Paul Coverdell National Acute Stroke Registry Quarterly Performance Measure Results

Number of Hospitals:

Demographic	N*	Percent*
Age		
18-29		
30-44		
45-59		
60+		
Race		
White		
Race other		
Gender		
Male		
Female		
Gender Missing		

Arrival Mode	N*	Percent*
EMS		
Private transportation		
Transfer		
ND		

Туре	N* Percent*
Ischemic	
ICH	
SAH	
TIA	
Ill-Defined (SNS)	
No stroke	
Missing	
Total	

Data source:

Centers for Disease Control and Prevention - Division for Heart Disease and Stroke Prevention

Denominator *	Percent*	HS/SNS	IS	TIA
			Х	
		X	X	
		X	X	
			X	Х
		x	X	
		X	Х	Х
		X	Х	Х
			Х	Х
			Х	Х
			Х	Х
			Х	
			Х	
			* Percent* HS/SNS	* Percent* HS/SNS IS

	Numerator	Denominator			Race		
Ischemic Stroke Only	*	*	Percent*	White*	Other*	Male*	Female*
tPA Given							
Dysphagia Screening							
VTE/DVT Prophylaxis by end of Day 2							
Antithrombotic Therapy by end of Day 2							
Assessed for Rehabilitation							
Stroke Education							
Smoking Cessation Counseling							
Antithrombotic Therapy at Discharge							
Statin Therapy at Discharge							
Anticoagulation for Atrial Fibrillation							
IV tPA within 60 minutes of ED Arrival							
NIHSS score recorded							

	Numerator	Denominator			Race		
TIA Only	*	*	Percent*	White*	Other*	Male*	Female*
Antithrombotic Therapy by end of Day 2							
Stroke Education							
Smoking Cessation Counseling							
Antithrombotic Therapy at Discharge							
Statin Therapy at Discharge							

	Anticoagulation for Atrial Fibrillation							
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	Numerator	Denominator			Race		
Hemorrhagic Stroke Only	*	*	Percent*	White*	Other*	Male*	Female*
Dysphagia Screening							
VTE/DVT Prophylaxis by end of Day 2							
Assessed for Rehabilitation							
Stroke Education							
Smoking Cessation Counseling							

Defect free care	Numerator *	Percent *
Ischemic inpatient		
Ischemic discharge		
Hemorrhagic		
TIA		

Median door-to-needle time	
All	
Ischemic only	

*Indicated weighted estimates

Data source:

Centers for Disease Control and Prevention - Division for Heart Disease and Stroke Prevention

Pre hospital performance measures (drafted 8 measures)	
% of stroke transports with an on-scene time<15 minutes	
% of stroke transports with a blood glucose checked and recorded	
% of stroke transports where EMS called in a stroke alert pre-notification	
% of stroke transports that had a stroke screen completed and recorded	
% of stroke transports that had a documented the time last known to be well	
% of stroke transports that had a documented time of discovery	
% of stroke transports that had a thrombolytic stroke check completed and documented	
% of stroke transports where EMS diagnosis agreed with hospital diagnosis	

Post-hospital Measures (drafted 9 measures)

% of stroke patients discharged to home who have died by 30 days

% of stroke patients who were seen in ED within 30 days of discharge

% of stroke patients who were readmitted to the hospital within 30 days of discharge

% of stroke patients reporting blood pressure (BP) > 140 systolic or > 90 diastolic among those checking their BP at home

% of stroke patients checking the BP at home

% of stroke patients reporting 2 or more falls within 30 days of discharge

% of stroke patients who stopped taking medications since discharge

% of stroke transports where EMS diagnosis agreed with hospital diagnosis

% of stroke patients that had a follow-up appointment scheduled prior to discharge

Adherence to the performance measures

% adherence to Coverdell patient-level performance measures of care for EMS	
% adherence to Coverdell patient-level performance measures of care for in-hospital and transition of care	
% of patients with defect-free in-hospital care by stroke type	
% of patients with defect-free care by EMS	

Data source:

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