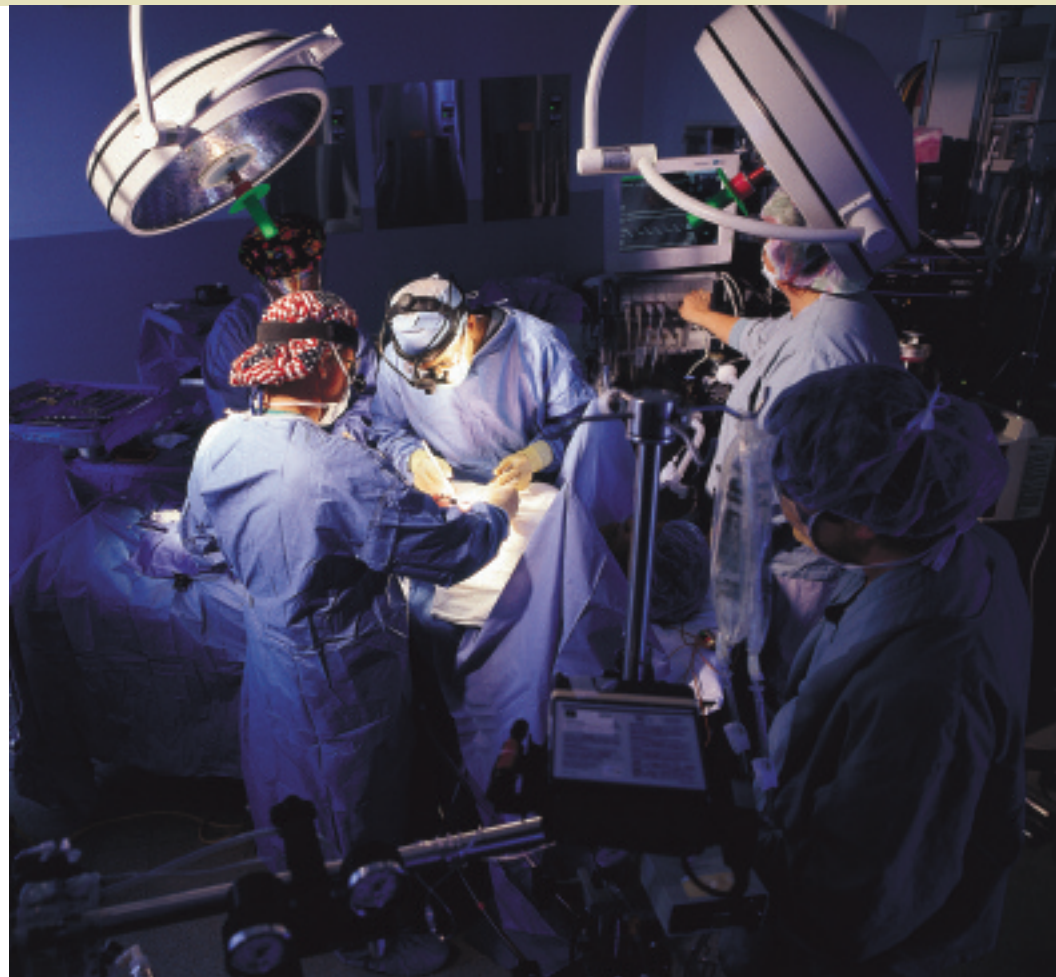
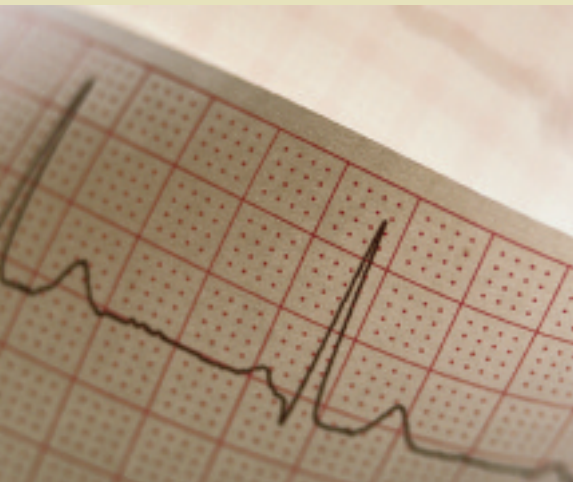


Cardiac Differential

SUMMA CARDIOVASCULAR INSTITUTE • WINTER 2010



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DEAR COLLEAGUE:

In 2006, Summa Health System united all aspects of cardiovascular care by establishing the Summa Cardiovascular Institute (SCI). Our mission is to provide an evidenced-based, multispecialty approach to the study, management and treatment of cardiovascular disease. The purpose was to ensure SCI delivered the highest level of patient-centered care and clinical outcomes. This alignment enhanced the investments made in our staff, technology and processes and, more importantly, enabled us to deliver a higher level of cardiac care to residents in our communities.

Recently the President and CEO of Summa Health System hosted employee forums, a practice he began several years ago. The title of the presentation is indicative of the vision that drives our cardiovascular team: Leaders in Motion, Guided by Mission. It is a perfect description of the journey SCI has taken since it opened.

Meeting and exceeding national benchmarks in clinical outcomes is the commitment we make to the communities we serve and underscores our passion for excellence in cardiovascular care.

Meeting and exceeding national benchmarks in clinical outcomes is the commitment we make to the communities we serve and underscores our passion for excellence in cardiovascular care. In this issue of Cardiac Differential, we share the milestones met by the SCI to enhance patient-centered care and quality-focused outcomes from robotics to research to benchmarks and biometrics. We are proud to share our passion for excellence with you, our colleagues, as we continue to provide extraordinary care and compassion to each patient who entrusts us with their lives. If I can provide you with more information or should you wish to contact me, please email berkovik@summa-health.org.



A handwritten signature in blue ink, appearing to read 'K Berkovitz', written in a cursive style.

Kenneth Berkovitz, M.D.
Chairman, Department of Cardiovascular Disease
Medical Director, Summa Cardiovascular Institute

PROFILE

The Summa Cardiovascular Institute (SCI)

The SCI provides tertiary care for the area's highest-risk patients and offers current services and technology designed to provide the most comprehensive heart and vascular diagnosis and treatment. Services are comprised of invasive/interventional cardiology, noninvasive cardiology, cardiopulmonary rehabilitation, heart rhythm services/electrophysiology, cardiothoracic surgery, peripheral vascular, vascular surgery and noninvasive vascular procedures and screenings.

The expertise and quality of the SCI is recognized nationally and includes the following:

- Solucient/Thomson Healthcare Top 100 Cardiovascular Hospitals in multiple years
- Premier Awards for Acute Myocardial Infarction and Heart Failure
- Recognition from The Leapfrog Group
- The American Heart Association's "Get With The Guidelines" 2008 Sustained Performance Award for Coronary Artery Disease
- The American Heart Association's "Get With The Guidelines" Silver Stroke Performance Achievement Award
- The Medicare Payment Advisory Commission selection for quality and outcomes

The Summa Cardiovascular Institute was established in 2006 when its cardiovascular services (cardiology, cardiovascular surgery and vascular surgery) at Summa Akron City and Summa St. Thomas Hospitals were organized and aligned.

On an annual basis, the SCI has close to 9,000 cardiovascular admissions and its volume continues to increase. In 2008, noninvasive cardiology procedures increased by 9 percent, noninvasive procedures increased by 8 percent and the total activity for cardiac and pulmonary rehabilitation sessions and procedures increased by 13 percent.



QUICK FACTS

Summa Health System

- **Six-Hospital System:** 2,060 licensed beds, 61,600 admissions and 851,900 outpatient visits in 2008
- **Level 1 Trauma at Summa Akron City Hospital:** 221,300 ED visits in 2008
- **Community Locations:** Six outpatient health centers, Wellness Institute (medically based fitness), Falling Waters Spa
- **SummaCare Health Plan:** 130,000 Covered Lives, 13,000 Medicare Risk HMO
- **Total Employees:** 10,200

Summa Health System

Summa Health System is one of the largest integrated delivery systems in Ohio and is nationally renowned for excellence in patient care. Summa Health System hospitals includes Summa Akron City Hospital, Summa St. Thomas Hospital, Summa Barberton Hospital, Summa Western Reserve Hospital, Summa Wadsworth-Rittman Hospital and affiliate Robinson Memorial Hospital. The System represents more than 2,060 licensed inpatient beds, four community health centers, 10,200 employees, a physician-hospital organization with more than 1,000 physicians, a multi-specialty physicians group with 200 members and a nationally-owned health plan covering more than 130,000 covered lives. Summa Akron City Hospital and Summa St. Thomas Hospital are teaching affiliates of the Northeastern Ohio University College of Medicine (NEOUCOM) and offer seventeen accredited residency training programs. Summa Barberton Hospital is a teaching affiliate of NEOUCOM, offering an accredited family practice residency training program. Summa Health System's clinical services are consistently recognized by national clinical and quality organizations.

INTEGRATING PROCESS & TECHNOLOGY

Regionalizing Code STEMI

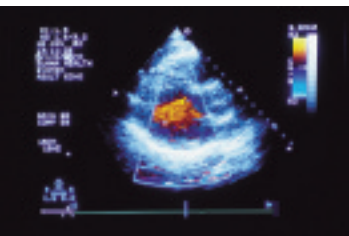
One of our major process improvements includes the launch of Code STEMI, a protocol designed to achieve a consistent 90-minute or less, door-to-balloon time for ST segment elevation myocardial infarction patients. Code STEMI includes a dedicated on-call team at Summa Akron City Hospital, which is activated when patients are enroute from home or one of Summa's hospitals in the region. In 2008, our mean STEMI door-to-balloon time was 63.2 minutes.

The charts detail our performance benchmarked against the American Heart Association's *Get With The Guidelines Quality Indicators* related to door-to-balloon experience.

Process improvement directly and favorably impacted clinical care and patient outcome.

Launching Computerized Physician Order Entry (CPOE) & Picture Archiving

Summa Health System invested more than \$30 million (and \$3 million in grants to area medical practices to coordinate with the system) to improve business and clinical processes and was the first health system in the Akron/Canton area (and one of 5% of hospitals nationally) to implement a CPOE system. With CPOE, physicians enter patients' diagnostic tests, medications, physician referrals, x-rays and sign orders electronically. Physicians can access information regarding drug allergies, ensure there are no duplicative orders and access Clinical Decision Support which reduces potential errors in real time.



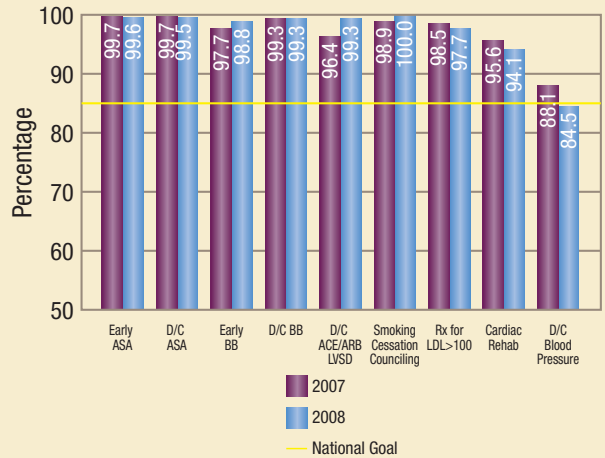
The picture Archiving Computer System (PACS) is a major advancement in Summa's radiology department's transformation from a film to no-film operation. It captures images digitally, stores them for immediate review, distributes the images to multiple locations via the web and creates a

database so images can be retrieved quickly. Images can be stored for archival purposes as well. Surgery suites are fitted with dual monitor view stations to allow immediate image view capability.

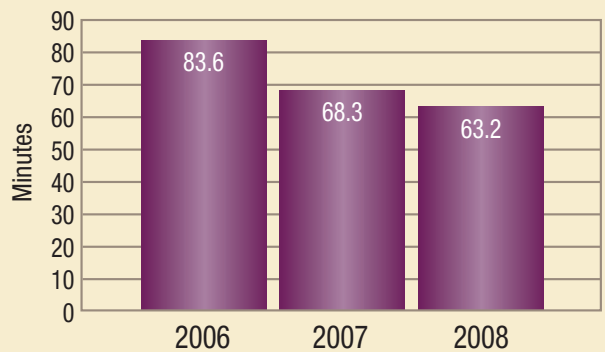
With our continuing commitment to support technology that directly impacts patient care, we are one of the nation's top 25 connected healthcare facilities.

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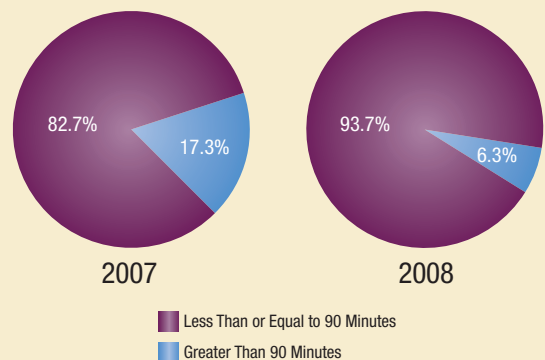
MI (STEMI and Non-STEMI) Summa Akron City Hospital



Mean STEMI Door-to-Balloon Summa Akron City Hospital



Door-to-Balloon Time: Percent of Patients Meeting 90 Minutes or Less Summa Akron City Hospital





Improving Cardiopulmonary Quality of Life

Our dedication to patient-centered and evidence-based outcomes extends beyond diagnostic and interventional models to include vital



quality of life issues. Our cardiovascular and pulmonary rehabilitation program, with extensive clinical investigations funded by entities including the NIH (National Institutes of Health) and the Ohio Board of Regents,

exhibits comprehensive improvements through synergistic medical management, preventive cardiovascular care, behavioral intervention and patient empowerment. Patient aggregate outcomes in exercise capacity evidenced a 27% improvement, a 27% improvement in mean pre- and post-Beck Depression Inventory scores and a 43% improvement in risk factor comprehension. Participant satisfaction with test and treatment averaged above 98% for more than five years and service growth exceeds 24% for the same time period.

Evolving from our History

The same kind of polymer research that made Akron the rubber capital of the world in the 20th century is one of the primary sources of new devices, treatments and innovations in this century. To promote medical research and better clinical delivery, Summa Health System is working with other community leaders in the region to bring together the best of Northeast Ohio's health education, clinical care and health research in the Academic Research Collaborative. Combining the individual strengths of universities and healthcare institutions, we are creating a united front in the region's pursuit of research dollars and expanding capacity for collaboration, innovation, and biotechnology advancements designed to improve healthcare and ensure the next generation of our region's workforce is well-educated and prepared to work in the evolving environment of healthcare.

Promoting Exceptional Quality and Outcomes

Summa Akron City Hospital received the American Stroke Association's "Get With the GuidelinesSM" Stroke Silver Performance Achievement Award, recognizing our commitment and success in implementing a higher stroke standard of care. Our goal to optimize patient care and improve quality of life for patients affected by coronary artery disease, heart failure and stroke is achieved through performance with these standards.

Integrating a High Quality Health Plan

Recognized as one of the 50 best health plans in America and the highest-ranked plan in Ohio, SummaCare was founded in 1993 to help Summa and other local employers work collaboratively to better manage employee health costs. Today, it is a major community asset with a network of more than 7,000 providers and 50 hospitals and more than 115,000 members dedicated to ensuring healthcare is extended beyond the four walls of the hospital to the communities we serve. SummaCare health costs are below the national average and outcomes are above the national average with a quality ranking in the top one percent nationally. SummaCare is recognized for outstanding product offerings and exceptional customer service by *U.S. News & World Report*.



Summa Health System is in the top 5% of hospitals (nationally) to implement a computerized order entry system.

LEADING THE WAY IN MINIMALLY INVASIVE SURGERY

When Eric Espinal, M.D., Summa cardiothoracic surgeon, performed a robotic lobectomy in January 2009, he became the first physician in the region and one of only four in the nation, to offer the procedure for patients with lung cancer.

“The robotic lobectomy is a significant advance in the treatment of early stage lung cancer, offering multiple benefits for patient outcome and patient satisfaction,” Dr. Espinal reported. “And we’re comparing our outcomes for quality and clinical expertise with the registry of the Society of Thoracic Surgeons.”

In 2008, he performed Akron’s first closed-chest robotic mitral valve repair surgery. “Recent recommendations from the American Heart Association include surgery for patients with severe mitral regurgitation even before patients become symptomatic,” Dr. Espinal

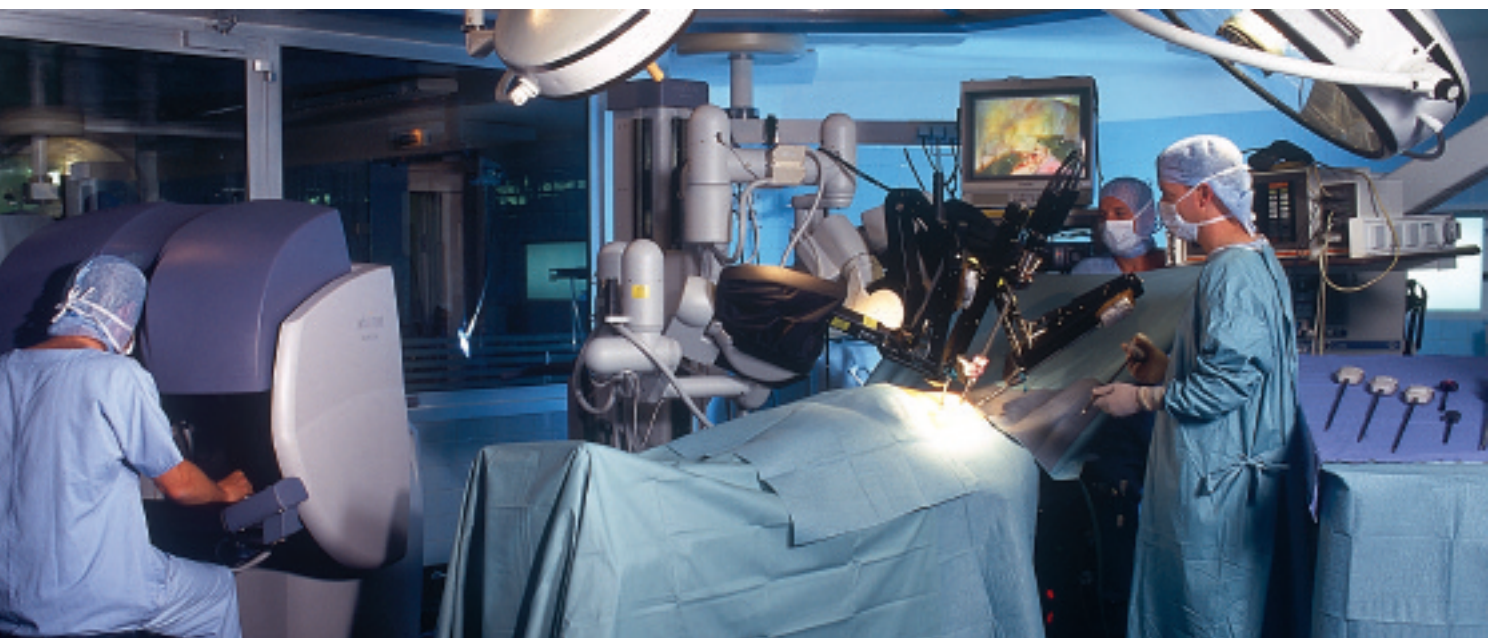
stated, “and early surgical intervention results in better preservation of heart function and improved long-term results.”

Espinal noted the same technology also was used to perform hundreds of procedures annually, including robotically-assisted transmyocardial revascularization (TMR) for acute angina and an endoscopic approach to microwave ablation for atrial fibrillation.

“We’ve made a concerted commitment to employ the best technology, technique and research in order to maximize patient outcome,” he reports. “Using clinical excellence and advanced technology for patient benefit is the nexus of our patient-care mission.”

“Our integrated approach to the delivery of care to cardiac patients enables us to be at the forefront of medical and surgical advances,” Dr. Espinal stated.

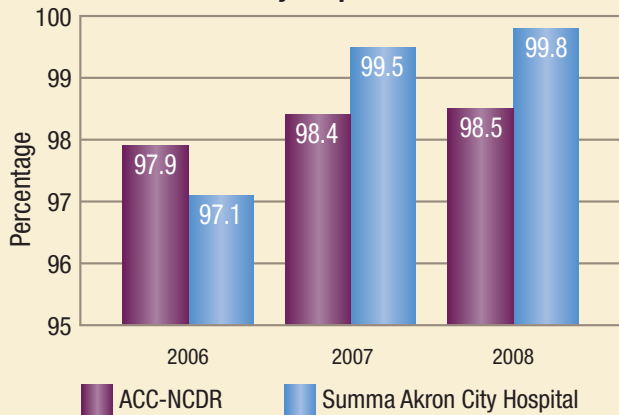
Summa’s Institute for Minimally Invasive Therapeutics offers a comprehensive multidisciplinary approach to both diagnostic and surgical procedures in multiple specialties. The latest addition to the Institute is the total integrated operative suite offering robotics, digital imaging, video and audio conferencing capabilities. This makes Summa Health System one of the few healthcare facilities in the state of Ohio with this level of advanced technology.



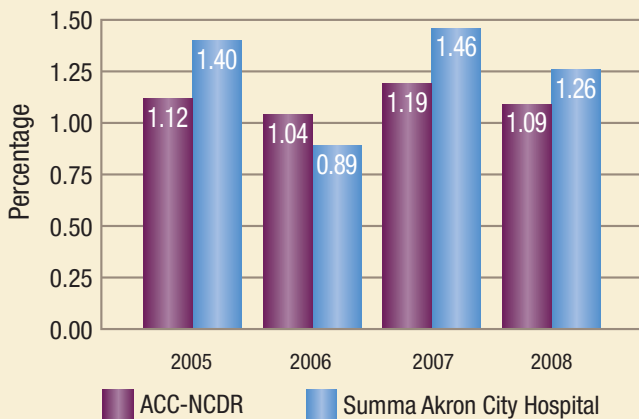
QUALITY PERFORMANCE

CORONARY INTERVENTION

**Thienopyridine on Discharge
(patients with Stents)
Summa Akron City Hospital**

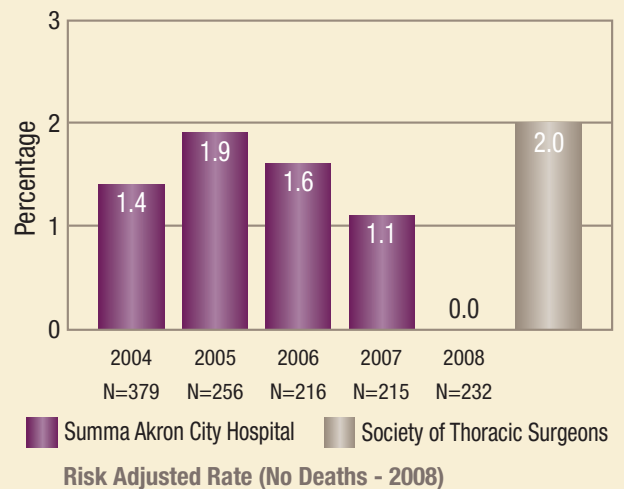


**Risk Adjusted Mortality
Summa Akron City Hospital**

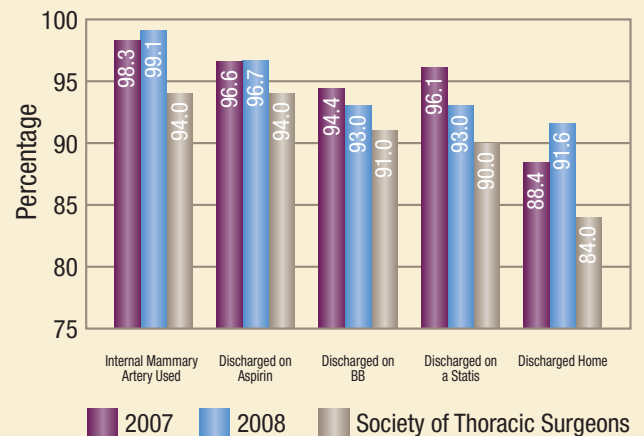


CARDIOTHORACIC SURGERY

**CABG Operative Mortality
Summa Akron City Hospital**



**Other CABG Quality Indicators
Summa Akron City Hospital**



CENTER FOR CARDIOVASCULAR RESEARCH SUPPORTS CLINICAL EXCELLENCE

Education, research and training in the scientific disciplines, and support to researchers and academic collaborators, historically provided the foundation for the effective management and prevention of cardiovascular disease; thereby enhancing the quality of life for those affected by this disease.



Led by Kevin H. Silver, M.D., Director of Cardiology Medical Education and Kenneth Berkovitz, M.D., Chairman of the Department of Cardiology, the Center for Cardiovascular Research provides the organizational structure, administrative leadership and infrastructure to facilitate clinical and basic research in

cardiovascular disease management through interdepartmental and peer collaboration with academic and professional institutions.

Key topics of recent and current cardiovascular research were selected for presentation at national conferences and/or publication. They include:

- Cognitive Benefits of Cardiac Rehabilitation in Heart Failure (\$2.7 million grant over 4 years funded by NIH)
- Smart Heart Study: Cognitive Benefits of Cardiac Rehabilitation (grant funded by the Ohio Board of Regents)
- The Effect of Portable Oxygen Containers: Energy Expenditure & Oxygen Consumption in Patients with COPD
- Cardiac Rehabilitation Improves Memory in Older Adults with Cardiovascular Disease
- Behavior and Exercise Stress Test Performance (Best) Study
- Mindfulness-Based Stress Reduction for High Blood Pressure (grant funded by NIH)

Four Cardiac Catheter Lab-Based Clinical trials also are underway:

- **VIRGO:** Variation in Recovery: Role of Gender on Outcomes of Young Acute Myocardial Infarction patients: This National Institute of Health-funded clinical trial studies women and men, 55 years of age and younger, who had heart attacks. The trial will identify key determinants of recovery and provide information that can improve the care and outcomes of this population.
- **XIENCE:** The Xience V Everolimus Eluting Coronary Stent System USA Post-Approval study is sponsored by Abbott Vascular. It is a post-marketing registry that follows all patients implanted with the Xience stent for five years.

- **ENDEAVOR SMALL VESSEL STUDY:** This study sponsored by Medtronic Vascular consists of patients with various sized vessels who will receive the Endeavor drug eluting stent. Patients will be followed for five years.
- **CORAL:** The Cardiovascular Outcomes in Renal Atherosclerotic Lesions study is sponsored by the NIH. It randomizes patients with renal artery stenosis to be treated with either a Genesis stent or medication.

Future studies slated to begin under the direction of the Center for Cardiovascular Research (CCR) include:

- Medical Adherence: A Comprehensive Literature Review
- Ramped Exercise Protocol Study
- Pulmonary Rehabilitation Quality of Life, Diet and Exercise
- Mega Study: Depression and Memory in Cardiac Rehabilitation. Stages of Change in Cardiac Rehabilitation, Cognitive Screening, Medical Adherence, Serum Inflammatory Markers and Cognition and Depression
- The Relationship of Serum Inflammatory Markers, Physiologic Capacity and Pulmonary Rehab participation to Cognitive and Psychosocial Variables in Pulmonary Patients
- Health Literacy in Cardiac Rehabilitation
- The Underserved Elderly in Cardiac Rehabilitation
- Knowledge and Depression Study
- Use of Interactive Adult Patient Education in Achieving Risk Factor Literacy: Methodology vs. Media

The CCR plans to continue its research program on depression in heart disease, especially the effects of depression on the autonomic nervous system. The SCI believes this line of research is particularly important because there are no widely accepted solutions for the public health issue of depression in cardiac disease. The CCR hopes to demonstrate cardiac rehabilitation may be a preferred way to improve outcomes for cardiac patients with depression. It also plans to continue its research program on psychosocial factors in heart failure treated with implantable cardioverter defibrillators. This research seeks to evaluate not only the rates of distress among patients treated with ICD, but also the key predictors of distress, how distress impacts physical functioning and how cognitive dysfunction and distress jointly relate to adherence.

CARDIOTHORACIC MULTIDISCIPLINARY IRB-APPROVED RESEARCH PROTOCOLS

Study Title	Principal Investigator	Sponsor
Cardiothoracic Surgery RP#: 08102 The Potential Adverse Effects of Red Cell Storage Duration on Cardiac Surgery Outcomes at a Large Community Hospital. Are They Avertable?	Eric Espinal, M.D.	
Cardiology The Atlantic C-PORT Trial (Elective Angioplasty)	A. Roger Tsai, M.D.	
The Atlantic C-PORT Trial (Primary Angioplasty)	A. Roger Tsai, M.D.	
Occluded Artery Trial (OAT)	Kevin Silver, M.D.	NIH
WATCHMAN Left Atrial Appendage System for Embolic PROTECTION in Patients with Atrial Fibrillation (PROTECT AF)	Michael Pelini, M.D.	Atritec
The ENDEAVOR Small Vessel Stenting (SVS) Registry: A Clinical Evaluation of the Medtronic Endeavor Zotarolimus-Eluting Coronary Stent System in the Treatment of Single De Novo Lesions in Small Diameter Native Coronary Arteries.	Kenneth Berkovitz, M.D.	Medtronic Vascular, Inc.
RESOLUTE US:A Clinical Evaluation of the Medtronic Endeavor Resolute Zotarolimus-Eluting Coronary Stent System in the Treatment of De Novo Lesions in Native Coronary Arteries with a Reference Vessel Diameter of 2.25mm to 4.2mm.	Kenneth Berkovitz, M.D.	Medtronic Vascular, Inc.
DESERT: (Drug Eluting Stent Event Registry of Thrombosis) The National DES Thrombosis Registry.	Kenneth Berkovitz, M.D.	Cardiovascular Research Institute
Observational Study of the Sleuth Implantable ECG Monitoring System - OBSERV ECG	Michael Pelini, M.D.	Transoma Medical
CHAMPION: CardioMEMS Heart Sensor Allows Monitoring of Pressure to Improve Outcomes in NYHA Class III Heart Failure Patients (Protocol CM-06-04)	Otfried Niedermaier, M.D.	CARIOMEMS
Cardiovascular Outcomes in Renal Atherosclerotic Lesions: Randomized and Multi-Center Two-Group Clinical Trial to Assess The Best Treatment for Patients with High Blood Pressure and Renal Artery Stenosis: Stenting with Anti-Hypertensive Medical Therapy, Compared to Medical Therapy Alone	Joseph Pietrolungo, D.O.	NIH
A Multicenter, Double-Blind, randomized Study to Establish the Clinical Benefit and Safety of Vytorin (Ezetimibe/Simvastatin Tablets) vs. Simvastatin Monotherapy in High-Risk Subjects Presenting with Acute Coronary Syndrome	Kevin Silver, M.D.	
(TRA*CER)A Multi-center, Randomized, Double-Blind, Placebo-Controlled Study to Evaluate the Safety and Efficacy of SCH 530348 in Addition to Standard of Care in Subjects with Acute Coronary Syndrome: Thrombin Receptor Antagonist for Clinical Event Reduction in Acute Coronary Syndrome	Kevin Silver, M.D.	Schering-Plough Research Institute
Double Blind, Placebo-Controlled, Multicenter Acute Study of Clinical Effectiveness of Nesiritide in Subjects With Decompensated Heart Failure	Otfried Niedermaier, M.D.	
FREEDOM - A Frequent Optimization Study Using the QuickOpt Method	Michael Pelini, M.D.	St. Jude Medical

CONTINUED ON NEXT PAGE

CARDIOTHORACIC MULTIDISCIPLINARY IRB-APPROVED RESEARCH PROTOCOLS

CONTINUED FROM PAGE 9

Study Title	Principal Investigator	Sponsor
Cardiology (continued)		
Endeavor IV: A Randomized, Controlled Trial of the Medtronic Endeavor Drug (ABT-578) Eluting Coronary Stent System vs. The Taxus TM Paclitaxel-Eluting Coronary Stent System in DeNovo Native Coronary Artery Lesions.	Kenneth Berkovitz, M.D.	Medtronic Vascular, Inc.
(07028) A Phase 3, Active (Warfarin) Controlled, Randomized, Double-Blind, Parallel Arm Study to Evaluate Efficacy and Safety of Apixaban in Preventing Stroke and Systemic Embolism in Subjects with Nonvalvular Atrial Fibrillation Protocol CV 185030	Otfried Niedermaier, M.D.	Bristol-Myers Squibb Pharmaceutical Research Institute
JOSTENT Coronary Stent Graft for Commercial Use in Selected Patients through a Humanitarian Device Exemption (HDE)	William Bauman	Abbott Vascular
VIRGO-Variation in Recovery: Role of Gender on Outcomes of Young Acute Myocardial Infarction Patients	Kenneth Berkovitz, M.D.	
XIENCE V Everolimus Eluting Coronary Stent System (EECSS) USA Post-Approval Study	Kenneth Berkovitz, M.D.	
OptiVol Care Pathway Study	Michael Pelini, M.D.	St. Jude Medical
A phase III, double-blind, randomized placebo-controlled study, to evaluate the effects of dalcetrapib on cardiovascular (CV) risk in stable CHD patients, with a documented recent Acute Coronary Syndrome (ACS)	Kevin Silver, M.D.	Roche
OptiSense Performance in Detecting Atrial Episodes: SENSE-AF	Michael Pelini, M.D.	St. Jude Medical
NIH		
Mindfulness Based Stress Reduction for High Blood Pressure Integrating Growth, Neurocognitive, and Inflammation research To Enhance Rehabilitation (IGNITE Rehab)	Joel Hughes, Ph.D.	NCCAM
	Joel Hughes, Ph.D.	
Cardiovascular Health Core Research Program		
Cardiac Rehabilitation: A Twenty Year Perspective of Patient Demographics and Temporal Trends	James Rosneck, BSN, MS	
Does depression impede improvements in knowledge of cardiovascular risk factors during cardiac rehabilitation?	Joel Hughes, Ph.D.	
Cognition and Heart Failure in Cardiac Rehabilitation (CHFCaRe)	John Gunstad, Ph.D.	
Vascular Surgery		
ARYx Protocol ATI 5923 CLN 505: A Randomized, Double Blind Comparison of ATI 5923, a Novel Vitamin K Antagonist, with Warfarin in Patients Requiring Chronic Anticoagulation	Joseph McShannic, M.D.	ARY Therapeutics
OTHER		
An Analysis of Non-Completer Profiles in Phase II Cardiac Rehabilitation	James Rosneck, BSN, MS	Summa Foundation
Self-management and Cognitive Function in Adults with Cardiovascular Disease: Heart Failure	Joel Hughes, Ph.D.	NIH
Depression and Gains in Exercise Capacity during Phase-II Cardiac Rehabilitation	Joel Hughes, Ph.D.	
The CaReS Battery: Measuring Stages of Change in Cardiac Rehabilitation through the Development of a Targeted Instrument	Joel Hughes, Ph.D.	

REGION'S LARGEST, MOST EXPERIENCED CARDIOVASCULAR TEAM



Michael D. Bage, M.D.
SPECIALTIES: Cardiovascular Disease



William B. Bauman, M.D.
SPECIALTIES: Cardiovascular Disease, Interventional Cardiology



Kenneth E. Berkovitz, M.D.
SPECIALTIES: Cardiovascular Disease, Interventional Cardiology



Roger B. Chaffee, M.D.
SPECIALTIES: Cardiovascular Disease



David A. Cutler, M.D.
SPECIALTIES: Cardiovascular Disease



Robert F. Debski, M.D.
SPECIALTIES: Thoracic Surgery



Brian J. Donelan, M.D.
SPECIALTIES: Cardiovascular Disease



Philip M. Dorfman, M.D.
SPECIALTIES: Cardiovascular Disease



Eric A. Espinal, M.D.
SPECIALTIES: Thoracic Surgery



Stephen W. Fannin, M.D.
SPECIALTIES: Cardiovascular Disease



John A. Fink, M.D.
SPECIALTIES: Vascular Surgery



Mark A. Iler, M.D.
SPECIALTIES: Cardiovascular Disease



Philip H. Keyser, M.D.
SPECIALTIES: Cardiovascular Disease, Clin Cardiac Electrophysiology



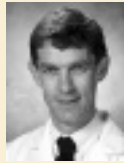
Joseph R. McShannic, M.D.
SPECIALTIES: Vascular Surgery, Peripheral Vascular Surgery



John A. Moawad, M.D.
SPECIALTIES: Vascular Surgery, General Surgery



Daniel J. Newton, M.D.
SPECIALTIES: Cardiovascular Disease, Interventional Cardiology



Otfried N. Niedermaier, M.D.
SPECIALTIES: Cardiovascular Disease



Michael A. Pelini, M.D.
SPECIALTIES: Cardiovascular Disease, Clin Cardiac Electrophysiology



Drazen Petrinec, M.D.
SPECIALTIES: Vascular Surgery



Joseph F. Pietrolungo, D.O.
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Joseph D. Redle, M.D.
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Joseph Rinaldi, M.D.
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Ted F. Shaub, M.D.
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Kevin H. Silver, M.D.
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Khaled M. Sleik, M.D.
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A Roger Tsai, M.D.
SPECIALTIES: Cardiovascular Disease, Interventional Cardiology

NOT PICTURED

Stephen M. Heupler, M.D.
SPECIALTIES: Cardiovascular Disease

Michael M. Hughes, M.D.
SPECIALTIES: Cardiovascular Disease, Interventional Cardiology

Stephen Klautky, M.D.
SPECIALTIES: Cardiovascular Disease

Cynthia M. Pordon, D.O.
SPECIALTIES: Cardiovascular Disease

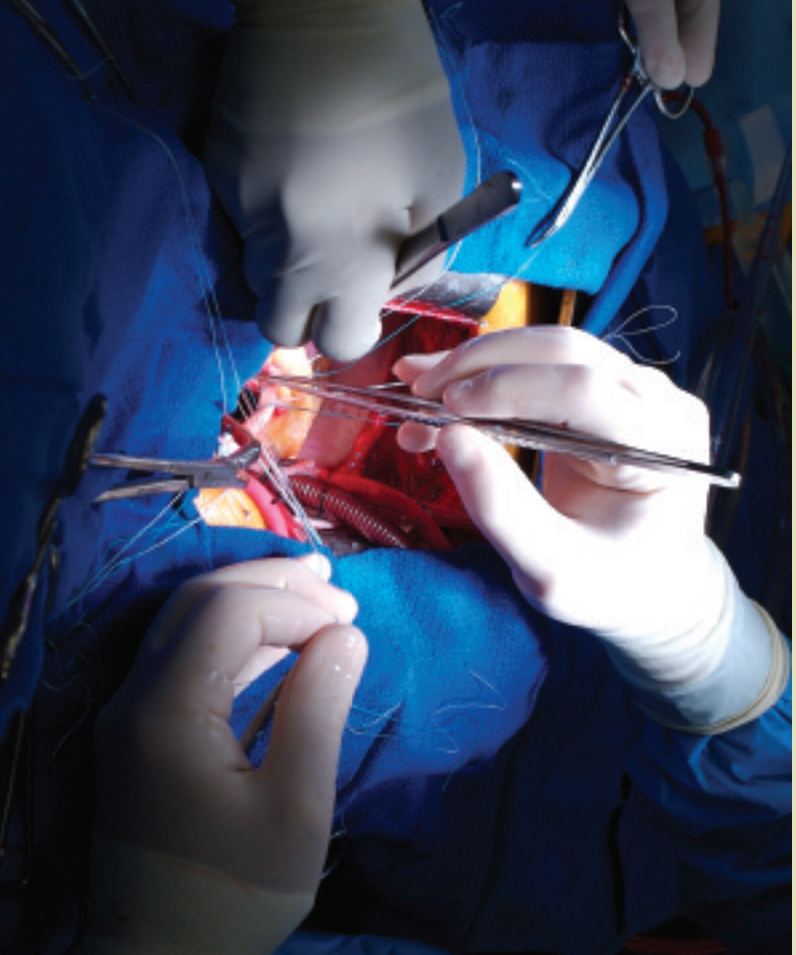
David N. Rubin, M.D.
SPECIALTIES: Cardiovascular Disease

Jason K. Smith, M.D.
SPECIALTIES: Cardiovascular Disease, Cardiac Electrophysiology

**Physicians listed are Summa Physician Inc.*



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