WISCONSIN COVERDELL STROKE PROGRAM

911 Door to Needle

Pre-hospital EMS

EMD receives call and dispatches EMS

EMS arrives at patient location

Pre-notification to ED
of suspected stroke patient

EMS Best Practice
Minutes from EMS arrival:
- </= 10 minutes on scene care

EMS Actions
Report to hospital:
- Stroke scale
- Blood glucose
- Blood pressure
- Last known normal

Transfer to nearest stroke ready center unless a primary stroke center is <15-20 minutes away

A combination of field triage and high level medical guidance of EMS will be needed to ensure a fair and equitable routing paradigm (Higashada, et al)

Emergency Department

Hospital Stroke Team activated

Stroke Team meets EMS
upon arrival to ED

Arrive at hospital -
directly to CT whenever possible

If candidate, administer IV tPA

Continue appropriate care of patient

ED Best Practice
Minutes from ED arrival:
- 25 minutes to CT initiation
- 30 minutes to coagulation studies available when indicated
- 45 minutes to CT interpretation
- 60 minutes to IV t-PA bolus

ED Actions
Single call activates:
- Stroke Team
- CT scanner cleared
- Stroke protocol/orders

Stroke team:
- ED MD rapid assessment
- NIH exam
- Complete Inclusion/exclusion criteria for IV t-PA
- Labs
- Weight
- VS's and neuro. checks
- Large bore IV
- Mixing of IV t-PA as soon as recognized as a possible candidate

Review

Quality Improvement Reviews

EMS and Hospital
- Review pre-hospital processes and provide feedback to EMS providers
- Review in-hospital processes and provide feedback to caregivers

Higashada, R, et al. Interactions Within Stroke Systems of Care: A Policy Statement From the American Heart Association/American Stroke Association. Stroke. Retrieved from http://stroke.ahajournals.org/content/early/2013/08/29/STR.0b013e3182a6d2b2.citation

Target Stroke. Retrieved from http://www.strokeassociation.org/STROKEORG/Professionals/TargetStroke/Target-Stroke_UCM_314495_SubHomePage.jsp

The Wisconsin Coverdell Stroke Program is a collaboration between the Wisconsin Department of Health Services, Metastar and the American Stroke Association/American Heart Association Midwest Affiliate. Funding for the program is made possible (in part) by the Centers for Disease Control and Prevention.