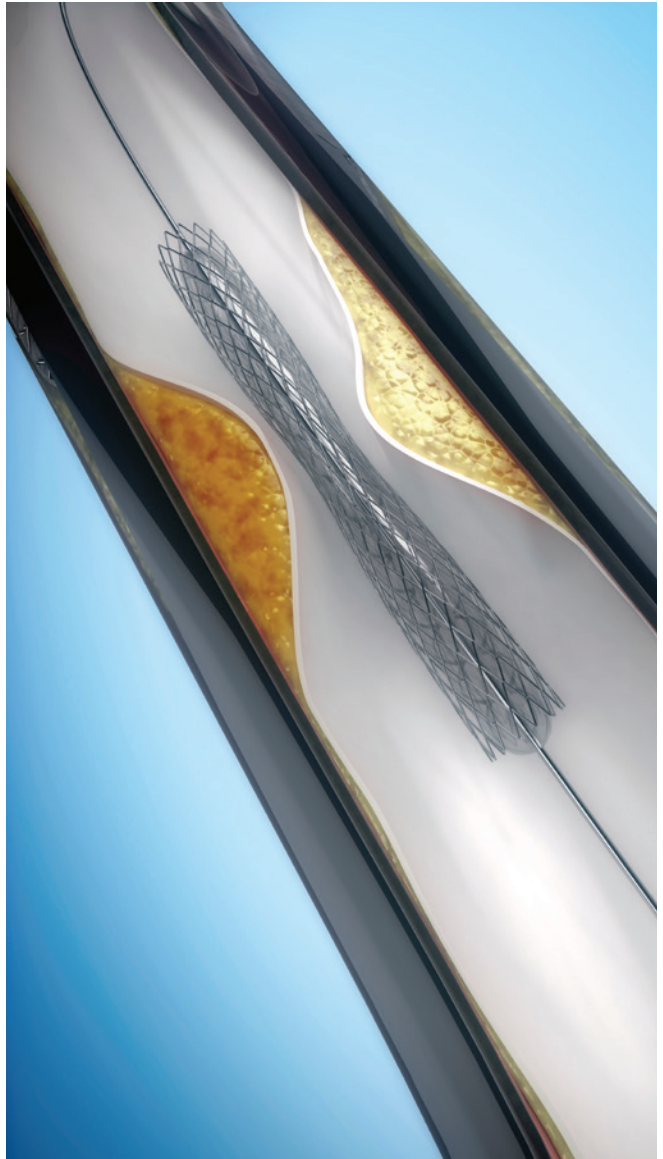
Angioplasty is used to reopen an area where an artery is blocked. An interventional cardiologist can clear the blockage to allow blood to flow better by using a tube called a catheter that has an inflatable, small, sausage-shaped balloon at its tip. Angioplasty is much less invasive than surgery. The patient will receive a relaxing medicine (sedative) through an intravenous line ("IV"), and will be given a local anesthetic to numb the area — usually the groin or arm — where the catheter will be inserted.



By using X-ray images, the interventional cardiologist can look at the size of the coronary artery and choose the appropriate type of balloon catheter and wire. The guide wire is an extremely thin wire with a flexible tip. During angioplasty, the wire is inserted through the catheter and into the artery. The tip of the wire is then guided across the blockage and beyond it. The wire serves as a guide for the catheter and balloon, which is navigated and positioned across the blockage, where the balloon is inflated to open the blockage and restore blood flow.

The same technique is used for stenting. A stent is a small tube made of wire mesh, which is left in the artery to keep the artery open and improve blood flow.

Angioplasty and stenting can also be used to treat other vascular conditions, such as peripheral artery disease (PAD).



## Minutes are Muscle

Choosing a cardiac provider close to home can save more than gas — it can save your life.

When you experience the symptoms of a heart attack — pain and pressure in the chest, difficulty breathing, nausea and more — it's essential to seek care right away. It's essential that blood flow be restored to the heart as quickly as possible.

That's why Tanner offers angioplasty at two regional locations — Tanner Medical Center/Carrollton and Tanner Medical Center/Villa Rica. Additional locations means more residents are close to a facility that can offer angioplasty to treat heart attacks and save heart muscle.

If you're already a Tanner patient, the patient care team at your local hospital will have your medical history at their fingertips — including current medications, allergies and complicating conditions, such as chronic diseases and prior history of heart attack.

That means faster treatment for a heart attack and a better chance to save the heart muscle that's otherwise lost if treatment is delayed.

At Tanner, our "door-to-balloon" times — the time from which a patient arrives at the hospital having a heart attack until the blocked artery is cleared with angioplasty — is better than the national average and the American College of Cardiology's guidelines.

Learn more about Tanner's lifesaving emergency heart care on page 20.



# Advancing Heart Care

## AND KEEPING THE BEAT WITH CARDIAC ELECTROPHYSIOLOGY.

The body's muscles are controlled by electrical impulses transmitted from the brain, through the nerves and throughout the body. The muscles that make up the heart are no different — electrical signals tell the heart when to beat, as well as how fast or how hard to beat, in order to adequately supply the body with blood.

Sometimes, however, the electrical signals controlling the heart can become distorted. This can result in problems such as irregular heartbeats, including potentially life-threatening heart rhythms.

Cardiac electrophysiology services at Tanner focus on ensuring that the heart keeps time, with clinical interventions and diagnostic procedures that can address heart problems. Treatment can address a number of symptoms, including:

- ▶ Heart palpitations or fluttering in the chest
- ▶ Chest pain
- ▶ Shortness of breath
- ▶ Fatigue
- ▶ Anxiety
- ▶ Dizziness and faintness

Tanner's cardiac electrophysiology services include ablation, in which a small wire at the end of a catheter is used to scar (or "ablate") small areas in the heart that could be causing irregular rhythms.



The cardiac ablations available from Tanner Heart Care can treat:

- ▶ Supraventricular tachycardias, including atrial flutter, AVNRT, WPW and atrial tachycardia
- ▶ Ventricular tachycardia
- ▶ Premature ventricular contractions

Tanner also offers cardioversion, cardiac resynchronization therapy (CRT) device implantation and follow-up, electrophysiology (EP) testing (invasive and noninvasive), implantable cardioverter defibrillation (ICD) implantation, loop recorder implantation/extraction, temporary and permanent pacemaker implantation and more.

# Advancing Heart Care

## WITH STATE-OF-THE-ART DIAGNOSTIC IMAGING.

One of the most powerful tools Tanner offers to take control of cardiovascular disease is its diagnostic imaging capabilities. These procedures allow Tanner's team of heart specialists to gain more information on each patient's heart, including how well it works, if there are any blockages in the arteries around it, if the heart has any anatomical problems and more.

### Echocardiography

Echocardiography is similar to the ultrasound that women receive when they are pregnant. A device emits high-frequency sound waves that bounce off the heart and return to the device, which then transmits the information to a computer that generates an image of the heart.

The echocardiogram is generally non-invasive, with the transponder that emits the sound waves used on the surface of the skin. Sometimes, a transesophageal echocardiogram (TEE) is necessary to receive clearer images of the heart or to view the heart from a different angle. With TEE, the transponder is maneuvered down the throat into the esophagus to obtain readings from within the chest. Patients are under mild sedation during TEE procedures.

Tanner also offers pediatric echocardiology services.

### Cardiac PET/CT

PET/CT is a combination of two advanced, highly sophisticated diagnostic imaging techniques that enable physicians to gain a clearer, more detailed picture of the body's anatomical structures. Positron emission tomography, or PET, uses a radioactive drug called a "tracer" that pools in areas of the body with elevated levels of chemical activity. Higher chemical activity often indicates an area that's diseased.

Computed tomography, or CT (also called a "CAT scan"), involves collecting a series of X-ray images taken in rapid succession from different angles. A computer processes those images to create cross-section views of anatomical structures. Combined, PET/CT gives us a powerful tool to diagnose disease, including cardiovascular disease.

### Cardiac catheterization

Cardiac catheterization (also called coronary angiogram or angiography) is a test in which a small, hollow tube called a catheter is guided through the large artery in the upper leg, wrist or arm into the heart. Dye is released through the catheter, and moving X-ray pictures are made as the dye travels through the heart. This comprehensive test shows narrowed areas in the arteries, heart chamber size, pumping ability of the heart and ability of the valves to open and close, as well as a measurement of the pressures within the heart chambers and arteries.

## MRI of the heart

Magnetic resonance imaging (MRI) of the heart is a diagnostic procedure that uses a combination of large magnets, radio frequencies and a computer to produce detailed images of organs and structures within the body. MRI of the heart may be used to evaluate the heart valves and major vessels, detect coronary artery disease and the extent of damage it has caused, evaluate congenital defects and detect the presence of tumors or other abnormalities. The cardiac MRI may be used prior to other cardiac procedures such as angioplasty or stenting of the coronary arteries and cardiac or vascular surgery.

Tanner is on the leading edge of healthcare providers throughout the country offering non-contrast magnetic resonance angiography, or MRA, as well as heart MRI imaging.

Physicians at Tanner use the MRI's powerful magnet to manipulate the water molecules in a patient's blood, read how they respond and capture extremely detailed images — all without contrast and without radiation — making cardiovascular imaging safer for patients who have advanced diabetes, kidney issues and other health problems.

The technology places Tanner ahead of other regional providers — and even many larger healthcare providers and research facilities — in offering an innovative alternative to traditional cardiac and vascular imaging.

## Cardiac CT scan

Cardiac CT scans use an X-ray machine and a computer to create three-dimensional pictures of the heart. Sometimes, a dye is injected into the a vein so that the heart arteries can be seen as well.



# Advancing Heart Care

WITH **NUCLEAR** CARDIOLOGY.

A nuclear stress test, sometimes referred to as a “cardiolite” or “thallium” test, lets doctors see pictures of a patient’s heart while he or she is resting and shortly after the patient has exercised. The test can show how well the heart is pumping blood and if the heart has any damaged muscle.

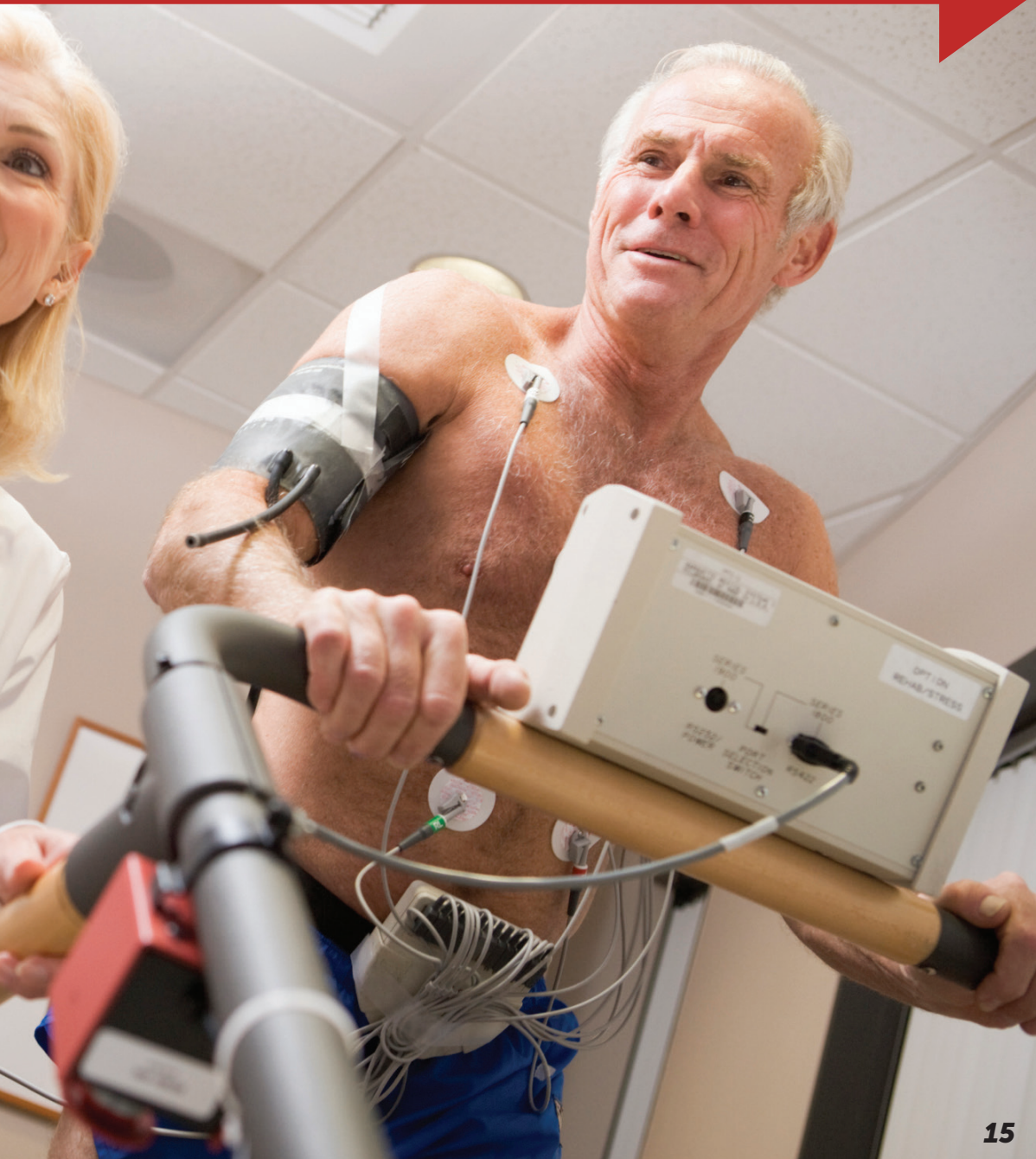
Nuclear stress tests can also give doctors information about the patient’s arteries and whether they might be narrowed or blocked because of coronary artery disease (CAD). Radioactive agents, called “tracers,” are injected to produce an image of the heart. These agents are widely used and very safe. Although nuclear testing is usually done in conjunction with an exercise stress test on a treadmill, it can also be performed using medications that simulate the effects of exercise on the heart.

Once the trackers have an opportunity to produce a clear image, a nuclear scan shows how well blood flows to the heart muscle; while the patient lies down on a table, a camera generates images of the heart’s blood flow both at rest and following stress.

These tests are proven to be safe, with the amount of radiation administered comparable to that from an X-ray. Cardiologists, nurses and technologists at Tanner with expertise in nuclear cardiology supervise and analyze these tests, using the results to prepare a treatment plan that’s unique to each individual patient and to possibly plan an intervention if it appears arteries are dangerously narrowed or blocked.







# Advancing Heart Care

WITH ACCESS TO CARE WHERE YOU NEED IT.

More than 83 million Americans are living with a disease that can exhibit no symptoms until it's too late – an artery to the heart becomes blocked and they experience a heart attack or stroke.

Cardiovascular disease (CVD) is any disease of the heart or vascular system that transports blood through the body. It includes coronary heart disease — heart attacks and chest pain — along with high blood pressure, heart defects, stroke and heart failure.

CVD accounts for one-third of all the deaths in Georgia. About half of all deaths in Carroll, Douglas, Haralson, Heard and Paulding counties are caused by CVD. In Alabama, heart disease is the leading cause of death, attributed to a quarter of all deaths in 2010, while stroke was the fourth leading cause of death, causing 5 percent of all deaths in the state.

To help fight CVD in west Georgia and east Alabama, Tanner offers a broad range of general cardiac care, with board-certified cardiologists and advanced practice providers who can evaluate symptoms, diagnose conditions and provide general solutions to help manage blood pressure, cholesterol and more.

## Non-invasive Cardiac Services at Tanner

From medication monitoring to lifestyle changes, the heart specialists at Tanner take a long view on heart health, working to reduce the occurrence of heart attack and stroke and help people live longer, more active lives.

And when a problem is found or a more intensive level of care is needed, Tanner Heart Care's team features cardiac specialists with a wide range of advanced skill training provide state-of-the-art diagnostic imaging and non-surgical interventions.

Tanner Heart Care offers this level of service at locations throughout the region, with cardiologists serving Carrollton, Villa Rica, Bremen and Wedowee, Ala., providing access to cardiac care close to home.

- ▶ **Electrocardiogram (ECG or EKG):** A test that records the electrical activity of the heart, shows abnormal rhythms (arrhythmias), and can sometimes detect heart muscle damage.
- ▶ **Stress test (also called treadmill or exercise ECG):** A test that is given while a person walks on a treadmill or pedals a stationary bike to monitor the heart during exercise. Breathing and blood pressure rates are also monitored. A stress test may be used to detect coronary artery disease or to determine safe levels of exercise following a heart attack or heart surgery.
- ▶ **Echocardiogram (also known as echo):** A noninvasive test that uses sound waves to evaluate the heart's chambers and valves. The echo sound waves create an image on the monitor as an ultrasound probe is passed over the heart.
- ▶ **Transesophageal echocardiogram (TEE):** A test in which a small probe, about the size of a little finger, is swallowed and passed down the esophagus.
- ▶ **Holter monitor:** A small, portable, battery-powered ECG machine worn by a person to record heartbeats on tape over a period of 24 to 48 hours during normal activities. At the end of the time period, the monitor is returned to the doctor's office so the tape can be read and evaluated.
- ▶ **Event recorder:** A small, portable, battery-powered machine used to record ECG over a long period. A person may keep the recorder for several weeks. Each time symptoms are experienced, the person presses a button on the recorder to record the ECG sample. As soon as possible, this sample is transmitted to the doctor's office for evaluation.
- ▶ **Tilt table test:** A test done while the person is connected to ECG and blood pressure monitors and strapped to a table that tilts the person from a lying to standing position. This test is used to determine if the person is prone to sudden drops in blood pressure or slow pulse rates with position changes.

# Advancing Heart Care

WITH SPECIALIZED **ENDOVASCULAR CARE.**

Advances in diagnosing and treating diseases of the circulatory or vascular system have significantly improved the health and quality of life of those who have been diagnosed with vascular disorders. However, many people don't know they have vascular problems until they experience leg pain or other symptoms, or attend one of Tanner's peripheral artery disease (PAD) screenings.

Endovascular simply means "in the vascular" system. Oxygenated blood is supplied to your body through an intricate network of blood vessels. These include arteries, which carry oxygenated blood to different parts of the body, and veins, which return oxygen-depleted blood to the heart and lungs as

part of the vascular system. Problems can occur with the blood flow in this elaborate system of vessels, requiring specialized medical care.

Endovascular also refers to any surgical procedure in which a catheter containing medications or miniature instruments is inserted percutaneously into a blood vessel for the treatment of vascular disease. This allows physicians to treat vascular disorders from inside the blood vessels. Although traditional open surgical methods are also used, most of today's endovascular procedures are minimally invasive—performed through a small puncture wound or incision—requiring less recuperation time.

## Endovascular Services at Tanner

- ▶ Non-invasive vascular tests
- ▶ Endovascular aortic aneurysm repair
- ▶ Treatment for leg pain and peripheral artery disease (PAD)
- ▶ Treatment for blood clots
- ▶ Vascular surgery
- ▶ Outpatient treatment for varicose veins

# Advancing Heart Care

AND HELPING HEARTS HEAL WITH **CARDIAC REHABILITATION.**

Tanner's cardiac rehabilitation services, based in the John and Barbara Tanner Cardiac Rehab Center, are designed to help patients with heart disease. The program is accredited by the American Association of Cardiovascular and Pulmonary Rehabilitation (AACVPR) and helps patients learn ways to maintain a healthier heart.

At Tanner Heart Care, there are three phases of cardiac rehabilitation:

**Inpatient** — This phase begins while the patient is still in the hospital. A cardiac rehabilitation nurse or exercise physiologist assesses the patient's risk factors, educational needs and activity level.

**Immediate Recovery** — A medically supervised exercise-based program to help strengthen the heart, the program also provides participants with education and strategies for living a heart-healthy life.

**Wellness Visits** — Patients continue an exercise program while Tanner staff monitors their progress on a regular schedule of visits.

Cardiac rehabilitation also offers strength-training and flexibility exercises.





# Advancing Heart Care

## WITH ACCREDITED CHEST PAIN CARE.

During a heart attack, the name of the game is **time**.

The emergency departments at Tanner Medical Center/Carrollton and Tanner Medical Center/Villa Rica are accredited chest pain centers by the Society of Cardiovascular Patient Care (SCPC). The hospitals have streamlined their processes for the diagnosis, treatment and management of chest pain patients.



The first step for anyone who suspects they're experiencing a heart attack should be to call 911. Many ambulances serving the west Georgia and east Alabama region are equipped with the LifeNet system. With LifeNet, the emergency medical technicians and paramedics aboard the ambulance can take an ECG reading and securely transmit the reading to one of Tanner's 24-hour emergency departments.

There, a board-certified emergency medicine physician can interpret the ECG reading and call for a team to be ready to perform angioplasty when the patient arrives. This allows the patient to bypass further testing in the emergency department and go straight to the catheterization lab where angioplasty can be used to relieve the symptoms of the heart attack and save heart muscle.

It's essential that blood flow be restored to the heart as quickly as possible. According to the American College of Cardiology

(ACC), a patient should be able to undergo an angioplasty procedure within at least 90 minutes of arriving at the hospital. The national average time from when a patient enters the hospital doors to undergoing the procedure during a heart attack is estimated at 120 minutes. At Tanner, the average time is less than the ACC guidelines and much better than the national average. More information about angioplasty is available on page 8.

Tanner Health System has four 24-hour emergency departments located at Tanner Medical Center/Carrollton, Tanner Medical Center/Villa Rica, Higgins General Hospital in Bremen and Tanner Medical Center/East Alabama in Wedowee, Ala. The physicians and nurses at Tanner's emergency departments are trained to "think cardiac," and are highly skilled in advanced cardiac life support (ACLS) and trauma nurse core curriculum (TNCC) to better prepare them to handle cardiac emergencies. Each emergency department is prepared to evaluate and treat patients presenting with symptoms related to cardiovascular disease, including heart attacks, angina, arrhythmia and heart failure.

In the past, patients had to be transported to hospitals in Atlanta to receive treatments like angioplasty stenting. These patients lost valuable minutes as their hearts deteriorated without oxygen. With advanced heart care available at Tanner, residents in west Georgia and east Alabama have a closer destination for care, saving heart muscle — and lives.

# Advancing Heart Care

BY KEEPING HEARTS HEALTHY.

## **"An ounce of prevention is worth a pound of cure."**

The best heart care begins not in the hospital, but at home. Tobacco use, sedentary lifestyles and unhealthy diets are the leading reasons that cardiovascular disease is the No. 1 cause of death in west Georgia and east Alabama.

To help combat this trend, Tanner is focusing on community-based

wellness and prevention efforts, as well as clinical approaches in primary care offices throughout the region to detect and control chronic diseases that can lead to cardiovascular disease, such as diabetes.

Information on Tanner's free classes on preventing or controlling diabetes, quitting tobacco, beginning an exercise regimen and more are available online at [GetHealthyLiveWell.org](http://GetHealthyLiveWell.org).





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