

PURPOSE:

The purpose of this policy is to establish the minimum data and report requirements for designated Primary Stroke Centers (PSC).

AUTHORITY:

Health and Safety Code, Division 2.5, Sections 1797.67, 1797.88, 1797.220, 1798, and 1798.170; California Code of Regulations, Title 22, Chapter 7.2

DEFINITIONS:

- A. "Advanced Life Support (ALS)" means special services designed to provide definitive prehospital emergency medical care as described in Health and Safety Code, Division 2.5, Section 1797.52.
- B. "Primary Stroke Center" (PSC) means a receiving hospital that has met the standards of the Center for Medicaid and Medicare Services (CMS); is accredited as a Primary Stroke Center by The Joint Commission, and has been designated as a PCS by SJCEMSA.
- C. "Door to Needle" means the time interval as measured from the time the patient arrives at the hospital emergency department until initiation of fibrinolytic therapy.

POLICY:

- I. Monthly Data Submission Requirements.
 - A. For each patient transported to the PSC by ambulance who have a stroke documented on the prehospital patient assessment, collect data on a form provided by the EMS Agency that at a minimum includes:
 - 1. Hospital Arrival Date.
 - 2. Prehospital Incident Number.
 - 3. Hospital Record Number.
 - 4. Patient date of birth.
 - 5. Patient Age.
 - 6. Patient Gender.
 - 7. Admitting Diagnosis.
 - 8. Final Diagnosis Related to Stroke (Y/N).
 - 9. Hospital Arrival Date.
 - 10. Time Transfer of Care at Hospital.
 - 11. If Patient Transferred to Another Hospital, Hospital Name.
 - 12. Reason If Patient Transferred to Another Hospital.

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13. Discharge Date.
14. Discharge Time (Door out time).
15. Discharge Disposition.
16. Method of arrival (Ambulance, POV).
17. Incident Zip Code.
18. Time EMS on scene.
19. Time EMS at patient's side.
20. Time EMS Unit Left Scene.
21. Time EMS Unit Arrives at PSC (Door-In).
22. EMS Prehospital Provider Name.
23. Last Known Well Time (per EMS).
24. LKWT by EMS Unknowable (Y/N).
25. First Known Sick Time (time of discovery of stroke symptoms).
26. Blood Glucose Level.
27. Blood Glucose Level Not Determined (Y/N).
28. Blood Glucose Value.
29. Blood Pressure Systolic.
30. Blood Pressure – Diastolic.
31. Time stroke alert called to PSC.
32. Suspected Stroke by EMS (Y/N).
33. Stroke Screen Tool Used by EMS.
34. Outcome of Stroke Screen by EMS.
35. Stroke Severity Scale Used by EMS (Y/N).
36. Stroke Severity Scale Score.
37. Stroke Severity Score Not Determined (Y/N).
38. Time stroke alert called at PSC (Stroke Team Activation).
39. Time Brain Imaging Ordered.
40. Brain Imaging Initiated (Time patient at Computed Tomography (CT)).
41. CT report interpretation time (Time CT Read).
42. Time of neurology consult.
43. Time PSC and Neurologist make Stroke Treatment Decision.
44. NIH stroke scale score on initial examination.
45. Patient Positive for LVO (Y/N).
46. Last known well time per hospital.
47. IV-t-PA Initiated (TPA Administered).
48. Time of thrombolytic administration.

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II. Quarterly Aggregate Report Submission Requirements.

A. Hospital-Based Reports:

1. Total time and number of episodes per year that computed tomography (CT) was not available.
2. Number of stroke alerts with:
 - a. Patient deaths related to any interventions for stroke treatment.
 - b. Patient complications related to any interventions for stroke treatment.

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