

FIRST COAST CARDIOVASCULAR INSTITUTE:

PROVIDING SKILL AND ATTENTIVE CARE FOR HEART AND CIRCULATION PROBLEMS

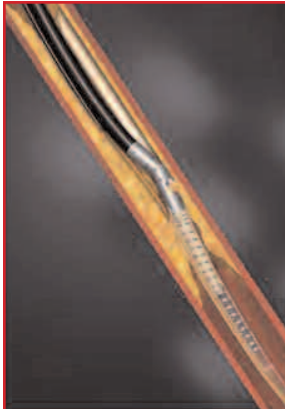
“Dear Dr. Ashchi,” wrote the patient, “Thanks for taking the time to be there when I needed you. I know my medical problems are many, and you have helped me so much.”

Cardiologist Majdi Ashchi says receiving such words of appreciation from his patients is the most rewarding part of his profession. In this particular case, a patient in his 60s had been a poor candidate for open-heart surgery. Yet because of his expertise as an interventional cardiologist, Dr. Ashchi was able to perform coronary artery stents and a carotid angioplasty stenting procedures. As a result, the patient has a much higher quality of life, and has regained his ability to drive.

Dr. Ashchi and Dr. Yazan Khatib, partners at First Coast Cardiovascular Institute, are often sought out by patients for a second opinion for a heart or circulatory problem. Board-certified in cardiology and interventional cardiology, both professionals bring advanced knowledge and skill to their care and treatment of patients.

Patients also appreciate what Dr. Ashchi calls “triple-A” service. “We are affable, available and able,” he explains. “Our entire staff understands the importance of friendly, caring interactions with every patient. Dr. Khatib and I make ourselves available to patients 24-7. And as a global cardiology group, we have the ability to provide diagnosis and treatment for problems of the heart and peripheral blood vessels. We work very closely as a team with the patients, their primary care physician, podiatrist, vascular surgeon and radiologist. Our team approach gives the patient the best results and the highest caliber of care.

Dr. Ashchi and Dr. Khatib make use of the newest drug-eluting stents for many of their patients with clogged arteries. “We use the medication-coated stents in patients who meet certain criteria,” says Dr.



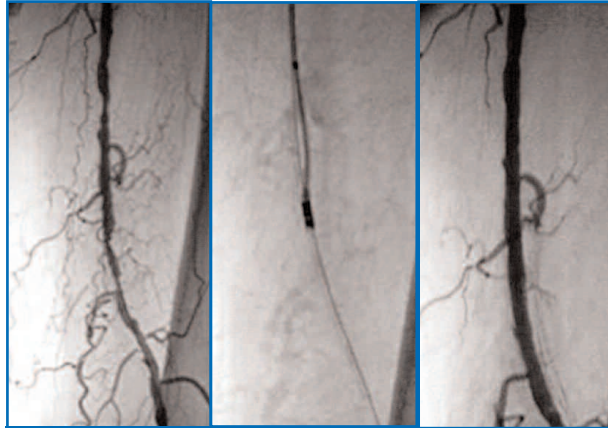
Three Step Process- Benefits Patient

Cutter is apposed to the plaque wall mechanically without any balloon dilatation.

Avoids creating barotrauma associated with intimal hyperplasia and restenosis.

Designed to result in less smooth muscle cell proliferation and less negative remodeling

Helps minimize patient ischemia



Silverhawk Benefits-

The operator- not the device design – determines cut length

Continuous longitudinal plaque shaving enables efficient treatment of long lesions

Single device can be used to treat multi-focal and multi-vessel disease

Ashchi. “While not everyone is a candidate for this kind of stent—some patients’ blood vessels may be too large for the current stents, for example—the new stents are proving to reduce restenosis (reclogging) and adverse cardiac events.” It is one of the best recent innovations that has revolutionized the field of interventional cardiology.

“Carotid stenting, which was approved by the FDA in August 2004, has revolutionized the way we treat high risk patients,” adds Dr. Ashchi. “The procedure offers new hope for patients who were not considered good candidates for surgery.” Dr. Ashchi has performed the stenting procedure since 1998. Dr. Cameron Haery, who joined the First Coast Cardiovascular team last year, trained with Dr. Jay Yadav, the world-renowned cardiologist who perfected the carotid stenting procedure at the Cleveland Clinic Foundation.

“The secret of the care of the patient is in caring for the patient,” said Dr. Francis W. Peabody in 1927. “The good physician knows his patient through and through. The treatment of a disease can be impersonal. The care of a patient must be completely personal.” Those powerful words sum up the practice of Dr. Ashchi and Dr. Khatib and the staff of First Coast Cardiovascular Institute.

What is Claudication?

Pain in the legs is called claudications. When blood flow is hindered or obstructed from (PVD) peripheral vascular disease, pain results. Usually occurs with work or exercise, but it may occur when you are resting. In addition to, weakness in the legs,

numbness, tingling, coldness, and change in skin color are all signs of PVD. More serious symptoms, such as ulcers or sores on the legs and feet, which do not heal, sometimes occur. Risk factors are smoking, hypertension, diabetes, family history of PVD, obesity and high cholesterol.

If PVD is suspected the diagnosis by noninvasive testing is pursued (for example, treadmill, ultrasound or arterial segmental study with resting and exercise (Ankle Brachial Index). If abnormal then, we recommend invasive procedures including angiography.

How is it treated?

Treatment will include aggressive risk factors modifications i.e. stop smoking, control diabetes, etc. Medications are prescribed for claudicants on an individual basis. Invasive treatment is occasionally required which includes angioplasty or stents that will be decided based on the findings of the angiogram. Other patients will need to be referred to our vascular surgeons for traditional surgery. Above all, exercising the leg by simple walking is the mainstay of treatment in these patients. Walking will help recruit collateral arteries which will help decrease the claudication and adverse events.



Dr. Ashchi and Dr. Yazan Khatib and associate Dr. Cameron Haery are at the very forefront for treating a wide range of heart and circulatory problems, especially the most difficult cases. Board-certified in cardiology and interventional cardiology, the professionals of First Coast Cardiovascular Institute bring advanced knowledge and skill to their care and treatment of patients.



“EXCELLENCE IS NEVER AN ACCIDENT, IT IS OUR LIFELONG COMMITMENT. ”
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