

We Can See What's in Your Heart

With the new 64-slice CT scanner patients can peek inside their arteries noninvasively, and life-saving diagnoses can be made in a heartbeat.

By all indications, Tammy Omori was at high risk for a heart attack.

"My family history included sudden cardiac deaths, and my mother suffered two strokes in her early 60s," confides the attorney. "I had a high-stress job, led a sedentary life, had high cholesterol levels, and was a closet smoker. In 2005 after having pressure in my chest on a daily basis, I went to the emergency room, where they performed a number of tests and kept me overnight because of my risk factors.

"With the exception of high cholesterol levels, I was ruled out as normal, was put on a statin, and was released, relieved to hear that I had no cardiac problems."

In January 2006, Tammy's daily chest tightening recurred.

"I was concerned," she remembers. "The cardiology internist I was seeing at the time assured me it was stress related, but I kept pushing. I began exercising, started trying to quit smoking, and considered finding another job, but the chest pressure would not go away."

When Tammy requested further tests, she was given a thallium (radioactive isotope) stress test and a sleep study, which included overnight cardiac monitoring. The sleep study indicated that she had some mild sleep apnea, which occurs when breathing is temporarily interrupted during sleep.

"The study also showed that my heart rate was slowing down while I slept," recounts Tammy. "My pulmonologist [physician who specializes in treating lung disease] was convinced there was something more going on, but my cardiologist found no cardiac problems and believed the chest pressure was completely stress related. She suggested I learn some stress management techniques such as yoga and that I consider a new job. She also put me on antidepressants."

After reflection, Tammy realized she liked her job and had a happy family life.

"There was nothing going on that I wanted to change," observes Tammy, "so I asked her for a doctor's note to initiate the Family and Medical Leave Act so I could take some time off to evaluate my next step."

Tammy says that because her doctor was too busy to write a note, she sent over a copy of her thallium stress test report instead.

"It sat on my desk for three days before I read it," recalls Tammy. "When I finally did look it over, I learned that the report referred to a mild profusion

defect. I didn't know exactly what that meant, but it was disturbing to me and I wanted to find out more.

"I went to the catheteriza-



Bay Area Cardiology Associates, P.A.

- Ranchhod N. Khant, MD, FACC
- Saurabh K. Chokshi, MD, FACC
- Hoshedar P. Tamboli, MD, FACC
- Stephen W. Mester, MD, FACC
- William J. Bugni, MD, FACC
- Robert M. Betzu, MD, FACC
- Rolando D. Rodriguez, MD, FACC
- Sue Stonerock, MD
- Tehreen Khan, MD, FACC
- Robert M. Dewhurst, MD, FACC

tion laboratory at Brandon Regional Hospital, where I spoke with Dr. Tamboli."

Hoshedar P. Tamboli, MD, FACC, is a board-certified cardiologist with Bay Area Cardiology Associates, a 10-physician practice that covers all areas of cardiology including angioplasty, stents, electrophysiology, heart transplants, and artificial hearts. Dr. Tamboli is chair of the cardiovascular department at Brandon Regional Hospital.

"He could see that I was upset," notes Tammy, "so he took the time to calm me down and listen. I showed him the report, gave him my family history, explained why I was concerned, and asked him what it meant.

"After considering everything, Dr. Tamboli recommended that I have a 64-slice CT scan. Because I had been a CT technician before going to law school, I was familiar with CT scan technology."

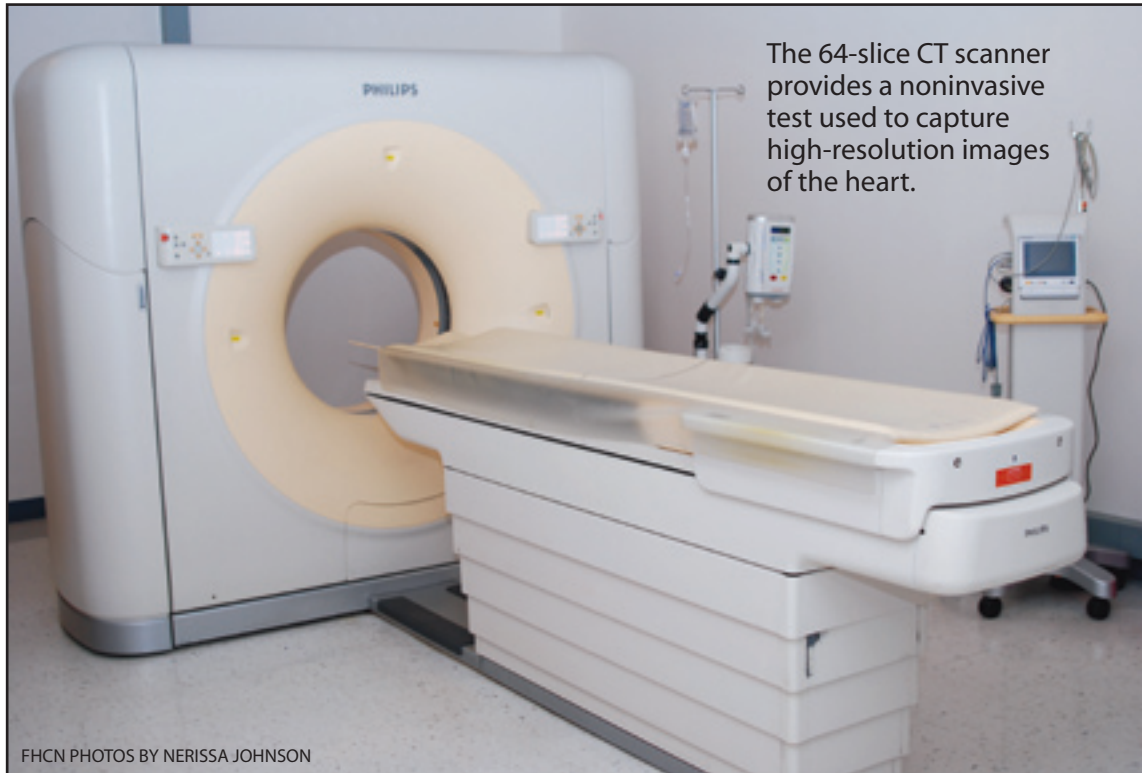
Based on her medical history, Tammy was quickly scheduled for a CT scan.

Amazing views

The 64-slice CT scanner represents a new age in noninvasive cardiac imaging.

"The recently developed 64-slice CT scanner enables most patients to be scanned with very high resolution," educates William J. Bugni, MD. Dr. Bugni is certified by the American Board of Internal Medicine with a subspecialty in cardiovascular disease. He is in practice with Bay Area Cardiology Associates and has privileges at Brandon Regional Hospital.

"Patients with a positive stress test or those having chest discomfort may be good candidates for the 64-slice CT scan," says Dr. Bugni. "An optional diagnostic test would be the cardiac catheterization, which



The 64-slice CT scanner provides a noninvasive test used to capture high-resolution images of the heart.

FHCN PHOTOS BY NERISSA JOHNSON

is performed by placing a catheter, usually through the groin into the femoral artery and advancing it up to the heart. Contrast is injected directly into the coronary arteries, and pictures are taken. It involves hospitalization and is an invasive procedure with some risk. The 64-slice CT scan is a noninvasive test that can be performed conveniently in an outpatient setting.



William J. Bugni, MD

"Diagnostically the cardiac catheterization looks at the channel of the artery, whereas the 64-slice CT scan actually looks at the wall and the lumen of the artery. Potentially life-threatening calcium and soft plaque can be seen much more clearly than with cardiac catheterization."

Clear, detailed images of the heart and other organs are possible using 64-slice CT scanners, Dr. Bugni says. A high-resolution image can be

created within approximately 8 to 10 seconds.

"These 3D images of the heart can be rotated in space from different angles and different views to see images of the arteries," explains the doctor. "It is almost unlimited what can be seen with this computer technology. We can isolate a coronary artery on the screen, spin it around from every angle, and look at it from every side to visualize any blockages."

Life-saving technology

Tammy says that within hours after taking the 64-slice CT scan, she received a message.

"As soon as Dr. Bugni read my report from the CT scan he had the hospital call me," remembers Tammy. "I knew something was wrong when they asked me to come in with my husband."

Tammy says she had more than a 90% blockage of a major coronary artery with a life-threatening lesion.

"When I arrived, Dr. Bugni

was so calming," says Tammy. "He came over, sat me down, and put his arm around me for support. He was absolutely wonderful.

"I knew right then that these were the doctors for me."

Tammy was immediately admitted to the hospital and was rushed into surgery where she required two stents to open up her blockage.

"If it weren't for Drs. Tamboli and Bugni I would not be alive right now," says Tammy, "and after all the other diagnostic tests I had, the 64-slice CT scanner was the only one that detected the blockage.

"The doctors and the scanner saved my life."

FHCN—Kris Kline

For more information

The friendly staff looks forward to answering your calls. For the Brandon location at 635 Eichenfeld Dr., please call (813) 684-6000, or for the Sun City location at 3920 Galen Ct., call (813) 634-7200.

Bay Area Cardiology Associates is pleased to announce that patients will be able to see the physician of their choice in the Brandon and Sun City offices as per the following schedule.

	PHYSICIAN	BRANDON	SUN CITY
Note: Schedule will change only if physician is out.	Dr. Khant	Mon. 8 am–5 pm Thurs. 1 pm–5 pm	Tues. 8 am–5 pm
	Dr. Chokshi	Tues. 8 am–5 pm	Thurs. 8 am–5 pm
	Dr. Tamboli	Wed. 8 am–5 pm	Fri. 8 am–5 pm
	Dr. Mester	Thurs. 8 am–5 pm	Mon. 8 am–5 pm
	Dr. Betzu	Fri. 8 am–5 pm	Tues. 8 am–5 pm
	Dr. Rodriguez	Fri. 8 am–5 pm Mon. 8 am–12 pm	Wed. 8 am–5 pm
	Dr. Stonerock	Tues.–Fri. 8 am–5 pm	Mon. 8 am–5 pm
	Dr. Khan	Mon. 8 am–5 pm	Fri. 8 am–5 pm
	Dr. Dewhurst	Tues. 8 am–12 pm	Thurs. 8 am–5 pm